

# SUNNY DAYS EARLY CHILDHOOD DEVELOPMENTAL SERVICES INC.

"Making the Future Brighter, One Child at a Time"

300 Corporate Center Drive \* Manalapan, NJ 07726 \* tel: 732-761-0088 \* fax: 732-761-2550  
www.sunnydays.com

## OUR MISSION

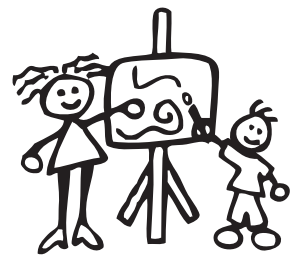
*Our mission is to provide quality Evaluative and Therapeutic Early Intervention Services. Our family-centered philosophy supports the family as the most significant component to the child's progress.*

*Sunny Days Professionals aim is to foster the family's ability to promote their child's development to their fullest potential. Through our services, families are empowered to incorporate support strategies into their daily routines which will maximize the child's ability to participate in their environment.*

*Sunny Days provides community based services in the child's Home, Pre-School, School, Day Care or other locations specifically requested.*

*Sunny Days provides services to thousands of children and their families throughout the New Jersey, New York, Pennsylvania and California Area.*

*Be sure to visit our redesigned website @ [www.sunnydays.com](http://www.sunnydays.com). If you would like to receive our newsletter, click on the link at the bottom of the page.*





2021 Holiday Schedule
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**DATE**

**HOLIDAY**

Friday, January 1

New Year's Day

Monday, January 18

Dr. Martin Luther King, Jr.'s Birthday

Monday, May 31

Memorial Day

Monday, July 5

Independence Day Observed

Monday, September 6

Labor Day

Thursday, November 25

Thanksgiving Holiday

Friday, November 26

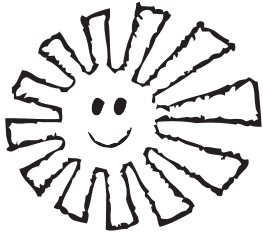
Day after Thanksgiving

Friday, December 24

Christmas Day Observed

Friday, December 31

New Year's Day 2022 Observed



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## Service Schedule and Contact Information

### MONDAY

Practitioner Name	Session Time	Service Provided

### TUESDAY

Practitioner Name	Session Time	Service Provided

### WEDNESDAY

Practitioner Name	Session Time	Service Provided

### THURSDAY

Practitioner Name	Session Time	Service Provided

### FRIDAY

Practitioner Name	Session Time	Service Provided

### SATURDAY

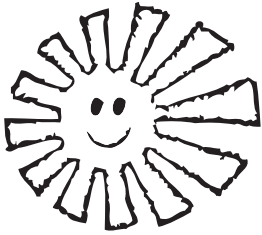
Practitioner Name	Session Time	Service Provided

### SUNDAY

Practitioner Name	Session Time	Service Provided

### CONTACT INFORMATION

Practitioner Name	Session Time	Service Provided



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Dear Families,

Welcome to Sunny Days!! We look forward to working with you and your child.

To prevent the spread of infection to children and families in our program, it may be appropriate at times to reschedule an in-person session or to arrange a telehealth session. It is up to the discretion of the practitioner to decide if s/he should cancel a session when a child or family member is ill. Please contact your Sunny Days Regional Administrator if you have questions regarding make-ups and/or telehealth sessions. The NJEIS is closely following the Governor’s lead in deciding if certain geographical areas, counties or towns will need to return to Telehealth only services based on the public health data he monitors daily. All options for service delivery are on the table and the provision of in-home services may again be suspended in affected areas throughout the coming months should the data indicate. For more COVID information please call the Department of Health Hotline at 2-1-1.

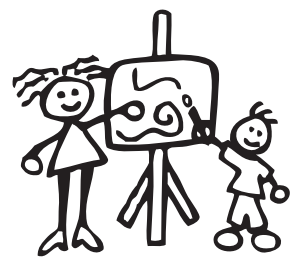
## In- Person Session Safety Protocol:

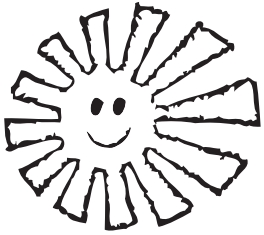
- Require a 3-person maximum (includes child)
- Adults must wear a mask (optional for child over 2 years age, no mask for child under age 2)
- Must maintain 6 feet distance
- Practitioner is not allowed to bring in any toys or equipment for the session
- Both practitioner and family must sign Pre-Visit Checklist prior to practitioner entering your home and providing services. If either of you answer “YES” to any of the screening questions, in-person session can not occur. Telehealth options should be discussed.

## COVID-19 Symptoms:

Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19 ([cdc.gov](http://cdc.gov)):

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea





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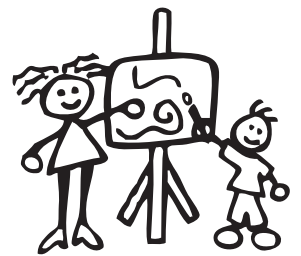
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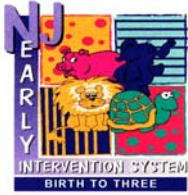
## What If:

If someone in your family is exposed to COVID-19	<ul style="list-style-type: none"> <li>Quarantine for 14 days from date of exposure</li> </ul>
If someone in your family has traveled to an area or another state with high COVID-19 Cases	<ul style="list-style-type: none"> <li>Quarantine for 14 days. Please check for state restrictions: <a href="https://covid19.nj.gov/faqs/nj-information/travel-and-transportation/which-states-are-on-the-travel-advisory-list-are-there-travel-restrictions-to-or-from-new-jersey">https://covid19.nj.gov/faqs/nj-information/travel-and-transportation/which-states-are-on-the-travel-advisory-list-are-there-travel-restrictions-to-or-from-new-jersey</a></li> </ul>
If someone in your family is exposed to COVID-19 and test negative for COVID- 19	<ul style="list-style-type: none"> <li>Quarantine for 14 days after exposure as you can still become sick or test positive. If they have no symptoms after the 14 days, then your quarantine is over</li> </ul>
If someone in your family is exposed to COVID-19 and test positive for COVID-19 <b>without</b> symptoms	<ul style="list-style-type: none"> <li>Quarantine for 10 days</li> </ul>
If someone in your family is exposed to COVID-19 and test positive for COVID-19 <b>with</b> symptoms	<ul style="list-style-type: none"> <li>Quarantine for 10 days and at least 24 hours with no fever and no other symptoms</li> </ul>
For family members of an exposed individual in the home <b>without</b> symptoms	<ul style="list-style-type: none"> <li>Quarantine for 14 days</li> </ul>
For family members caring for exposed individual <b>with</b> symptoms	<ul style="list-style-type: none"> <li>Quarantine for 10 days plus 14 more days</li> </ul>

- Cancel your in-person session and contact your pediatrician/ family physician when any member of your family has been exposed to someone with COVID-19 or develops any symptoms of COVID or other illnesses including but not limited to vomiting, flu-like symptoms, eye/ear drainage, rash and lethargy.

Thank you for your cooperation in preventing the spread of illness. We look forward to working with you and your family.





**POLICIES AND PROCEDURES  
NEW JERSEY EARLY INTERVENTION SYSTEM**

No: <b>NJEIS-14</b>	Subject: <b>Rescheduling, Make-Up or Compensatory Services for Missed/Disrupted Early Intervention Services</b>
Effective Date: <b>December 1, 2017</b>	Responsible Party: <b>Part C Coordinator</b>

**I. Purpose**

To identify circumstances and procedures for offering to reschedule, make-up and/or provide compensatory services for missed/disrupted early intervention services to eligible children and families.

**II. Policy**

- A. EIPs/practitioners are required to offer a “Rescheduled” or a “Make-Up” early intervention service to a family when the missed or disrupted service is due to a system reason, including practitioner cancellations.
- B. EIPs have the option to offer a family a substitute practitioner when an assigned practitioner is unavailable to provide a regular or make-up service.
- C. As used in NJEIS-14, the following words and terms are defined as indicated:
  - 1. “Reschedule” means providing a service within the same week, bi-week, month (frequency) and length (i.e. 60-minutes) of service time established under the Individualized Family Service Plan (IFSP) but at a rescheduled time different from the practitioner’s scheduled appointment.
  - 2. “Make-Up” means providing a service to replace a service that did not occur due to a NJEIS cancellation that was not able to be rescheduled.
  - 3. “Compensatory” means services identified by the Procedural Safeguards Office that off-set missed/disrupted services due to system reasons.
  - 4. “Week” means Sunday through Saturday.
  - 5. “Month” means calendar month.
- D. EIPs/practitioners may not make-up services under the following circumstances, however, practitioners may offer, but are not required, to reschedule a service under these circumstances:
  - 1. The family cancels;
  - 2. A service is missed due to extreme weather or natural disaster; or

3. If a scheduled service falls on a State, federal or religious holiday, and the agency provides the parent with a written copy of the agency's calendar identifying when the agency will be closed for services.
- E. In the event make-up services cannot be adequately arranged and provided by the EIP, families must be apprised of their right to seek compensatory service(s).
- F. Only the Procedural Safeguards Office can determine the need for a compensatory service, and can offer such service to the parent, as appropriate.
- G. Service Coordination is responsible to ensure any compensatory services issued by the Procedural Safeguards Office are offered to eligible children and their families.

### **III. Procedures**

#### **A. Rescheduling for Family Cancellations, Practitioner Cancellations, Extreme Weather, or Holidays**

1. When a family or practitioner is unable to keep a regularly scheduled service, there is an extreme weather event, or a Holiday is on a planned service day, the following procedures are to be followed:
  - a. The practitioner and family determine together if there is an acceptable alternative day/time to reschedule (defined above) the planned service.
  - b. The rescheduled service must be provided within the same week, bi-week, month (frequency) and length (i.e. 60-minutes) of service time established under the Individualized Family Service Plan (IFSP) but at a rescheduled time different from the practitioner's scheduled appointment. Example: a weekly one-hour Physical Therapy on Monday is rescheduled for a one-hour Physical Therapy on Friday. A monthly one-hour Speech Therapy service is rescheduled 2 weeks later on a Wednesday within the calendar month.
  - c. Practitioners log the rescheduled service in the Early Intervention Management System (EIMS) as a regularly delivered service.
  - d. If an acceptable rescheduled (alternative) service cannot be arranged within the scheduled week, bi-week, month, the practitioner documents the following in the EIMS:
    - (1) Person who cancelled;
    - (2) Reason for the cancellation, including description of any extreme weather event;
    - (3) Date of missed service; and
    - (4) Communication with family regarding the cancellation and any attempt/offer made to reschedule.

#### **B. Make-up Services**

1. When a practitioner is unable to keep a regularly scheduled service and rescheduling is not an option, the following procedures are to be followed:
  - a. The practitioner and family determine together the next acceptable alternative day and time to make-up the missed service.
  - b. Regularly scheduled services must be provided as planned and are not affected by the addition of a make-up service.
  - c. The make-up service must be consistent with the planned frequency of the missed service. Example: a one-time per week service may not exceed more than a one-time per week make-up.

- d. The make-up service must be consistent with the planned length of the missed service. Example: a make-up one-hour Physical Therapy service cannot exceed a one-hour Physical Therapy.
- e. If a make-up service is less than the IFSP service time (e.g. 45 minutes instead of an hour), the “shortfall” in time cannot be made-up at another time.
- f. The practitioner documents make-up services in the EIMS including:
  - (1) Reason for the cancellation/disruption;
  - (2) Date(s) of missed service being made-up; and
  - (3) Communication with family regarding the cancellation and any attempt/offer made to make-up the service.
- g. After the service has been provided, the practitioner logs it in the EIMS as a “Make-Up” service. Make-up sessions can only be provided after a planned session was missed, not before.

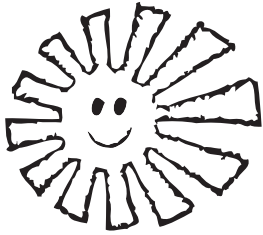
C. Compensatory Services

- 1. Only the Procedural Safeguards Office can determine the need for a compensatory service, and, as appropriate, offer such a service to the parent.
- 2. The EIP must timely notify the Procedural Safeguards Office and Service Coordinator in writing by email of any potential family requests for compensatory services. This includes children that are or close to three years of age. The following information must be included in the email:
  - a. Name and DOB of the child
  - b. Child ID
  - c. Name of the parent/primary caregiver
  - d. County
  - e. Name of service coordinator
  - f. Service type and frequency missed/disrupted

**IV. Related Policies/Procedures**

NJEIS-08 No Provider Available  
NJEIS-09 EIP Assignment





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## Family/Practitioner Agency Policies and Guidelines

### Agency Calendar

Please note that the calendar reflects the days Sunny Days honors as State/Federal Holidays. On these days, services may not be provided nor will the practitioner be required to make them up.

Included in this Welcome Packet is the **NJEIS-14 Policy on Rescheduling, Make-up or Compensatory Services for Missed and Disrupted EI Services**. Sunny Days follows this policy. Please feel free to contact your Regional Administrator with any questions regarding these procedures.

### Monitoring

Each program must assume that families are receiving the services listed in their child's IFSP. We anticipate that you're involved in the intervention process and decisions made regarding your child. One way of assuring we provide quality services is through a home visit with you, your practitioner and a Clinical Educator who will observe the session. Another way of assuring quality and consistent services may be through the use of a parent survey/questionnaire. You may be asked to complete a survey. Please note your answers will not affect your continued service and is voluntary.

In addition at Sunny Day, each practitioner is required to complete a Service Verification Log. Please do not sign blank or incomplete logs. You will be asked to sign the log at the end of each session. Session summary notes which detail the activities of each session may be left with you to help support you in following suggested strategies towards outcomes written in your family's IFSP.

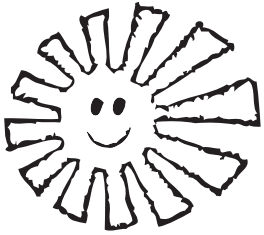
### Confidentiality (please see agency policy enclosed)

Sunny Days requires that each practitioner respect a family's right to confidentiality. Please be assured that your child's concern and/or family issues will not be discussed with anyone outside the early intervention system. You will be asked to sign a **Release of Information** to a doctor or outside entity. This form will specify how the information will be given and exactly what information will be given. This form once signed, is in effect for one year from date you signed consent. **Consent to Release Information** is also needed for services in your child's daycare.

### Additional Services

Please note that your practitioner may request an assessment/consultation with another practitioner in order to better meet the needs of your child and family. If you have additional concerns about your child or a family issue, you may request consultation with a specific discipline. You should call your Regional Administrator to discuss your concerns. In turn, your Regional Administrator will speak with your Service Coordinator. All requests will be responded to in a timely fashion.

Please feel free to visit our website at [www.sunnydays.com](http://www.sunnydays.com) and visit the Family Resource section.



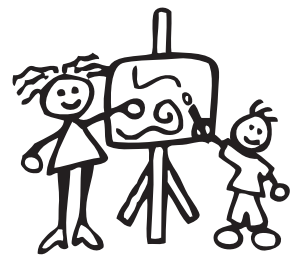
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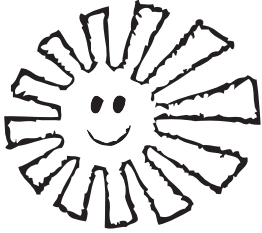
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## PROGRAM GUIDELINES

1. All services are individualized and provided in a manner which best reflects each child and family’s specific needs.
2. All services may be available 7 days a week during both traditional and non-traditional hours.
3. All services provided in natural environments in accordance with the family’s needs and routines.
4. All services provided will be done in accordance with the child’s IFSP outcomes.
5. All records and information on each child will be kept confidential. Information will not be shared without written consent from the family.
6. All services provided will be provided in accordance with the Part C and State criteria for Early Intervention services.
7. Any IFSP changes need to be agreed upon by the entire IFSP Team including the Family, Service Coordinator, Provider and Sunny Days Administrator.





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## YOUR FAMILY’S RIGHTS PERTAINING TO EARLY INTERVENTION SERVICES

**YOU HAVE A RIGHT TO** give voluntary, informed written permission for services that will be provided.

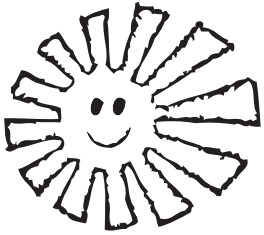
**YOU HAVE A RIGHT TO** refuse or withdraw consent for specific services without putting other services at risk.

**YOU HAVE A RIGHT TO** have services provided consistent with the Individualized Family Service Plan (IFSP).

**YOU HAVE A RIGHT TO** have written prior notice before services are changed.

**YOU HAVE A RIGHT TO** request mediation, an impartial hearing or a systems complaint investigation if you disagree with the early intervention services being provided.

**YOU HAVE A RIGHT TO** continue to receive services during mediation or impartial hearing proceedings unless both sides agree not to continue services. You also have the option to receive other agreed upon services or withdraw your child and family from early intervention services at any time. These are called pendency placement rights.



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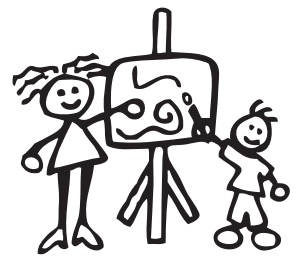
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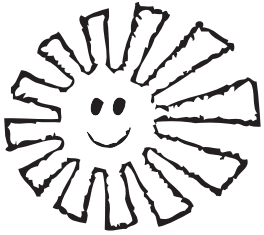
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## EMERGENCY PROCEDURES

**POLICY:** All Sunny Days Practitioners will follow established guidelines in the event of a medical emergency in a child's home.

1. In the event of a medical emergency or first aid incident, practitioners will assist the parent/caregiver in making decisions and assessing the situation.
2. If first aid is determined by parent to be necessary, practitioner will assist parent in administering same (i.e. bandaging, cold packs).
3. If parent/caregiver decide that a call for First Aid Squad is necessary, practitioner can assist parent/caregiver in calling 911 and will then stand by until the First Aid Squad arrives.





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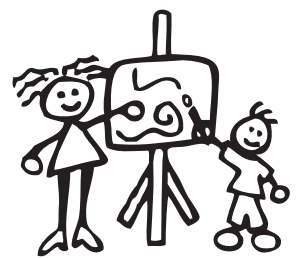
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## CONFIDENTIALITY

**POLICY:** Sunny Days is committed to maintaining strict Confidentiality for all children and their families. To ensure confidentiality, all practitioners and staff members are required to adhere to the following guidelines:

1. Information about clients and their families should not be discussed in public places, other clients' homes, or with family members or friends.
2. Documentation with any identifying information should be kept in a secure location.
3. Sunny Days information concerning clients and their families may only be shared with outside agencies after written permission is received from parent and/or legal guardian.

The Standards for Privacy of Individually Identifiable Health Information (“Privacy Rule”) establishes, for the first time, a set of national standards for the protection of certain health information. The U.S. Department of Health and Human Services (HHS) issued the Privacy Rule to implement The requirement of the Health Insurance Portability and Accountability Act of 1996 (“HIPPA”). The Privacy Rule standards address the use and disclosure of individuals’ health information-called “protected health information” by organizations subject to The Privacy Rule-called “covered entities,” as well as standards for individuals’ privacy rights to understand and control how their health information is used. Within HHS, the Office for Civil Rights (“OCR”) has responsibility for implementing and enforcing the Privacy Rule with respect to voluntary compliance activities and civil money penalties. A major goal of the Privacy Rule is to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public’s health and well-being. The Rule strikes a balance that permits important use of information, while protecting the privacy of people who seek care and healing. Given that the health care marketplace is diverse, the Rule is designed to be flexible and comprehensive to cover the variety of uses and disclosure that need to be addressed.







NJ Regional Early Intervention Collaboratives (REICs)

# Family Matters

[www.thefamilymatterswebsite.org](http://www.thefamilymatterswebsite.org)



**Do You Have Concerns About A Child's Development?**  
To make a referral to Early Intervention in New Jersey for a child under the age of 3, Call toll-free: **888-653-4463**

NJ Regional Early Intervention Collaboratives (REICs)

Family Support

Transition to Preschool

Resources Library

Video Library

Contact Us



News You Can Use



Virtual Events/Webinars



Activities in Your Area



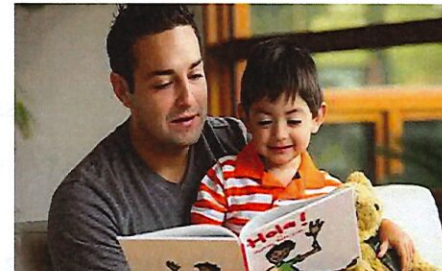
Transition to Preschool



What is Social Emotional Development?



Developmental Milestones Checklists



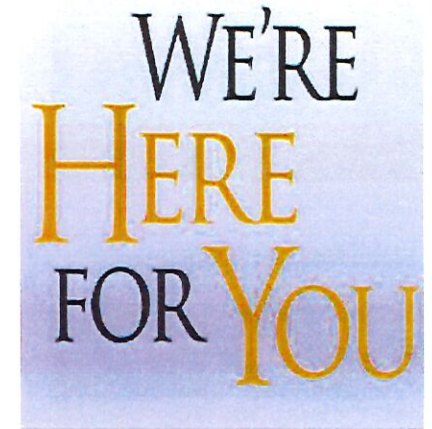
Early Language & Literacy



Early Development & Well-Being

**The Family Support Coordinators located at each of the four Regional Early Intervention Collaboratives (REICs) across New Jersey have developed this website for early intervention families to:**

- Let you know about the **latest news and current events** going on in NJ's Early Intervention
- Learn more about the **NJ Early Intervention System of Services & Supports**
- Access their **Family Rights in the NJEIS** and other relevant information
- Provide current information on **Child Development for Infants & toddlers, birth to three**
- Connect you to **state & local resources** for your child and family
- Learn more about **Transitioning Your Child from Early Intervention to Preschool** approaching age 3



## **Who Are Your Family Support Coordinators?**

**Desirée Bonner and Lisa Weinstein**

**Helpful Hands, Northeast REIC**

65 Willowbrook Boulevard Suite 405, 4th Floor, Wayne, NJ 07470

Phone: (973) 256 8484

**Counties Served:** Bergen, Hudson, Passaic

**Carmela Balacco and Monica Anderson**

**Family Link REIC**

2333 Morris Avenue, Suite A204, Union, NJ 07083

Phone: (908) 964-5303

**Counties Served:** Essex, Morris, Sussex, Union, Warren

**Shakira Linzey and Kristal Langford**

**Mid-Jersey CARES REIC /CJFHC**

2 King Arthur Court, Suite B, North Brunswick, NJ 08902

Phone: (732) 937-5437 ext. 125

**Counties Served:** Hunterdon, Mercer, Middlesex, Monmouth, Ocean, Somerset

**Jerrice Moore**

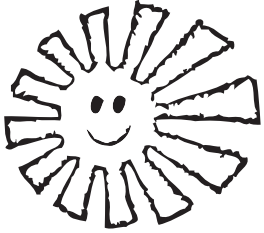
**Southern New Jersey REIC**

1044 South Rt. 73, Suite A Berlin, NJ 08009

Phone: (856) 768-6747

**Counties Served:** Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Salem





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To All Parents and Caregivers,

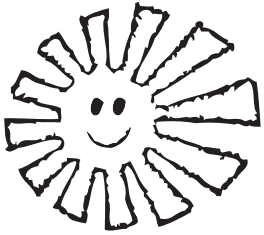
The Flu season is upon us. In an effort to protect the children, families and staff that provide services through Sunny Days and reduce the spread of infection, we are sending this reminder to all families to help guide you in recommendations and precautions we can all take to protect ourselves.

## If your child is not feeling well ...

- **Please call your practitioner and reschedule your appointment.** Your practitioner most likely visits with other children and families throughout the day and should not contribute to the spread of infections.
- **If any family member has the flu, services need to be cancelled and rescheduled.**
- **Watch carefully for signs and symptoms of flu.** Some children may not be able to tell you about their symptoms, which can delay your response to their illness. Symptoms of flu include fever or chills *and* cough or sore throat. In addition, symptoms of flu can include runny nose, body aches, headache, tiredness, diarrhea, or vomiting.
- A fever is a temperature measured by mouth with a thermometer that is equal to or greater than 100 degrees Fahrenheit (37.8 degrees Celsius). If you are not able to measure a temperature, signs and symptoms that may indicate your child has a fever include chills, feeling very warm to the touch, having a flushed appearance, or sweating.
- **Stay home if you or your child is sick with the flu** until at least 24 hours after there is no longer a fever or signs of a fever (without the use of fever-reducing medicine). Children and teenagers ***should not*** be given aspirin (acetylsalicylic acid); this can cause a rare but serious illness called Reye’s syndrome.
- **Make sure your child gets plenty of rest and drinks clear fluids** (such as water, broth, sports drinks) to prevent dehydration. For infants, use electrolyte beverages such as Pedialyte®.
- **Contact your doctor immediately if a child younger than 5 years of age is sick.** This is important because the antiviral medicines used to treat flu work best when started within the first 2 days of getting sick. Your doctor will tell you what special care is needed for your child.

For more information about flu, call 1-800-CDC-INFO or visit [www.flu.gov](http://www.flu.gov)





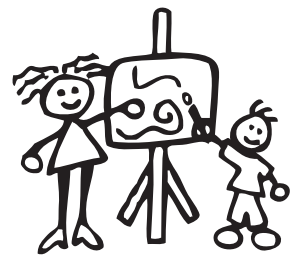
**SUNNY DAYS EARLY CHILDHOOD DEVELOPMENTAL SERVICES INC.**

*"Making the Future Brighter, One Child at a Time"*

300 Corporate Center Drive \* Manalapan, NJ 07726 \* tel: 732-761-0088 \* fax: 732-761-2550  
www.sunnydays.com

## **The Sunny Days Program Services for Children with Autism**

Sunny Days has a large program of services available for children with a diagnosis of Autism/PDD or those children that have characteristics of an Autism Spectrum Disorder (ASD). Sunny Days uses an Evidenced Based approach that allows our children to learn in a systematic manner. The child's program is created using A Step by Step Curriculum for Early Learners with Autism Spectrum Disorders. The curriculum is based on best practices, and provides the practitioner/parent the exact steps on what to teach while utilizing the principles of Applied Behavior Analysis. Sunny Days provides an Autism Team that is comprised of team leaders, therapists, Regional Administrator, and Clinical Educator that is a Board Certified Behavior Analyst. The team leaders are typically Special Educators or Behavioral Specialists and their role is to help guide the program of each individual child while providing support to families and other professionals working with the family.



Child's Name: \_\_\_\_\_



# INFANT DEVELOPMENT CHART - FIRST 18 MONTHS

Harold Ireton, Ph.D.



Birth	Social	Self-Help	Gross Motor	Fine Motor	Language	Birth
	Quiets when fed and comforted.		Wiggles and kicks.	Looks at objects or faces.	Cries.	
1 mo.	Makes eye contact.	Alert: interested in sights and sounds.	Thrusts arms and legs in play.		Makes small throaty sounds.	1 mo.
	Social smile.		Lifts head and chest when lying on stomach.	Follows moving objects with eyes.	Cries in a special way when hungry.	
2 mos.						2 mos.
	Recognizes mother.	Reacts to sight of bottle or breast.	Holds head steady when held sitting.	Holds objects put in hand.	Makes sounds—ah, eh, ugh.	
3 mos.						3 mos.
	Recognizes other familiar adults.	Increases activity when shown toy.	Makes crawling movements.	Holds up hand and looks at it.	Laughs out loud.	
4 mos.					Squeals.	4 mos.
	Interested in his or her image in mirror, smiles, playful.	Reaches for objects.	Pivots around when lying on stomach.	Puts toys or other objects in mouth.	Makes sounds like "Ah-goo."	
5 mos.						5 mos.
	Reacts differently to strangers.	Comforts self with thumb or pacifier.	Rolls over from stomach to back.	Picks up objects with one hand.	Responds to voices: turns head toward a voice.	
6 mos.						6 mos.
	Reaches for familiar persons.	Looks for object after it disappears from sight—for example, looks for toy after it falls off tray.	Rolls over from back to stomach.	Transfers objects from one hand to the other.	Babbles.	
7 mos.					Responds to his/her name; turns and looks.	7 mos.
	Gets upset and cries if left alone.	Feeds self cracker or cookie.	Sits alone, steady.	Holds two objects, one in each hand, at the same time.	Makes sounds like da, ba, ga, ka, ma.	
8 mos.						8 mos.
	Plays "peek-a-boo."	Picks up small cup with two hands.	Moves forward somehow while on stomach.	Uses two hands to pick up large objects.	Makes sounds like da-da, ma-ma, ba-ba.	
9 mos.						9 mos.
		Resists having a toy taken away.	Crawls on hands and knees.			
10 mos.						10 mos.
	Plays "patty-cake."	Picks up spoon by handle.	Pulls self to standing position.	Picks up small objects using precise thumb and finger grasp.	Imitates sounds that you make.	
11 mos.						11 mos.
	Waves "Bye-bye."		Walks around playpen or furniture while holding on.	Puts small objects in cup or other container.	Understands phrases like "No No" and "All gone."	
12 mos.						12 mos.
		Helps a little when being dressed.	Stands alone, steady.	Turns pages of books a few at a time.	Says "Mama" or "Dada" for parent.	
13 mos.					Hands you a toy when asked.	13 mos.
	Plays with other children.	Lifts cup to mouth and drinks.	Walks without help.	Builds tower of 2 or more blocks.	Points to things.	
14 mos.						14 mos.
	Gives kisses or hugs.	Insists on feeding self.	Climbs up on chairs or other furniture.	Marks with crayon or pencil.		
15 mos.						15 mos.
	Imitates simple acts such as hugging or loving a doll.					
	Greets people with "Hi" or similar.	Feeds self with a spoon.	Runs.	Scribbles with crayon or pencil.	Says 2 or more words besides Mama or Dada.	
18 mos.						18 mos.
	Wants a doll, teddy bear or blanket in bed with him/her. Sometimes says "No" when interfered with.	Eats with a fork.	Kicks a ball forward.	Builds tower of 4 or more blocks.	Uses at least ten words.	
21 mos.			Good balance and coordination.		Asks for a drink or food, using words or sounds.	21 mos.



# CHILD DEVELOPMENT CHART - FIRST FIVE YEARS

Harold Ireton, Ph.D.



	SOCIAL	SELF-HELP	GROSS MOTOR	FINE MOTOR	LANGUAGE	
5-0 yrs.	Shows leadership among children.	Goes to the toilet without help.	Swings on swing, pumping by self.	Prints first name (four letters).	When asked, for example, "What is an orange?" answers, "A fruit."	5-0 yrs.
4-6	Follows simple rules in board or card games.	Usually looks both ways before crossing street.	Skips or makes running "broad jumps."	Draws a person that has at least three parts - head, eyes, nose, mouth, etc.	Reads a few letters (five+).	4-6
4-0 yrs.	Protective toward younger children.	Buttons one or more buttons.	Hops around on one foot, without support.	Draws recognizable pictures.	Prints a few letters or numbers.	4-0 yrs.
3-6	Plays cooperatively with minimum conflict and supervision.	Dresses and undresses without help, except for tying shoelaces.	Hops on one foot without support.	Cuts across paper with small scissors.	Follows a series of three simple instructions in order.	3-6
3-0 yrs.	Gives directions to other children.	Washes face without help.	Rides around on tricycle, using pedals.	Draws or copies a complete circle.	Talks in long, complex sentences (10 or more words).	3-0 yrs.
2-6	Plays games like tag, hide and seek.	Dresses self with help.	Walks up and down stairs - one foot per step.	Cuts with small scissors.	Answers questions like, "What do you do with a cracker? a hat?"	2-6
2-0 yrs.	Plays a role in "pretend" games like house or school - mom, dad, teacher.	Washes and dries hands.	Stands on one foot without support.	Draws or copies vertical ( ) lines.	Speaks clearly - is understandable most of the time.	2-0 yrs.
18 mos.	Plays with other children - cars, dolls, building.	Opens door by turning knob.	Climbs on play equipment - ladders, slides.	Scribbles with circular motion.	Talks in sentences at least four words long.	18 mos.
12 mos.	"Helps" with simple household tasks.	Takes off open coat or shirt without help.	Walks up and down stairs alone.	Turns pages of picture books, one at a time.	Has a vocabulary of at least 20 words.	12 mos.
9 mos.	Usually responds to correction - stops.	Eats with spoon, spilling little.	Runs well, seldom falls.	Builds towers of four or more blocks.	Follows two-part instructions.	9 mos.
6 mos.	Shows sympathy to other children, tries to comfort them.	Eats with fork.	Kicks a ball forward.	Scribbles with crayon.	Names a few familiar objects in picture books.	6 mos.
Birth	Sometimes says "No" when interfered with.	Feeds self with spoon.	Runs.	Picks up two small toys in one hand.	Asks for a drink or food, using words or sounds.	Birth
18 mos.	Greets people with "Hi" or similar.	Insists on doing things by self such as feeding.	Walks without help.	Stacks two or more blocks.	Uses at least ten words.	18 mos.
12 mos.	Gives kisses or hugs.	Lifts cup to mouth and drinks.	Stands without support.	Picks up small objects - precise thumb and finger grasp.	Talks in single words.	12 mos.
9 mos.	Waves "Bye-bye."	Picks up a spoon by the handle.	Walks around furniture or crib while holding on.	Transfers toy from one hand to the other.	Says "Mama" or "Dada" for parent, or similar.	9 mos.
6 mos.	Plays social games, "peek-a-boo," "patty-cake."	Feeds self cracker.	Crawls around on hands and knees.	Picks up toy with one hand.	Understands phrases like "No-no" and "All gone."	6 mos.
Birth	Pushes things away he/she doesn't want.	Comforts self with thumb or pacifier.	Sits alone . . . steady, without support.	Looks at and reaches for faces and toys.	Makes sounds like da-da, ma-ma, ba-ba.	Birth
Birth	Reaches for familiar people.	Reacts to sight of bottle or breast.	Rolls over from back to stomach.		Responds to name - turns and looks.	Birth
Birth	Distinguishes mother from others.		Turns around when lying on stomach.		Babbles.	Birth
Birth	Social smile.		Lifts head and chest when lying on stomach.		Laughs out loud.	Birth
Birth					Makes sounds - ah, eh, ugh.	Birth
Birth					Cries in a special way when hungry.	Birth

## Be in the Know about Lead Poisoning!

- Know that every young child in New Jersey is at-risk for lead poisoning.
- Know that a child between 6 months-3 years is at highest-risk.
- Know that lead affects a child's developing brain and nervous system.
- Know that the effects of lead are permanent.
- Know that a child with lead poisoning does not look or act sick.
- Know that lead poisoning can cause developmental delays, behavioral problems, and learning disorders.
- Know that a blood test is the only way to know a child has lead poisoning.
- Know that New Jersey law requires that all children be tested at ages 1 and 2 years.
- Know that children between 3-6 years, if they have never had a blood test for lead, should get one.
- Know that the effects of lead, even at blood test results less than 10 ug/dL (micrograms per deciliter), can make it hard for children to learn. These effects include: hyperactivity, aggression, attention deficits, lowered IQ, decreased hand-eye coordination, longer reaction times, speech and hearing problems, and difficulty acquiring language skills.
- Know that housing built before 1978, with chipping and peeling paint, along with lead-based paint dust are the primary sources of lead.
- **Know that parents can protect their children by learning how to prevent lead poisoning!**

Parents learning about Lead Poisoning



## Follow These Steps to Learn How to Protect Your Family

### Step 1: Test your home.

- Have your home inspected by a licensed lead inspector/risk assessor.
- Know that there is financial assistance available through the Lead Hazard Control Assistance Fund. (877-DCA-LEAD)

### Step 2: Test your child.

- Take your child to his/her healthcare provider. If you do not have insurance, free or low-cost testing is available from your local health department or Federally Qualified Health Center.
- Know what the test result means. The Centers for Disease Control and Prevention (CDC) defines lead poisoning as a blood lead level of 10 ug/dL (micrograms per deciliter) or higher.
- Blood lead levels 10 ug/dL or above will require retesting. Keep all appointments with your child's health care provider.

### Step 3: Protect your child.

- Wash your child's hands before meals and sleeping.
- Wash your child's hands after playing outside.
- Offer your child healthy foods with calcium and iron.
- Remove household dust using a wet sponge and mop.
- Learn how to safely renovate and remodel.



### Step 4: Share what you know with family and friends.

- All children living in New Jersey are required to get a blood test for lead.
- Adults can protect the children in their care by following these steps.

For more information on how to get your home tested, how to get your child tested, or how to protect your child contact:  
call

New Jersey Department of Health and Senior Services  
609-292-5666

or visit us on the Internet at

[www.state.nj.us/health/fhs/newborn/lead.shtml](http://www.state.nj.us/health/fhs/newborn/lead.shtml)  
[www.leadsafenj.org](http://www.leadsafenj.org)





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“Making the Future Brighter, One Child at a Time”

300 Corporate Center Drive \* Manalapan, NJ 07726 \* tel: 732-761-0088 \* fax: 732-761-2550  
www.sunnydays.com

Dear Families:

Sunny Days Early Childhood Developmental Services, your child's current early intervention provider is excited to announce that our sister company Sunny Days Sunshine Center has expanded our center-based locations!

Sunny Days Sunshine Center can provide supplemental services to what early intervention offers so that as a team, we can help your child reach their full potential. Sunny Days Sunshine Center is dedicated to children birth-18 who may be experiencing challenges with learning, speech-language, feeding, behavioral, social skills, sensory processing, and/or motor development. They are able to provide a comprehensive approach that allows for individual and group therapy sessions that are center based, community-based, and/or home-based therapy sessions that truly address each family's needs. The Sunshine Center believes in a hands-on approach, collaboration, family training, and most importantly generalization.

They offer the following services:

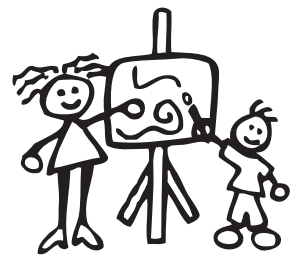
- Social Skills Classes for children age 2 and up
- Occupational Therapy
- Speech and Language Therapy
- Feeding Therapy
- Physical Therapy
- ABA Therapy/Behavioral Services
- Daily Living Skills (12+)
- Counseling
- Summer and Winter Mini Camps
- Parent Training Seminars
- Parent Support Group
- School observations and consultations including assistance with IEP's

They accept most major insurances!

Give them a call today or visit their website to learn more!

1-866-55-SUNNY (78669)

www.SUNNYDAYSSUNSHINECENTER.com



July 2021

Dear Families:

The following is a list of Sunny Days' Regional Administrators and Clinical Educators

<b>Administrators</b>	<b>Telephone</b>	<b>E-mail</b>	<b>Counties in Charge</b>
Sarah Martin	(201) 784-7577	smartin@sunnydays.com	Intervention Services in Bergen, Hudson, Morris and Passaic.
Sheryl Newman	(732) 905-8939	snewman@sunnydays.com	Intervention Services in Mercer, Middlesex, Ocean and Somerset.
Debbie Zielinski	(732) 335-3720	dzielinski@sunnydays.com	Intervention Services in Sussex, Essex and Union. Coordinator of Autism Services in North and Central NJ
Marisa LaMonte-Paulsen	(732) 905-7737	mlamontepaulsen@sunnydays.com	Intervention Services in Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Hunterdon and Monmouth. Coordinator of Autism Services in the Southern Region.
<b>Clinical Educators</b>	<b>Telephone</b>	<b>E-mail</b>	<b>Counties in Charge</b>
Carmela Hanna, DPT	(732) 294-3801	channa@sunnydays.com	Initial Evaluations/Assessments, Annual Evaluations/Exit Evaluations Sussex, Morris, Hudson, Bergen, Union, Passaic, Hunterdon, Ocean, Atlantic and Cape May Counties
Jacquie Jupin-Manzi, RNC-NIC, MHA, IMH E®	(732) 223-0211	jjupin-manzi@sunnydays.com	Intervention Services In Central and Southern New Jersey