

# Puzzle Pieces

Solving the puzzle...Empowering the child



Meryl Lipton, MD, PhD  
Executive Director

## Building on the Positive

### A Powerful Prescription for Every Child

The development of a child's strengths should be a clear, concrete, part of life in school as well as at home....

Each of us is a unique individual with varying degrees of strengths and weaknesses. Some things are easy for us to accomplish while others are much more difficult. Children who experience neurobehavioral challenges must confront demands on a daily basis, and often times parent and teacher expectations can contribute to their lack of success in conquering their imperfections.

Children with neurobehavioral issues often receive negative feedback from people at home, in school, and in the community. When this occurs, it can contribute to negative feelings of self worth.

Frequently, when a parent receives information at parent/teacher conferences, IEP meetings or evaluation feedback sessions, strengths and weaknesses are identified. Most of the time is utilized to discuss strategies to improve deficit areas. Why is there such an emphasis on inability??? Is this the best approach? Is it a necessary part of the feedback? Absolutely! But....it is also important that we don't get "stuck" there. More importantly, we must focus on the positive aspects of a child's performance. It is imperative that we discuss a child's strengths and spotlight the things that contribute to a child's positive self esteem. We must build positive experiences each and everyday because these constructive occurrences will allow the child to feel competent and successful.

After participating in hundreds of these conferences, I have concluded that "being positive" and developing a student's, strengths must be a clear, concrete and an integral part of every

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## Nurturing Self-Esteem in Children with Neurobehavioral Disorders

Julie O'Malley, M.Ed., Psy.D.  
Licensed Clinical Psychologist

Self-esteem is the collection of beliefs or feelings that we have about ourselves or our "self-perceptions". Healthy self-esteem is an essential component to emotional development in children and adolescents. Research has suggested that a positive self-concept is more important to academic success than a high IQ score. Children with neurobehavioral disorders are at even greater risk for developing a poor self- concept, because they receive more negative than positive feedback from others. However, parents, teachers and other professionals working with these children can take steps to develop positive feelings of self-worth.

**Help Your Child Feel Appreciated:** Don't ignore a child's problems, but focus energy on their strengths. A great way to do this is by setting aside "special time" during the week alone with each child. Even 15 minutes can

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## Building on the Positive

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child's educational experience.

We now recognize that many of our children have problems with motor skills like buttoning, tying their shoes, riding their bicycles or participating in team sports, etc. Many of them however, often demonstrate outstanding skills in reading, rote memory, auditory learning, etc.

It brings to mind a terrific 2nd grade boy, who because of his motor skills deficit, could not draw, color or paint. He was not having a good time in his art class! His teacher asked him if he wanted to go to the kindergarten class during his art period and read to the children. He was so excited to have this opportunity and he eagerly looked forward to this special privilege each week. He found books on topics he thought the students would find interesting. The kindergartners loved that an "older student" was coming to read to them and he was able to develop a wonderful relationship with the students.

Why should this 2nd grade student be required to take an art class and learn how to "draw"? Not everyone excels at art. The goal of education should be to learn and grow and to develop skills that will enhance your life.

There are many opportunities within the school environment for every child to develop their individual areas of strength, both physically as well as academically. For the child who has a need to "move around", he can have the opportunity to be an "errand runner" for the teacher. Having this opportunity can help a child feel special! I know a fifth grade girl who has had a difficult time developing her reading skills. Unlike the 2nd grade student, she is a wonderful artist who was given the opportunity to design all of the "signs" for the front office. She was thrilled and was able to develop her sense of responsibility.

Building strengths gives children the opportunity to build self esteem as well as to develop other academic or physical skills. It is the heart of what we need to strive for each and every day, at home, in school and in our community.

## Nurturing

*Continued from front page 1*

make a difference. During this time resolve not to answer the phone, or put on the TV or computer. Also, focus on the things your child enjoys doing so they can demonstrate their strengths.

**Help Children Develop Problem Solving and Decision Making Skills:** High self-esteem is associated with solid problem solving skills. For instance, if your child is having difficulty with a friend, you can ask him/her to think about a solution. Don't worry if they can't think of a solution

immediately, you can help him/her reflect upon possible solutions.

**Be an Empathic Parent:** Don't let your frustration become evident to your child. If your child is having difficulty learning or interacting socially, it is best to empathize that you understand they are having difficulty, rather than saying "Why don't you listen to me", or "Why can't you do this"?

**Model Positive Thinking:** Avoid unhelpful thinking (e.g., "I give up", "There's nothing I can do"). Change your thinking to more helpful thoughts (e.g., "I can't use this as an excuse"; "I need to take charge of my life").

**Find Your Child's Islands of Competence:** Make a list of your child's strengths. Find at least one and create ways of displaying and reinforcing it. For example, if your child is artistic, display their work and look for experiences that incorporate these strengths.

**Provide Opportunities for Kids to Help:** This is an excellent way to demonstrate their Islands of Competence.

**Have Realistic Expectations:** Don't expect too much or too little.

**Communicate With Your Child's Teacher:** Brainstorm ideas in which your child can exhibit his strengths in the classroom. Set up activities that allow the child to experience success and praise him upon completion.

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Selections from children and young adults sharing their gifts

## MASTER PIECE



Drawn freehand by Bob Hill, student

# Understanding and Dealing with Health Insurance and Service Providers

Parenting a child with special needs creates many challenges. You begin by searching for doctors and therapists who hopefully understand your child's specific needs. After a period of time, just when you begin to feel that you are on the right track to help your child's progress, you face a large hurdle...health insurance. You never imagine the problems that can arise in this area.

Parents assume, yes, insurance will cover medically necessary therapy your child desperately requires. Quite often, results are just the opposite, insurance denies coverage and payment for your child's therapies and numerous medical expenses. My husband I and found ourselves in this situation when our son was young.

Insurance nightmares... are just that and at times, can seem overwhelming. The following are a few suggestions that we have developed over the years. Our hope is that they will lead you down a successful path.

A good start is to obtain a copy of the master policy. This is not just a small booklet. It should be close to 100 pages or so and is much more specific regarding your coverage. You can request one from your employer; most times, they will provide it to you, but are not required to do so. If you have an individual policy, that is your master policy. Next check your Certificate of Coverage. It describes deductibles, out-of-pocket expenses and any benefits (i.e.. disability & life insurance) along with information regarding the type of policy you have. i.e. PPO, POS, HMO, indemnity, etc. Always keep track of your deductibles and co-insurance amounts. Many times there are errors in these figures; rarely are they in your favor.

Many parents are afraid of pre-existing condition limitations. HIPPA laws came into effect in July of 1997. Thanks to HIPPA, a group plan cannot refuse to cover you, regardless of a pre-existing condition, provided you are coming from a group plan and you have been covered under a group(s) plan for 18 continuous months. Insurance can only refuse to cover you if you are applying for a new individual policy, or may impose a pre-existing limitation for up to 12 months if you have no prior insurance or are coming from an individual plan.

Never be afraid to question rejections of any kind. Most common denials are credited to usual and customary (UC) fee restrictions, and are especially true for therapies. Quite frequently, claim processors fail to recognize number of units for any given service. Physical and occupational therapies are billed in 15 minute units, with one session equaling one hour. Often, insurance will only pick them up as one unit instead of four per hour. Speech and psychological services are an exception as they are only billed by sessions. On average, rating services are a year or more behind the actual fee schedules. Call area service providers, and inquire as to what others are charging for the same service code. Comparisons will be quite helpful in receiving payment. A large percentage of claims get rejected all, but very few people ever question a rejection. You have a good chance of payment by simply appealing correctly and in a timely manner.

Save yourself time and aggravation by filling out one claim form, sign and date it, but do not put a diagnosis on the form. The diagnosis code is already on the bill. Simply write "See Attached". Make multiple copies along with carrier address labels. When a bill arrives, simply make a copy, attach a claim form, date it, label it and send to your carrier.

Try using only physical attributes of your child's condition as a diagnosis for insurance claims. The reasoning is rather simple; insurance only pays for physical conditions that can be improved or corrected. Examples might be low muscle tone, motor apraxia and dysphasia, etc. You will need to request that your physician write prescriptions using conditions for which your child is actually being treated and request that therapists do the same on their bills. Rarely do companies cover developmental delay and sensory integration, for example.

When speaking to insurance companies and service providers, the actual date of service is key to any discussion. The date that you receive the bill means nothing. It is helpful to keep a log or file of your Explanation of Benefits(EOB's) and bills by date of service; then when necessary you can easily find any claim and its status. Always log date, time and person when speaking with an insurance company, as rarely do you come in contact with the same agent twice. Turnover of personnel is high in most companies, so record what is said in writing each time, and that it will simplify the process if you need to contact them again. Only send copies of bills. It is much easier to make a copy of an original for a disputed claim than it is to make a copy of a copy. Follow-up is crucial for letters of medical necessity. Make sure that they are sent out in a timely manner.

Request that your doctor write prescriptions as specific as possible for services and materials such as chairs, walkers, physical therapy, augmentative equipment, etc.. Send copies of the prescription with each bill, and this will speed up the claims process when they question medical necessity. Many children and adults require augmentative equipment. Check with your carrier to see if they follow the Medicare guidelines most insurers follow these guidelines. Medicare covers augmentative equipment if it used for speech, and you can check with Medicare for current guidelines and codes.

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# Understanding Insurance

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Question their rejections and ask for specifics. Often it will be a service code or diagnosis they reject. Check with your provider to see if another code or diagnosis would be more appropriate. Remember you cannot request a provider to write something that is unethical. The "Women's Health and Cancer Act of 1998" is a patient-friendly law regarding the rejection of claims and appeals. It is worth reviewing.

## *Always Be Polite and Courteous, Yet Firm*

Remember COBRA/Continuation of Coverage is available for carry-over coverage. When leaving an employer, federal law allows you and your dependents to retain your insurance coverage for up to 18 months. The size of the group can affect the time allotment for COBRA. You will be responsible for paying the premiums at the same rate the employer is paying. Some states have different rules for employers with less than 20 employees. Illinois has a State Board of Insurance, so call them for assistance. Often just a call of inquiry from a board will be enough to get your insurance moving in the right direction.

## *Last But Not Least*

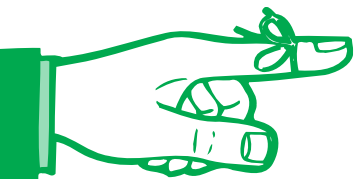
Never give up, as most of the time persistence will pay off. If you work for a large company, seek the assistance of the human resource director, union representative or person handling the insurance. Often they have no idea of how an insurer is treating their employees claims.

We hope that these hints will help you and your family and make your lives a bit easier.

Gail Borgerd & MedicClaim Consultants  
Ph# 847-657-1157/Fax# 847-657-1167  
email- Help@MedicClaim.com

## For Sale:

**Teacher's Manual:** *Non-Verbal Learning Disabilities, Solving the Classroom Puzzle* developed by Mardi Bernard, RN, is available for purchase. We only have 50 copies remaining. To order, please mail a check for \$13.00 (includes S & H) to Cate Gonley at Rush Neurobehavioral Center, 9711 N. Skokie Blvd. Suite D, Skokie, IL. 60077. Please allow 2 weeks for delivery.



Parents: Please remember to submit an "IEP at a Glance" to your child's new teacher. For suggestions, visit [www.RNBC.org](http://www.RNBC.org), select newsletter, and then click the **Fall 2003** issue and see **Parents' Perspectives: On the Home Front**.

## Rush NeuroBehavioral Center

*Founded in 1997, the Rush Neurobehavioral Center brings together professionals from multiple disciplines to address the diagnosis and treatment of children with neurobehavioral issues. RNBC's unique contribution is the understanding of each child's strengths and weaknesses within the context of the family and school. From this knowledge individualized interventions are developed, implemented, and monitored.*

### **RNBC Staff**

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# Center Spotlight

**Laura Wood** recently began at RNBC in the newly formed research assistant position. Laura will be working closely with Director of Research, Dr. Clark McKown, and Executive Director, Dr. Meryl Lipton, to enhance and execute the research aspect of the Center. Among her many tasks, she will be recruiting and enrolling study participants, administering study surveys and educational materials and overseeing, in addition to assisting with, projects. Prior to coming to RNBC, Laura was a lab manager and research assistant for the cognitive neuroscience laboratory at Stanford University in Palo Alto, CA.



There she coordinated reading intervention studies for both Scientific Learning Corporation and BrightStar Learning Limited. During her time at Stanford University, she gained experience in participant recruitment, psychological testing, fMRI, behavioral data acquisition and analysis. Laura received her B.A. in Psychology and minor in Communications Arts from Judson College in Elgin, IL. She is excited to be a part of this season in RNBC's growth as her desire is to work with children in a clinical setting to strengthen their lives and help each one know he or she is beautifully unique and priceless valuable.

RNBC is delighted to announce that **Marc Sandrolini, M.D.**, a child and adolescent psychiatrist, has joined the Center staff. Dr. Sandrolini specializes in the diagnosis and pharmacologic treatment of neuropsychiatric disorders such as Attention Deficit-Hyperactivity Disorder (ADHD), Autistic Spectrum Disorders and other Social Emotional Learning Disorders, and mood disorders. He will be available to see patients in the Skokie office and in Oak Park on Wednesdays.

Before coming to the RNBC, Dr. Sandrolini spent nine years as an assistant professor of Psychiatry at Rush University Medical Center. He will now also be a faculty member in the Department of Pediatrics. Dr. Sandrolini is known for his superb clinical work and his teaching. He has supervised and lectured residents, fellows and medical students at Rush University Medical College and the University of Illinois Hospital. He has also been an invited speaker on ADHD and several other neuropsychiatric topics at numerous schools, clinics and hospitals throughout Illinois and Indiana.



Dr. Sandrolini is board certified in both child and adolescent psychiatry and adult psychiatry. He completed his fellowship in child and adolescent psychiatry at Yale University in 1996, following completion of an adult psychiatry residency at the University of Illinois-Chicago Hospital in 1994. He attended medical school at Rush Medical College and before that earned a Bachelors degree in Psychology from the University of Illinois in Urbana-Champaign.

Dr. Sandrolini is also an accomplished musician who plays a West African drum called the djembe. He has traveled to Africa several times to study with master musicians and performs in Chicago with *The Holy Goat Ensemble*.



INCHES

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## Parent/Teacher Tip

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**Set a good example!  
Give gentle reminders, and support  
your child while they learn.**

## A Donor's Reflection: Interview with Bill Jacobs



As RNBC fast approaches its nine-year anniversary, we have taken a moment to reflect on the incredible people who made the dream of a multidisciplinary Center a reality. In addition to the growth and glowing reputation of RNBC's clinical side, we celebrate the continued development of RNBC research projects, the Pearl H. Rieger Fellowship and our many outreach initiatives. With the unwavering confidence and support of our donor family, RNBC has the means to contribute our research to the scientific community, train outstanding psychologists and impact the underserved communities of the Chicago area.

As we enter a time of significant growth and diversification of our outreach programs, it is important to consult those individuals responsible for bringing the RNBC dream alive. Co-founder, parent, donor and RNBC Advisory Board member, Bill Jacobs, shared some thoughts with us regarding the importance of continued donor support of RNBC programs and why he chooses to give year after

year. Philanthropy and community service is nothing new to Jacobs. In addition to his successful ownership of eight vehicle dealerships, he is a proud sponsor of the Hinsdale Center of the Arts, the Susan G. Komen Drive for the Cure, Past President of the Franciscan Learning Center, Founding Member and supporter of the Will County Center for Economic Development, Past Advisory Board Member of Friends of Prentice Hospital and RNBC Advisory Board member.

### As one of the founders of RNBC, what attracted you to the original vision for the Center?

While working with Dr. Meryl Lipton to treat our son, we were attracted to the vision of an all-encompassing Center for children with neurobehavioral issues. We knew from experience that resources available for children with these issues were very fragmented and not easy to find. The process is often overwhelming. With the help of three to four people, the RNBC was founded in order to provide families with a huge resource that supplies answers and opportunities without the questions and disarray that often accompanies finding the appropriate treatment. The Center provides a clear sense of direction with a multidisciplinary approach.

### You have been a dedicated RNBC donor and Advisory Board member for many years. What keeps you interested in supporting RNBC?

The work RNBC provides for children and families coping with neurobehavioral issues is incredible. It is motivating as a parent, a donor and an Advisory Board member. I want to spread the work of RNBC far and wide. It is very rewarding. I want others to see the same results we did with our son, who has become a wonderful, well-adjusted young man.

### In your opinion, as a parent and RNBC supporter, why is it important to bring neurobehavioral resources to underserved communities?

We have personally felt and seen the results of the Center. There is such a need. When we go out dining or to the grocery store, the prevalence of untreated neurobehavioral disorders in children is so obvious to us after going through it with our son. I would like to see an awareness of these issues spread to other families and communities. These kids are labeled as stupid and troubled. Through education, awareness and continued treatment, children and families can experience a difference. RNBC can provide this kind of direction. I want these methods to spread like wildfire. Every individual affected by neurobehavioral issues deserves the help available to become successful and learn to overcome their issues.

### In what direction would you like to see RNBC outreach programs grow in the future?

RNBC is limited in the number of individuals it is able to serve. I would like to see the Center get as much information out as possible to kids, families, the medical community, educational community and after school programs so people understand these issues and create successes, not failures.

If you are interested in making a donation to RNBC,  
please contact  
Stacy Shafer Peterson at (847) 933-9339 ext. 230.

## The RNBC Ninth Annual Dinner: Celebrating the lives and civic contributions of Justice Anne M. Burke and Nancy C. Crown

Please join us on Tuesday, October 25, 2005, at the Grand Ballroom of Four Seasons Chicago for the RNBC Ninth Annual Dinner. This year's award recipients promise to light up the evening with their inspirational life accomplishments and dedication to serving the greater good.



We are pleased to announce this year's Living Proof Award recipient as **Justice Anne M. Burke**. The Living Proof Award is given to recognize an individual with neurobehavioral issues for his or her lifetime of achievements.

Throughout her long career in public services as a children's advocate and legal professional, Justice Anne M. Burke of the Illinois Appellate Court's First District has endeavored to provide a voice to society's most fragile citizens. First appointed to the Appellate Court by the Illinois Supreme Court in 1995, Justice Burke was elected to the Appellate bench in 1996. Her judicial career began earlier, in 1987, with an appointment to the Illinois Court of Claims by Governor Jim Thompson. As the first woman to serve in that court, she was later reappointed by Illinois Governor Jim Edgar. Currently, Justice Burke serves as a Trustee on the Board of DePaul University, a Director of the Chicago Bar Foundation, a member of the Illinois Courts Commission, the Ruth Page Foundation and the Hundred Club of Cook County. She is a Dame of the Sovereign Order of Malta and Member National Leadership Roundtable on Church Management.

Despite Justice Burke's challenge with dyslexia, she has proven to be a success and formidable member of the Illinois community. It is with great pride that we honor Justice Burke for her lifetime of accomplishments, philanthropy and citizenship. She is and will continue to be an inspiration for us all.

This year, RNBC will bestow the Pearl H. Rieger Award upon **Nancy C. Crown**. The Pearl H. Rieger Award pays tribute to an individual or institution that has made significant differences in the lives of children with neurobehavioral issues.



As a devoted mother, donor and Friend of the Center, Nancy Crown's dedication to helping children overcome their neurobehavioral issues is truly admired. With her support and continued confidence in the Center and Pearl Rieger's psychoeducational diagnostic techniques, the Pearl H. Rieger Fellowship came to fruition. The Fellowship is a two year program in the training and proficiency in psychoeducational assessment of children and adolescents. The traineeship affords opportunities in pediatric neuropsychological assessment, psychological assessment, 0-5 assessment, therapy, research, and outreach and professional development. The program is designed to provide training working with children with a myriad of neurobehavioral disorders, but specializing in learning disabilities and social-emotional disorders.

Thanks to Nancy Crown's vision and proactive approach to making the Fellowship a reality; the impact and success of Pearl Rieger's approach to neurobehavioral issues will continue to touch the lives of thousands of children through the skills and guidance of Fellowship graduates. We are thrilled and honored to recognize Nancy Crown for her contribution to empowering children with neurobehavioral disorders.

For more information regarding the RNBC Ninth Annual Dinner, please contact (312) 553-2000.

### We would like to extend a special thank you to: Friends of the Center

Miles Collier  
Parker Collier  
Phil Corboy  
Nancy Crown  
Steve Crown  
Mary Dempsey

Christina Gidwitz  
Ron Gidwitz  
Sam Gotoff  
Fred Krehbiel  
Kay Krehbiel  
David Miniati

Susan Blankenbaker Noyes  
Betsy Rosenfield  
Andy Rosenfield  
Jack Sandner  
Jon Ward  
Margo Ward

Clark A McKown

## Where We've Come and Where We're Going

We at RNBC have long viewed research as an important tool in better understanding and improve the lives of children. Until now, we have largely been consumers of research; we are rapidly becoming researchers. Because many children we see have difficulty with friendship, our research focuses on the origin, nature, course, assessment, and treatment of social problems. I am very pleased to report on our progress in making research a regular part of what we do here at RNBC. In the past year, we have created a Research Department that includes a Research Director, a Research Assistant, and members of the RNBC staff who are interested in research.



### Research in Practice

What does research look like at RNBC? Members of the research team meet weekly to discuss ongoing projects. We share ideas, consult with one another, offer feedback, and support one another as we move forward on our common projects. Each member of the research team is the lead investigator on one or more research projects. Our projects share a common focus on social functioning and on developing knowledge that can be applied to clinical practice.

### Ongoing Projects

Dr. Meryl Lipton is developing a model of the interrelated social emotional learning processes that are critical to social success. This model frames our understanding of our patient population and focuses our empirical efforts. In August, Dr. Lipton presented her work at the MIND Institute at the University of California, Davis. Some of our other current projects include:

Dr. Lipton is collaborating with Dr. Bernadette Evans on developing a social-emotional profile interview that will help clinicians efficiently identify strengths and weaknesses in children's social-emotional reasoning and behavior.

Drs. Karen Rottier and Amy Davis are studying the diagnostic features of Nonverbal Learning Disabilities (NLD). By writing a theoretical review paper and a comparative case study, Drs. Rottier and Davis hope to clarify for us and for the field what NLD is really all about.

Children's social interest is an important determinant of social success. Surprisingly little research has examined social interest. Dr. Michael Balthazor has led our effort to draft a Social Interest Inventory that we will pilot in the fall.

For years, we have assessed children's social information processing. We are currently using historical clinical chart data to examine more closely how performance on individually administered tests of social cognition related to social success.

In general, we are working to integrate research into all major functions of the clinic. For example, we work with our colleagues in Outreach to conduct program evaluations examining the impact of our work in the schools. In addition, we have collected pre- and post-intervention data on several social skills groups. Our goal is to incorporate data collection into our all of clinical work to learn what works best.

### Looking to the Future

We are making progress towards developing a sustainable research infrastructure supporting useful, publishable research that improves the lives of children. Our long-term goal is to expand the scope, variety, and base of support for research. Stay tuned to the Research Corner to learn more.

### Executive Function Program Rush Neurobehavioral Center and Casa Central Summer Workshop 2005

Once again, we were excited to work with the wonderful children at Casa Central's School-Age Program. Casa Central is the largest social service agency in Chicago, serving the Hispanic community in Humbolt Park and the surrounding area. Last year, the focus was on the important executive skill of goal setting. This year we worked with the children on organization, time-management, planning, and how to break down long-term projects and assignments into manageable tasks. An initial training was given to the staff at Casa Central to understand the basic principles of executive functions and to help reinforce the routines taught to the students. In addition to the staff training, a parent in-service was given to explain the project and give helpful suggestions and strategies to help each child succeed at home and in school. The student workshop consisted of four half day sessions and was facilitated by Steve Onorati and Barbara Resnick. The twenty student participants, ages 10 to 13, received a fully loaded notebook/binder system and the tools they needed to get off to the right start for the 2005-2006 academic year. In addition, Office Depot gave a generous donation of backpacks for the School-Age Program.

Steve Onorati



# UPCOMING PRESENTATIONS

**Dr. Marc Sandrolini** presents, "ADHD and Bipolar Disorder in the Classroom" at the Learning Disabilities Annual Conference on **Friday, October 21, 2005** at the Holiday Inn Convention Center in Tinley Park, Illinois. For more information call the LDA at 708-430-7532

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## Parent Connections

Fall 2005 Schedule:

**September 21, October 19, November 16 and December 14  
Wednesday's from 1:00- 2:30 p.m.**

Parents of children with neurobehavioral disorders often face many challenges unique to having children with these special needs. While a supportive friend or sympathetic family member is always appreciated, it can be helpful to talk with others in similar circumstances. That's why Parent Connections was formed.

### Parent Connections is an opportunity to:

- Participate in an informal, parent-led group comprised of other parents
- Share ideas on what has worked for you and your child
- Benefit from the experiences and suggestions of others
- Discuss issues or concerns you may have about your child
- Receive support and network with other parents

Parent Connections is held at RNBC, 9711 Skokie Blvd., Suite D, Skokie. There is no fee to participate in this program.

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## RNBC Social Development Groups

New Social Development Groups are forming. RNBC groups are run by psychologists, social workers and educational consultants. For more information, please contact Nadine Wengroff at 847-933-9339 ext. 235.

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## Chicago Public Library

New Branch Location for Chicago Public Library (CPL) Speaker Series

**All programs will be held on the third  
Thursday of the month at 7:00 P.M.**

RNBC is committed to increasing knowledge and awareness about neurobehavioral disorders through community outreach. A partnership with the Chicago Public Library (CPL) has been a successful way to disseminate accurate information and resources to people who would not otherwise have the opportunity to learn about neurobehavioral issues and how they impact children/students. The Chicago Public Library (CPL) system is effective in reaching more people and offering educational programs to educators, families and professionals in all communities, especially those that are underserved and under-resourced. Our current library series will be held at the Sulzer Regional Library, 4455 N. Lincoln Ave., Chicago. These events are free and open to the public. For information call Adult Services at 312-747-4252 or Cate at 847-933-9339 ext. 222. CPDU credits are available.

### Brain-based Learning & Behavior Problems

Meryl Lipton, MD, PhD **September 15, 2005**

### Understanding ADHD – What Parents Need To Know

Marc Atkins, Ph. D. **October 20, 2005**

### Strategies for Teaching Organization and Time Management Skills

Shartrina Robinson **November 17, 2005**

# The Executive Function Intervention System at Work in Children of Peace School

By Steven Onorati  
& Shartrina Robinson

The Executive Function Intervention Program at Children of Peace School was implemented at all grade levels at the start of the 2004-2005 academic year. The school is located in the Illinois Medical District at 1900 W. Taylor Street, and is part of the Archdiocese of Chicago. Students in grades 3 through 8 use the EF planning system and take an Executive Functioning class two times per week. The classes focus on the important executive skills of organization, time-management, planning, prioritization, and goal-setting.

## *What do students think about the EF system?*

### **Kysean Daniels, 4th grade:**

*“Executive Functioning helps me by organizing my papers so I have everything that I need. My parents like it because there are no papers lying around the house.”*

### **Sahara Cannon, 4th grade:**

*“My planner helps me a lot, because if I forget what I need to do, I just need to check what I wrote in my planner. I also have increased my reading time by 20 minutes every week because I know how to set goals.”*



L-R, Sahara Cannon, Kysean Daniels, David, James Thomas.

### **James Thomas, 4th grade:**

*“My binder has helped me keep up with my homework. In third grade I used to lose my homework and now I don’t. I also have stopped using homework passes because I want to learn more. Setting goals has helped me to learn new things in my life and not be so bored.”*

### **Jaleel Futrell, 7th grade:**

*“Executive Functioning has taught me to WANT to put things in order. I actually set a goal to clean and organize my bedroom and I did it. Then, I set a goal to KEEP my room neat and organized. Now, it is just a habit. I use my planner as a “guide” for my life. When someone asks me if I am available to do something, I can check my planner and schedule it.”*



Jaleel Futrell

# HELPING STUDENTS GET ORGANIZED

## Tips for Parents and Teachers

### BACKPACK

#### GENERAL GUIDELINES:

- No loose papers
- Heavy items at bottom
- Daily scheduled pack-up time
- Discuss, show, model at open house with parents
- Provide time, support, and praise to create a routine

#### TEACHER TIPS:

- Asterisk\* or highlight on homework board if textbook needs to go home that day
- 2nd set of books at home if needed

#### HOME CONNECTION:

- Weekly and/or daily dump
- Provide a set of supplies at home to eliminate carrying of unnecessary items in back-pack
- Backpack ready the night before school
- 2nd set of books at home if needed

### LOCKER

#### GENERAL GUIDELINES:

- No loose papers
- Show, tell, and model how to clean a locker
- Schedule a weekly clean up time
- Provide time, support, and praise to create a routine

#### TEACHER TIPS:

- Label shelves as needed
- Display a model locker
- Teach a top-shelf strategy (books to go home on top shelf)
- Post daily schedule inside locker if needed
- Post daily check off sheet for items to bring home
- Post a picture of the organized locker for reference
- Students who need additional support should have lockers at edge or near classroom

#### HOME CONNECTION:

- Purchase a locker organizer: Canvas style, not plastic
- Refrain from purchasing unnecessary supplies
- Encourage Friday clean-up (gym clothes, etc.)

### DESK

#### GENERAL GUIDELINE:

- No loose papers
- Show, tell, and model how to clean a desk
- Scheduled weekly clean up time
- Provide time, support, and praise to create a routine
- Daily end of the day organization time
- Spines out for easy identification
- No unnecessary supplies in desk


#### TEACHER TIPS:

- Display a model desk
- Clean desk reward "fairy"

#### HOME CONNECTION:

- Refrain from purchasing unnecessary materials and supplies
- Create a distraction free workspace at home
- Provide a set of supplies at the workspace

Clip this page  
and keep as a  
handy reference  
guide!



Courtesy of:  
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**We would like to congratulate Joseph Palombo on his latest accomplishment. Mr. Palombo has been elected to the Board of Trustees of the Accreditation Council for Psychoanalytic Education. This national organization evaluates and accredits psychoanalytic training programs in the United States.**



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