



Resources for families  
of children with disabilities.

**Winter 2014-15**

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**Circuit** is a quarterly publication of South Dakota Parent Connection.

**Circuit** is intended to be a reference publication packed with information and is provided electronically and in printed format.

South Dakota Parent Connection also produces an electronic semi-monthly newsletter (weConnect) with current events and time-sensitive information.

CELEBRATING OUR 30th YEAR OF SERVICE

# Circuit

Offering information and assistance to parents and families caring for children with a disability or special need.



## What Parents Should Know... About Supporting Students Through 504 Plans and Health Plans

### What Is A 504 Plan?

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of disability by schools that receive federal financial assistance.

Each year, districts must identify and locate students with disabilities within the district. Public schools have a responsibility in providing free and appropriate education to students with disabilities in the school district's jurisdiction, regardless of the nature or severity of the disability. An appropriate education is one that is intended to ensure the needs of a student with disabilities are met as adequately as the needs of a student without disabilities. Section 504 does not guarantee certain results, like an A grade in class, but ensures through an individualized process that qualified students with disabilities have an equal opportunity to achieve those results.

To start the process, once a student has been identified, an evaluation must occur to determine what supports or services may be needed. An evaluation will rely on a variety of sources — testing, teacher recommendations, physical condition, social/cultural background, and behavior. A medical diagnosis may also trigger an evaluation as it may give the district a reason to suspect the student has a disability. The purpose of the evaluation is to answer two questions:

1. Does the child have a disability under Section 504 and
2. What are the child's individual education needs?

Does the child have a disability? What this question is asking is does the student have a physical or mental impairment which substantially limits one or more major life activities? There are three requirements one must meet

1. have an impairment;
2. the impairment must limit the person's ability to perform one or more major life activities; and
3. the limitation must be substantial.

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# What Is a 504 Plan?

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An impairment is any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting a bodily system, or any mental or psychological disorder. Some examples of major life activities include caring for oneself, walking, breathing, standing, and communicating. Some examples of major bodily functions include functions of the immune, digestive, neurological, and respiratory systems. Substantial limitation does not mean severe restriction or inability in performing major life activity but considers the condition, manner and duration of the disability.



## Evaluation and Placement Procedures

Before placing students with disabilities in any educational program, schools must evaluate carefully each student's skills and special needs. Federal requirements provide standards for proper evaluations and placement procedures. The test results must accurately reflect what the test is supposed to measure. Only trained people may administer the tests or evaluation materials.

Placement decisions must be made by a team that includes people who know about the student and understand the meaning of the evaluation information. The placement team must consider a variety of documented information for each student. Remember, the information must come from several sources, including the results of aptitude and achievement tests, teacher recommendations, reports on the student's physical condition, social or cultural background, and adaptive behavior.

The placement team must also be aware of different placement options so that the student is placed appropriately.

Once the student has been evaluated, eligibility has been established, and the student's needs have been identified – the next step is determining the appropriate educational services designed to meet the student's individual needs. Remember that all students must be educated with students without disabilities to the maximum extent appropriate. Accommodations or modifications may be implemented as well. Accommodations are methods and materials to make learning easier and help children share what they know. The student is still expected to know the same material and answer the same questions as fully as the other students.

## Comparing IEPs and 504 Plans

IDEA	504
<b>Free Appropriate Public Education In the Least Restrictive Environment.</b>	<b>Equal access to general education and extra-curricular activities.</b>
<b>Applies to public schools.</b>	<b>Applies to any program receiving Federal financial assistance, including schools.</b>
<b>Covers student ages 3-21 who need special education and related services due to disability.</b>	<b>Covers all qualified people with disabilities.</b>
<b>13 categories of eligibility (South Dakota recognizes 14 – adding Developmental Delay).</b>	<b>Impairment that substantially limits one or more major life activities.</b>
<b>District responsibility to identify students through child-find and evaluation, ages 3-21.</b>	<b>School is responsible for identifying K-12; post-secondary requires self-identification.</b>
<b>Services and supports detailed in the IEP.</b>	<b>Accommodations/Modifications provided in general education setting.</b>
<b>Funded by federal, state, and local resources.</b>	<b>No funds are attached to this statute.</b>
<b>Enforced by U.S. Department of Education.</b>	<b>Enforced by U.S. Department of Education Office of Civil Rights.</b>

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Modifications are changes made to the curriculum to meet the student's learning ability. Some examples can be found in the table at right.

### Educational Setting

The law requires that students with disabilities be educated along with non-disabled students to the maximum extent appropriate. This means that students with disabilities must be assigned to regular courses or classes if the students'

needs can be met there. Decisions on academic placement must be based on an individual student's needs.

Students with disabilities may be placed in a separate class or facility only if they cannot be educated satisfactorily in the regular educational setting with the use of supplementary aids and services. For example, students who are blind may be assisted by readers or may use Braille equipment or specially equipped computers and remain in the regular classrooms. However, students with severe learning disabilities may be assigned to special education classes for part of the day.

Schools that do not offer special education programs or facilities that may be required by a student with a disability may refer that student to another school or educational institution. However, the student's home district remains responsible for providing the student with a free and appropriate public education.

### Reevaluations

Because the performance and skill levels of students with disabilities change, students must be allowed to change from assigned classes and programs. However, a school may not make a significant change in placement without a reevaluation. Schools must conduct periodic reevaluations of all students with disabilities.

### Procedural Safeguards

Schools must establish procedures that allow the parents or guardians of students in school to challenge evaluations, placement procedures, and decisions. The law requires that parents or guardians be notified of any evaluation or placement action, and that they be allowed to see their child's records.

If they disagree with the school's decisions, parents or guardians must be allowed to have an impartial hearing, with the opportunity to participate in the discussions. A review procedure must be made available to parents or guardians who disagree with the hearing decision.



### Examples of Curriculum Accommodations/Modifications

ACCOMMODATION	MODIFICATION
Additional time for assignments.	Allow outlining, instead of writing for an essay or major project.
Choice of test format (multiple choice, essay, true-false).	Word bank of choices for answers to test questions.
No penalty for spelling errors or sloppy handwriting.	Computerized spell-check support.
Large print textbooks.	Use of alternative books or materials on the topic being studied.

### Nonacademic Services and Activities

Students may not be excluded on the basis of disability from participating in extracurricular activities and nonacademic services. These may include counseling services, physical education and recreational athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the school, referrals to agencies that provide assistance to students with disabilities, and student employment.

For more information on Section 504, contact the Office for Civil Rights at 1-800-421-3481. Video presentations on the IDEA and 504 plans are available at [www.sdparent.org](http://www.sdparent.org) (Family Life, Parent Education Series). If you have questions or would like additional information contact SDPC at 1-800-640-4553.

### Reference:

U.S. Department of Education, Office for Civil Rights, "Student Placement in Elementary and Secondary Schools and Section 504 of the Rehabilitation Act and Title II of the Americans with Disabilities Act," Washington, D.C., 2010.

# Important Updates in SD Administrative Rules Pertaining To Eligibility Criteria for Autism Spectrum Disorders (ASD)

IDEA and the Administrative Rules of South Dakota (ARSD) provide legal guidance in determining who is eligible for the disability categories of special education. Taking into account current research, in September 2014, the ARSD were updated and adopted regarding the definition and diagnostic criteria for ASD. The following is taken from **ARSD: 24:05:24.01:03. Autism spectrum disorder defined. Autism spectrum disorder is a developmental disability that significantly affects verbal and nonverbal communication and social interaction and results in adverse effects, generally evident before age three, on the child's educational performance.**

Other characteristics often associated with autism spectrum disorder are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.

The term does not apply if the student's educational performance is adversely affected primarily because the student has an emotional disturbance as defined under Part B of Individuals with Disabilities Education Act.

## **24:05:24.01:04. Diagnostic criteria for autism spectrum disorder**

An autism spectrum disorder is present in a student if the student expresses all three of the characteristics from subdivision (A), at least two characteristics from subdivision (B), and all of the characteristics in subdivision (C) through (E), inclusive:

- A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by all of the following, currently or by history (examples are illustrative, not exhaustive):**
1. Deficits in social-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.
  2. Deficits in nonverbal communicative behaviors used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication.
  3. Deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behavior to suit various social contexts; to difficulties in sharing imaginative play or in making friends; to absence of interest in peers.
- B. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least two of the following, currently or by history (examples are illustrative, not exhaustive):**
1. Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypes, lining up toys or flipping objects, echolalia, idiosyncratic phrases).
  2. Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat same food every day).
  3. Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
  4. Hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of the environment (e.g. apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).
- C. Symptoms must be present in the early developmental period (but may not become fully manifest until social demands exceed limited capacities, or may be masked by learned strategies in later life.)**
- D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.**
- E. These disturbances are not better explained by intellectual disability (intellectual development disorder) or global development delay. Intellectual disability and autism spectrum disorder frequently co-occur; to make comorbid diagnoses of autism spectrum disorder and intellectual disability; social communication should be below that expected for general developmental level.**

For more information visit <http://legis.sd.gov/Rules/DisplayRule.aspx?Rule=24:05:24.01:04> or <http://www.autismspeaks.org/what-autism/diagnosis/dsm-5-diagnostic-criteria>

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Colton was born July 3, 2014 with a rare heart condition.

## Help Us Continue to Make a Difference for Families

*“South Dakota Parent Connection helped with everything and they are a resource that we are blessed to have been in contact with. The process of Medicaid, travel expenses and reimbursement could have been a mess, but with their help it was a smooth process. This is an organization that truly cares about their clients and treats everyone with dignity and respect and that is what we appreciated most!”* Colton’s Mother

**Every Gift Counts. Please support the work of SDPC with your gift. Mail your gift today or visit [www.sdparent.org](http://www.sdparent.org) or [m.sdparent.org](http://m.sdparent.org)**

Because SDPC is a 502 (c) (3) organization, 100% of your contribution is tax deductible

## Important Updates Pertaining to Eligibility Criteria for ASD

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### What Parents Should Know...About ASD Evaluation and Eligibility

For a child to be eligible for services under the ASD category, he/she must demonstrate the outlined criteria from each area noted on page 4. The evaluation (sometimes called assessment) looks at all aspects of educational impacts along with the child’s social communication, social interaction, interests, behavior, and activities.

The definition requires that the symptoms begin in early childhood but that symptoms may not fully appear until social demands exceed the child’s capacity — which may be during middle-school years, later adolescence, or young adulthood. Early identification is important but may not occur if the child appears to be doing well academically in the early years and then as demands increase, demonstrates other challenges associated with ASD.

Eligibility is determined through a multi-disciplinary evaluation. Guidance provided to school districts regarding the assessment of suspected ASD can be found in the Special Education Eligibility Guide. ([http://doe.sd.gov/oess/documents/14\\_Eligib.pdf](http://doe.sd.gov/oess/documents/14_Eligib.pdf))

School districts shall refer students suspected as having autism spectrum disorder for a diagnostic evaluation to an agency specializing in the diagnostic and educational evaluation of autism spectrum disorder or to another multidisciplinary team or group of persons who are trained and experienced in the diagnosis and educational evaluation of persons with ASD. (See box at right for areas of evaluation.)

Other reminders for parents include that transition evaluations need to be conducted and services included in the IEP prior to age 16, or at a younger age as determined by the IEP team; evaluations must be based upon the child’s needs as determined by the IEP team. The purpose of conducting evaluations is to generate information in order to make decisions about eligibility, educational strategies and placement options; and the team should take into account any exceptionality of the individual in the choice of assessment procedures.

Larger school districts and education cooperatives may have a specialized ASD multidisciplinary team. Additional resources for evaluation are the Center for Disabilities: Autism and Related Disorders Program (<http://www.usd.edu/medical-school/center-for-disabilities/autism-spectrum-disorders-program.cfm>); LifeScape (CCHS) ([www.cchs.org](http://www.cchs.org)); and Black Hills Special Services Cooperative ([www.bhssc.org](http://www.bhssc.org)).

Once eligibility is determined, the evaluation information should be used to develop the IEP based on the needs of the child and provide an appropriate placement in the least restrictive environment.

### Areas to be assessed include:

- Ability.
- Academic achievement.
- Language.
- Adaptive behavior to include social skills.
- Behavioral - To support educational impact, a standardized rating scale must be completed individually, at a minimum, by two teachers, a parent and if appropriate, the student.
- Autism spectrum disorder-specific instrument.
- Observation.
- If the team decides there are other areas of suspected disability, other evaluations must be given, such as motor, speech, health, vision or hearing.
- Skill-based assessment and/or early development information is to be gathered for each skill area affected by the disability.

# Parent Education Sessions Offered Each Month Online and at Center for Disabilities

The Parent Education series is held the second Thursday of each month during the school year from 7 - 8:30 p.m. (Central Time) or 6 - 7:30 p.m. (Mountain Time). Sessions are offered online using Adobe Connect with the ability to ask questions through a chat feature. The link to participate online is <https://usdcd.adobeconnect.com/parenteducationsessions/>. Participants may also attend the presentation each month at the University of South Dakota School of Medicine Center for Disabilities, 1400 W. 22nd Avenue, Room 126 in Sioux Falls (no child care provided). Following the live presentations, the recorded presentations are posted at [www.sdparent.org](http://www.sdparent.org) (Family Life, Parent Education Series) for viewing anytime.

The sessions are appropriate for all parents and those working with or supporting children with special needs. Pre-registration is encouraged, but not required. Register at [www.sdparent.org](http://www.sdparent.org) where you will also find materials which may be provided in advance of the presentation and previously recorded sessions. Call Tana at 605-361-3171 or 1-800-640-4553 if you have questions.

## January 15 — Shriners Hospitals for Children – How They Can Be A Resource For You

What is Shriners Hospitals for Children? What kind of care and services do they provide? How can families and professionals access Shriners Hospitals for Children as a resource? These questions and more will be answered in a session offered by the Referral Development Coordinator from the Twin Cities Shriners Hospital for Children. Presented by Sophia Jones, Referral Development Coordinator at Shriners Hospitals for Children.

## February 12 — Understanding an Individual Health Plan (IHP)

The Individualized Health Plan is a plan for students who have healthcare needs which require additional supports during the school day. From preparing for a life-threatening allergy to daily supports for medication or a feeding tube, developing a health plan may be what your child needs. A student does not need to be on an IEP or a 504 plan to qualify. Come learn more about the steps needed to develop an IHP and the different ways health plans may be implemented. Presented by Teresa Nold, Outreach Specialist, SDPC.

## March 12 — Visual Strategies

The presentation will highlight visual strategies that can be used with individuals in early childhood through high school. Visual strategies such as schedules, choice boards, boundary settings, task completion, behavior supports, power cards and social stories will be covered. The presentation will include an explanation of the strategies, how to create the strategies and how to implement the strategies. Presented by Kim Dobson, Augustana College and public school educator.

# Join the Fun on January 17 in Sioux Falls

Sibshops will be Saturday, January 17 from 10 a.m. - 1 p.m. at Here4YOUth, 1721 W. 51st Street, Sioux Falls. Lunch will be provided.

Sibshops is a free program designed specifically for brothers and sisters, ages 6-12, of children with special needs or disabilities. Sibshops is a time to meet other brothers and sisters of children with special needs, build friendships, have fun, do recreational activities, and share feelings with others who really know what it is like to have a sibling with a disability.

Pre-registration is required to attend. To register online for the January 16 Sibshops visit [www.surveymonkey.com/s/Z32L6DF](http://www.surveymonkey.com/s/Z32L6DF) or call 1-800-640-4553 or 605-361-3171. Even if you have registered for a previous Sibshops, you still need to register for this upcoming Sibshops. For more information on Sibshops visit [www.sdparent.org](http://www.sdparent.org) (Family Life, Siblings)

Sibshops is a joint project of South Dakota Parent Connection, Here4YOUth, LifeScape, and the University of South Dakota Sanford School of Medicine Center for Disabilities.



# When Is an Individualized Health Plan The Best Choice for Your Child?

According to the National School Nurses Association (NSNA), Individualized Healthcare Plans (IHP) are for students whose healthcare needs affect or have the potential to affect safe and optimal school attendance and academic performance.

The NSNA recommends that an IHP be developed for any student that requires medical attention during the school day. If a student is on an IEP or 504, the IHP can be written in conjunction with those plans. However, there is nothing legally enforcing an IHP, which can pose challenges for parents who have children with only medical needs.

How the IHP looks, and even what it's called, varies from district to district. It can be known as a "Health Action Plan," "Emergency Health Care Plan," or "Allergy Care Plan," to list a few, but the main purpose is to provide students with medical services during the school day.

Who qualifies for an IHP? It varies. Something as simple as a student with ADHD who requires medication during the day to a complicated case such as a student who has a combination of medical needs.

Prior to asking the school to develop an Individualized Health Plan for your child, the first step you'll need to take is to visit with your child's healthcare provider(s). Have a discussion on the demands of a full day at school and work together to outline the health issues that might impact the day at school. This should include things you plan on, such as your child receiving medication, and things you don't plan on, like an adverse allergy reaction. Ask your child's healthcare provider(s) to document your child's health needs and what he or she feels your child requires for support.

A medical release is necessary prior to starting the process of discussing with the team (IEP team, 504 team, or parents, teacher and the school nurse) what the plan needs to look like. Make sure you bring all of the documentation with you when you meet with school staff. Address questions such as who, what, where, when and how. Also ensure that the following is documented: diagnosis(es), triggers and symptoms, treatment plan, person responsible and crisis plan if needed.

Once a plan has been implemented, the school nurse will be the case manager for this plan and will have the documentation on file. He/she will manage, complete and maintain the documented health plan. She will also communicate with you, the parents, and the healthcare provider for any modifications that may be needed. Attention parents, if you have any questions, concerns, or if there are changes that need to be made to the healthcare plan, feel free to meet with the team to make those necessary changes.

For more information and resources, feel free to check out:

- **National School Nurses Association:** [www.nasn.org](http://www.nasn.org)
- **South Dakota School Nurses Association:** [www.sdschoolnurses.org](http://www.sdschoolnurses.org)
- **South Dakota Department of Ed:** [http://doe.sd.gov/oess/documents/sped\\_section504\\_PrimerForms.pdf](http://doe.sd.gov/oess/documents/sped_section504_PrimerForms.pdf) (healthcare plan starts on p. 14)



## Unique Opportunity For Families

If you are a parent of a child with a developmental disability, AND live in southeastern South Dakota (Brookings, Sioux Falls, Beresford, Yankton, Vermillion, Dakota Dunes, surrounding communities) you can impact future medical and service professionals by providing a "real life family experience."

"Real-life experience" families invite graduate students into their homes, allowing them to experience the daily balancing act that includes work and school, meeting the needs of all family members, medical appointments, therapies, school meetings, extracurricular activities and more. As a participating family, you have the opportunity to assist these students in their understanding of family-centered care, and its importance in effectively serving families.

Students are graduate-level trainees in the highly selective Leadership Education Excellence in Caring for Children with Neurodevelopmental and Related Disorders (LEND) Program at the Center for Disabilities, Sanford School of Medicine, University of South Dakota.

Confidentiality/privacy of family information will be honored. Participating families are free to opt out at any time.

If you are interested in participating, please complete a brief questionnaire TODAY at [www.surveymonkey.com/s/MHF6MB2](http://www.surveymonkey.com/s/MHF6MB2)



3701 West 49th Street, Suite 102  
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## Get Connected to Affordable Healthcare Options

Get Covered South Dakota, [www.getcoveredsouthdakota.org](http://www.getcoveredsouthdakota.org), offers free, impartial information to help consumers understand and find affordable healthcare coverage. For a schedule of free informational meetings in South Dakota on the Marketplace options visit [www.getcoveredsouthdakota.org/calendar/](http://www.getcoveredsouthdakota.org/calendar/)

South Dakotans may also visit free in-person assisters (Navigators) to discuss their healthcare options. For a list of Marketplace Navigators in your area visit [http://www.sdparent.org/web/site\\_2825\\_files/files/1415288278\\_1415024339\\_Navigator\\_List\\_2014.pdf](http://www.sdparent.org/web/site_2825_files/files/1415288278_1415024339_Navigator_List_2014.pdf)

The Great Plains Tribal Chairmen's Health Board (GPTCHB) Health Insurance Exchange Navigator Project is available to help find the most affordable and highest-quality health insurance for Native Americans. Visit <http://navigator.gptchb.org/>, call 1-877-209-1215 or [email Navigator@gptchb.org](mailto:Navigator@gptchb.org)

### Important Dates to Remember

- Affordable Healthcare Marketplace Opened Nov. 15.
- You must Be Enrolled by Dec. 15 for Coverage to begin Jan. 1, 2015.
- Open Marketplace Enrollment Ends Feb. 15, 2015.

### Do you already have health insurance through the Marketplace?

This is a good time to check your health insurance coverage and see if it still meets your healthcare needs. Anyone can change healthcare plans during open enrollment, but most people will be re-enrolled automatically if they take no action. It is also important to report any changes to your income to the Marketplace. Carefully read all health insurance notices and updates.

#### You should check your coverage:

- Even if you like your health plan, new plans may be available and premiums or cost sharing may have changed since last year.
- Even if your income has not changed, you could be eligible for more financial assistance.

#### If you or a family member has a disability or a health condition, pay attention to possible changes:

- Are a broad range of healthcare providers included in the health plan's network of providers?
- Are there enough medical specialists in the network to meet your needs?
- Are needed medications included in the plan's list of covered drugs?
- Is there adequate access to non-clinical, disability-specific services and supports?
- Does the plan have service limits, such as caps on the number of office visits for therapy services?
- Are mental health services covered to the same extent that other "physical" health benefits are covered?

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