

Dr. Nancy: Hi everybody, welcome to lunch with Dr. Nancy on Wednesday. I want to welcome everybody watching. Before we start our program today I want to kind of talk to you about what's going on this week in the office. On Saturday, we have our very first clothing swap, it's really going to be a fun morning. From 9:00 to 11:00 we've got women coming sizes small to extra large and some maternity clothes. Then, from 11:00 to 1:00 we have children's clothes coming. So, if you have some clothes that you want to get rid of and you want to get some new clothes for you, come on over and come on in for our clothing swap. Look online on our Facebook page under events and you'll see more information about it and where you can get tickets. We're limited on space, so, if you could get your tickets ahead of time we'd appreciate it. We will do this again in the fall to get ready for winter.

Dr. Nancy: So, I'm very excited today about our topic. This is a very unique topic that I haven't really seen and the way that Ehrica does her business is really unique. So, I'm anxious to hear what she has to say today. So, I want to introduce everybody to Ehrica Dorsey and she's the Milestone Mom. So, she's going to tell us a little bit about herself and what Milestone Mom does, okay? Welcome, Ehrica.

Ehrica Dorsey: Thank you so much and thank you so much for having me. Dr. Nancy I'm so excited about this because this is what I do in my everyday life and to be able to come on and hit a more bigger, broader audience is just amazing. Because parents need this. So, my name is Ehrica Dorsey and I blog at milestonemom.com. I began my journey in Early Intervention almost a decade ago. So, I became a pediatric developmental therapist about nine years ago. Which, Early Intervention, if some of you don't know, is birth to three years old. So, that's the age group that I work with. I then went on, I stayed in Early Intervention but I became a service coordinator. So, I'm actually a service coordinator for Early Intervention which is my full time job. In my district, just to let you know I'm in the Illinois area, so anything that I speak of today is based around Illinois. So, I'm sure some states are a little bit different but from what I understand the program foundation is the same.

Ehrica Dorsey: So, I became a service coordinator about four years ago. I cannot service the same area as a service coordinator and DT. So my full-time job is service coordinator, and then on the weekends, or whenever they need me, I do go to a different child and family connections office, and do my developmental therapy work with families. So I am kind of two fold. I am getting the kind of back end of Early Intervention, and then also the developmental therapy part. So I'm constantly in families homes. And I came to realize very quickly, and being in there for as long as I have, is development's one thing. So that's the foundation of Milestone Mom is development. But there is so much emotional stuff that goes along with having a child with a disability, or a prognosis. I mean I go into families homes, and I call them basic speech delays, but I have to be very careful about that. Because what's basic for me, is like huge for another parent. I see kiddos that have terminal illnesses all the way to basic speech delays.

Ehrlica Dorsey: So let me back up a little bit. Because I'm getting a little ahead of myself, because I love this. And I could probably talk to you for two hours about it. So Early Intervention is a birth to three program. In the state of Illinois, we are natural environment. So that means that we come into families homes. We feel like kids thrive better when they're in their natural environment, and in their home verses going to a group setting. I'm sure I'll have some haters commenting, or not agreeing with me, but that's just how Early Intervention is set up in the state of Illinois. So we are in homes daily.

Ehrlica Dorsey: So as a service coordinator, I'm the first mode of contact to parents. So let's say, most of our referrals either come in from pediatrician, the health department, or usually NICU. Like if there's a drug baby that was born, or if there is a child that was born with Down Syndrome, we automatically get those referrals. So those are usually our three referral places. So once that comes into our office, I will get the referral based on the area that I service. I service probably six to seven towns around my area right now. I will reach out to the families, and schedule an intake meeting.

Ehrlica Dorsey: So the intake meeting usually takes about 45 minutes, it's completed in the home. Just going over a lot of questions, paperwork, and then we get evaluations scheduled from there. So we go over pregnancy history, development, and then just all the paperwork that we have to do. And then the evaluations come next. Usually that is scheduled within one to two weeks after the intake meeting. And that's based on the families needs.

Ehrlica Dorsey: So as a developmental therapist, we are expected to be at every single initial evaluation. You have to have a developmental therapist. And we also come in and do the annual meetings. So let's say I go into a home and the family has speech concerns. So for the evaluations we'll have a developmental therapist come out, and we'll have a speech therapist come out. And what that looks like is, the two therapists ... so in my area, so I'm just talking my area and what I experience on a daily basis, come together. They bring magic bags of toys, they sit on the floor, and they play with the child. I use something called the Battelle Developmental Inventory Standardized Test, or BDI 2.

Ehrlica Dorsey: So part of that standardized test, we have to see the child doing. But then the other part of that assessment is, interview with the parents. So lots of questions for the parents. Some stuff they haven't even thought of. They're being asked, and sometimes they feel like it's an overwhelming situation for the parents. And I just let them know, they're going to be getting the reports in the mail, everything that we did, the goals and stuff they'll be getting in the mail, which I think helps them a little bit. So it takes them about 45 minutes to do the evaluations.

Ehrlica Dorsey: I come as a service coordinator after the 45 minutes, and we have a meeting. And the meeting usually takes about 15 minutes to a half hour. You'll hear the therapist talk about the month equivalent of the child, then also the percentage

delay of the child. So the parents are hearing all of that at the meeting. We'll know if they qualify for services, and then we'll write goals. Now those goals are good for about six months, because every six months we have a meeting. And then again at that annual, we'll have all new reassessments.

Ehrlica Dorsey: So that's Early Intervention, in a nutshell. The developmental therapy standpoint of what I do, is we look at five different areas of development. So we look at, and I'm going to go ahead and break these down, because I feel like I vomit these all the time. And some parents just really don't know what these mean. So we look at adaptive skills. So these are how the child's eating, how are they sleeping, are they holding out their arms and legs to help assist with dressing? We look at communication. So I just want to go down my checklist here. So we look at communication, there's two areas that most of the time we look at. Well all the time we look at. We look at expressive language, so that's how the child is getting their wants and needs met. And then there's that receptive piece, so what they're understanding. Are they following simple directions? As the child gets older, we do throw a third component in there, which is articulation. So if they're old enough, they do look at the sound errors that they're making, just to kind of test them on that. So if a child maybe doesn't qualify, like their language is there, they're babbling, and they're saying so many words, but they're just not understandable, we can qualify them based on their articulation piece of the test.

Ehrlica Dorsey: And then we also look at fine motor and gross motor. Gross motor obviously is those big things, jumping and running, kicking a ball, throwing a ball. And then the fine motor, is the small things. The picking up little pieces with the pincer grasp. The taking the knobbed puzzles and placing them in a form board. And then we have the cognitive piece, which is, I call those pre academic skills, matching colors, dropping a cube in a bucket, just some of those pre academic skills, like the puzzle and stuff like that. And then we have the personal social. So this is personal social. So how they're interacting with kids of their age, and then how they're interacting with adults as well.

Ehrlica Dorsey: So yeah, I feel like I just ... It is a lot to cover and I have so much in my mind. Like I said, I could talk to you for two hours about this, but I know we need to ...

Dr. Nancy: That's all right. For the people watching, this sounds a lot like our First Step Program, in Indiana.

Ehrlica Dorsey: Yes.

Dr. Nancy: So I think it's the same thing. It's an in-home type setting, and they do similar to what you're talking about.

Ehrlica Dorsey: Good, yes. And I do have a link that I think we could probably get in the comments here. It's cdc.gov, but if families do have any questions about where their Early Intervention Program is, it will be on that specific link. So I guess they

can go to cdc.gov, Early Intervention. And it list it by state. And I do want to be very clear, there's a huge misconception with parents. They think that the referral needs to come from a doctor, hospital, the WIC program, and that is so not true. Parents, you can refer your child to our program. So just go to that link, find your state, and it'll have a number there for you.

Dr. Nancy: We did have a question, just an aside, before you go on.

Ehrlica Dorsey: Sure.

Dr. Nancy: What age do you start seeing people for your virtual consultations?

Ehrlica Dorsey: I honestly, if it's within the range of birth to three, it doesn't matter the age. I do want to make that clear, though. I mean if your child's 10, and you want to call and talk to me about development, I'd be happy to talk to you about development. Especially with some of the things I do with my own nine-year-old daughter, because we are dealing with some things with her. But my specialty is birth to three. So if you're within that range, feel free to sign up for the free consultation.

Dr. Nancy: Yeah, which is something she's offering today, which is wonderful. And we'll have the link in the comments of how to get that eventually.

Ehrlica Dorsey: Yeah, perfect.

Dr. Nancy: But go on, Ehrlica, you got good stuff to share.

Ehrlica Dorsey: Yeah. So just a reiterate, I am giving away that one hour free consultation. I'd love to talk to any mom, to be honest with you. But my specialty is zero to three. So, just keep that in mind when signing up. So I did want to show you, I'm going to go ahead and show you five simple, and fun things that you can do with your child. I feel like some parents feel like they have to be in front of their child doing flash cards. It doesn't have to be like that. I mean, kids learn through play, and by doing. And another thing I want to say before I go on with this manipulatives is, development is so complex, okay? And I really want parents to breathe. It's okay.

Ehrlica Dorsey: I do see several kids that are maybe late walkers, who aren't talking yet. So I might get into a home where the child just started walking at 18 months. And it used to be, back in the day, my oldest is 24, my youngest is 9, we'd go into the pediatrician, and if they weren't walking by 12 months, it was like, we've got to do something. And it's just not the case anymore. We feel like typical gross motor development with the walking is between 9 and 18 months. 18 months is obviously on that later side, but if you had a child that started walking at 18 months, they're probably going to be behind in their expressive language, because they don't focus on two huge milestones at ones time. So I just want to make that clear.

Ehrlica Dorsey: I feel like parents are so hard on themselves. For an example, I went into a house not too long ago, very well educated parents. We went through the process, the child qualified for speech, the therapist left. That's when I sit down and do my paperwork with the families, and just kind of ask are you okay with all of this? Is it kind of what you thought, and this mom just broke down. And the husband was consoling her, and just I really did not think he'd qualify for speech. Like this was huge for her. And so I just want parents to kind of breath, and just not force development on their kids. Because there are some kids that are just always three months behind. They were three months behind rolling, crawling, walking, and that's just their child's development. Okay, so I just want to make that clear.

Ehrlica Dorsey: Okay. So some manipulatives that you can do with your child, and I just wanted to make these fun because I mean at that age, they really learn through play. So if you're sitting on the floor playing with them, what I'm going to show you today, some of these, I call special activities. So you know how you have toys out for your kids, right? And they can just go, play with the toys, puzzle pieces end up everywhere, and things just don't stay together? I always like to have a defined workspace. It might be a blanket on the floor, it might be a little table for them. So they kind of know, oh this is like school time, or work time. It doesn't matter the age, they love doing that. So even maybe puzzles are put up. So puzzle time, you do it at the table. So these are some of the things that you might want to keep up, or they're going to be lost all over the house.

Ehrlica Dorsey: A strainer, and pipe cleaners. Like this is perfect for fine motor skills. The only ones I had in my office were black ones, but you can get colored ones. So you can kind of work on color recognition and stuff like that. They sit here forever, and work on these. They'll probably do all the pipe cleaners that you give them. But great idea. Fine motor skills and hand eye coordination. So I just got these at the Dollar Tree. So we have a container with a lid, and then we have, I even got this from the Dollar Tree, parents I definitely recommend that you get this. It's tweezers, it helps with fine motor skills. And this is like a eye hand coordination activity as well. So you just pick them up with the tweezers. And they have different size pom poms. These I also got at the Dollar Tree. So if your child has a hard time, there's a little bit bigger ones here that you can put into the jar. Kids love doing this stuff. I mean it's so simple.

Ehrlica Dorsey: Okay, so if you're ready for colors, you can use a muffin tin, or I again, I love the Dollar Tree. So I just got this at the Dollar Tree. I don't know how many people have ice cube trays in their house anymore, ours comes out of our fridge. But I got it for this specific purpose. When you're starting to work on colors with your kids, don't overwhelm them. If you notice here, I have a blue and a yellow. And I all did was cut out construction paper, and tape it down. You don't want six colors in here when they're starting to learn. You might even actually just want to start with the blue. Blue, blue, you know? So they can kind of repeat what you're saying, and learn that color. But then you can go to maybe two. And you

can again, you can use these, if you want. And they can start sorting the colors, or you can just have them put the different colors in there.

Ehrlica Dorsey: Something that I don't have with me, which is a good idea. I don't know if you guys have seen those buttons, but they come in different colors and different shapes. So if you're ready to work with shapes, I would get a muffin tin, and you can put like a triangle in one of the sections, and a circle in the other, and they can start sorting their shapes. I didn't have any of those today, or I would have showed you.

Ehrlica Dorsey: Okay, so that was three of them. And then a simple crayon. Okay, so when kids start drawing, they obviously, they fist it, right? And they don't even really do fist rotation yet. It's more, if you've noticed, it's more whole arm when they first start. And then they'll get to the wrist rotation, and maybe putting all of their fingers on the writing utensil. But if you feel like they're at an age where, maybe we shouldn't be holding the crayon up here, or still fisting it, break the crayon in half. And then they are forced to use more of their fingers instead of their whole hand.

Ehrlica Dorsey: Okay, and then the last one, summer's coming up. I don't know about you guys, but we had a horrible winter in Illinois. We were one of the states that had like -40 degree weather for two days, and we were actually off of school, and we've had tons of feet of snow. So summer's coming, I'm excited about that. You can get outside with your kids. Around the age of 16 to 18 months is when you can start experimenting with open cup drinking. And usually by around 24 months they have mastered that. So I got these little Dixie cups from, I actually found these at Kroger, in the food aisle. Just you know how they have the end caps, aren't those so cute though? They're great for little hands, and then if your child is just learning to drink out of a cup, just fill it up a little bit. And they can drink these outside, and by the end of the summer I'm sure your child will have open cup drinking mastered. So yeah, that's the five manipulatives that I wanted to show you guys, activities.

Dr. Nancy: Wonderful. I think that those are awesome. And I'm sure our moms could definitely come up with something like that at home to help their little ones for sure.

Ehrlica Dorsey: Yeah.

Dr. Nancy: So when would somebody, probably seek out some help from your organization?

Ehrlica Dorsey: Sure. Well that's a great question. So anytime. I mean we have babies that come into our program, that either have Down Syndrome, or they've had genetic testing, and they already have some sort of diagnosis. Unfortunately we do see drug babies that are withdrawing from methadone. So it doesn't matter the age. I will say, the child will age out of our program a day before their third birthday.

So the earlier the better. I know, that's why I wanted to really let parents know that they can refer. Because I know sometimes, and I'm not getting down on pediatricians at all, because they are competent experts, but I have talked to families where they'll go in for a well check. And they'll say, "I just feel like there's something wrong with their language. Like I feel like they should be saying more." And the doctor says, "Well let's wait. Let's wait about six months."

Ehrlica Dorsey: And so I go into some of these homes where the child is two and a half, and they're like, "I told the doctor six months or a year ago." And I'm like, "You could have referred to our program," and they have no idea. So if you feel like, okay, so I always tell moms especially, listen to your mama heart. Because if you think there's something wrong, then it needs to be checked out. I even have families that I call at intake, and they're like, "I feel like I'm wasting your time. Like I just don't know." And I'm like, "That's what we're here for. Let's see. If your child doesn't have a delay, that's what Early Intervention is for. We can get to him soon, and hopefully not need an IEP when they get to school." If they do, that's okay. But we're still getting to them early. If they don't qualify, we just go about our way, and you have peace of mind.

Ehrlica Dorsey: Another part of our program is, we do help with that transition process to the school system. So we have to have it completed between 27 and 33 months. We like to push for the 30 month mark, just so we don't miss anything. The first step for us, in Illinois is really just a meet and greet with the school system, or district. So sitting down with that representative, kind of talking about what's been going on in our program with the child. They'll talk about the different programs that they offer, and then legally the school system has to have a child ready to go for school based services, by the time they're three.

Ehrlica Dorsey: So that's why we start this process a little bit early. So after our, it's usually about a 15-20 minute meet and greet. I tell the families, "Just come with any questions that you have about busing." The programs will be discussed, and then after that the school will call the families in for an assessment with the child, and just kind of figure out what is best for them going forward with school.

Dr. Nancy: So you see people, babies from zero to three. So let's talk about like a brand newborn. What would a mom be looking for that would trigger her to think, I might need a little help here?

Ehrlica Dorsey: To be honest with you, when we see a child that young, for the most part, unless obviously, I mean I do have kids that are casted. They've got some gross motor, one leg was longer than the other, they had to have surgery. So stuff like that, that's apparent, is usually caught, obviously after birth or by the doctor. But if we do come in, usually it's to do a reassessment. We never start ongoing, and usually it's not really so much for gross motor, it's more of maybe like a feeding concern, like not latching. And sometimes we'll find that the child has a lip or tongue tie. So it's not always gross motor. I say the biggest things for gross

motor are weakness in the neck, or extreme stiffness in the body. We can see a child for that, but again, if it's warranted, we'll start ongoing. But for kiddos that young, we'll usually come back and do like a three to six month reassessment. Just so that they can kind of develop a little bit more, and see if they can kind of figure it out on their own.

Dr. Nancy: Okay, interesting. Yeah, I was curious about that.

Ehrlica Dorsey: Yeah.

Dr. Nancy: Yeah. Is there anything that we didn't touch on that you want to share with everybody, before sign off today?

Ehrlica Dorsey: Well let me look at my notes.

Dr. Nancy: Okay.

Ehrlica Dorsey: I wrote some stuff down. Oh so I think, okay, so I'll leave with this, okay?

Dr. Nancy: Okay.

Ehrlica Dorsey: If you want to sign up for information about Milestone Mom, like we're growing, and we've got big plans coming up. Like I really want to create some sort of membership site, or something, to where moms can just come and vent with other moms. So that's in the making. So I really want you guys to go to milestonemom.com and at the top of my page you can sign up for email. That's the number one place that I communicate with you guys. And then also if you go to Milestone Mom, there's a Facebook link, or icon, that you can sign up, or you can go over to my Facebook page. Those are the two places that you'll really hear information from me, and stuff that's going on.

Ehrlica Dorsey: So this is what I'll leave you guys with. I think let's just be careful in blaming ourselves as moms. So many times when I'm in these homes, they're like, "What did I do? What could I have done?" Sometimes, unless you drank alcohol during, or did drugs while you were pregnant, most of the time there's nothing that you could have done different. And I do talk to moms too, but my niche really falls in with moms. I get it guys, like I'm in your homes all the time. I see the frustration in between your marriage. Dad doesn't think anything's wrong with the child, and mom's like, "No, there's something wrong." I see that with the marriages, and moms being hard on themselves. And there's an emotional thing that goes along with disability.

Ehrlica Dorsey: So let's talk Autism. I haven't even addressed that today. It's becoming a crisis. It seems like all children have Autism. And there are families that homes that I go into, the mom is isolated. Like she doesn't go anywhere, because of the behavioral concerns of her child. It's just ... kids that have sensory concerns that lay there for two hours at night because they just can turn themselves off. Or a

two year old who's still getting up five, six times a night. There's just things that we I think don't always talk about. You might mention Autism, but what really goes along with that? And how are these parents dealing with it? So yeah, I'm big on development, but I really want to own a piece of the internet that talks about the emotional side of this. Because it's a real thing.

Dr. Nancy: It is a real thing, and it's something that I think we really don't think about a lot. I've recently went to a conference. And they had a mom of an Autistic boy come in and talk to us. And I was like, "Oh my gosh." It was so eye opening, because we don't think about the mom. We think, "Oh what a great parent, you've really got patients." But we really don't think about it. So yes, I think it's a wonderful option, to be able to have a place where moms can go to talk, and just be real. So thank you for doing that.

Ehrlica Dorsey: Yeah, and I agree. I mean there's moms, I'm in some of these Facebook groups, who are at the point where their child is older, like 21 now, and they physically cannot pick them up. Like nursing care is expensive. So in their mind, they're contemplating a group home.

Dr. Nancy: Yeah.

Ehrlica Dorsey: Because they just cannot get the needs met in the home. And oh it's devastating for these parents. And I just feel for them. There is, I do want to mention one thing. I went to a website the other day, it's actually a Facebook page. It's called, have you heard of team, what is it? The B-Team?

Dr. Nancy: No.

Ehrlica Dorsey: Okay, it's fantastic. There's a documentary on that page called The Kids We Lose. And I recommend everybody watching this to go watch. They did a fantastic job about kids in the school system. And they did a great job by not pinpointing fault at parents, at the school, at professionals. It's really all encompassing of what a crisis this is. I mean I've talked to parents who have actually pulled their kids out of school to homeschool, because the school system just can't accommodate to some of their needs. And I don't know. I love the all inclusion thing that we do now, but teachers have so much stuff going on, that I think that they weren't prepared to deal with. That in and of itself is a crisis in academics. So I really want you guys to go and watch that. Even in my daughter's school, we are in a fantastic school district. And she even had to deal with a classmate who would completely destroy the classroom. And so behavioral issues are exploding. And I don't know.

Dr. Nancy: Well they can go to your website, milestonemom.com, and get some support.

Ehrlica Dorsey: Absolutely.

This transcript was exported on Jun 07, 2019 - view latest version [here](#).

Dr. Nancy: So thank you so much Ehrica. And as a reminder, she is giving away one, one hour free virtual consultation. So I'm not sure how we're going to give that away, but we'll figure that out.

Ehrica Dorsey: Yeah, and if they just want to sign up at that link, that would great. And then I can just kind of pick, and I'll do a random drawing to see who gets that.

Dr. Nancy: Okay, wonderful. And then if you find this information valuable, please share it. Please get the world out about the Milestone Mom, what she's doing is really wonderful. So like this video, share it, get it out there. So thank you Ehrica for coming. I really appreciate it. And it was really wonderful to meet you.

Ehrica Dorsey: All right, thanks, Dr. Nancy. Bye bye.

Dr. Nancy: All right, bye bye.