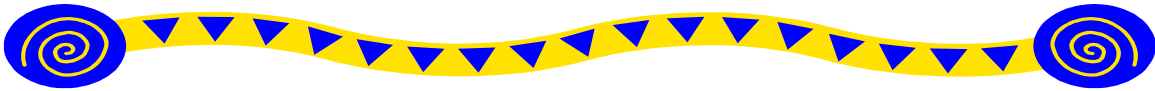


Chapter 7

Including Children With Disabilities & Chronic Health Conditions

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INCLUDING CHILDREN WITH DISABILITIES AND CHRONIC HEALTH CONDITIONS IN THE CHILD CARE SETTING

Benefits of Inclusion

All children have special needs, some more than others. Finding care for a child with special needs can be especially difficult for families. For many of these children, the care they need is no different from that of a typical child. A child with Down Syndrome has a disability, but does not require any special adaptations to support them in child care. They may need extra time to learn to walk, talk or use the toilet, however, major changes to a child care program are probably not going to be needed. A child with cerebral palsy who uses a walker may need the furniture rearranged, such as a table moved away from the bookshelves to allow room for the walker or a chair with sides to help them with their balance.

It is important to remember that the majority of children with special needs do not need special staff or equipment. Often the child's needs are simple changes that are made for any child that needs individualization. Child care providers have always had children with disabilities in their programs, have met their needs, and included them in activities with all the children. Providers can meet all children's needs, whether they have special needs or not.

When a family who has a child with a disability, delay, or health condition calls your center or home, ask that the child visit first. Meeting the child and family to discuss the supports their child needs is very helpful. Remember, the supports are often no different from what you are already doing for other children in your program.

All children have the right to be included and to participate in child care programs. All children benefit from inclusion. Inclusion allows a child with a disability to see and learn from their peers. If a child needs to learn new words, a classroom full of their peers talking and playing is the best place for modeling and learning. Children with special needs should participate in all activities as much as possible. They should not spend long periods of time just watching other children play or do projects. Activities that focus on fun and skill building and active participation, rather than on having a final product, will be most successful. Taking part in activities, experimenting, and being with friends are what matters. For the typical child, an inclusive environment helps them learn about differences and helping others.

Children First Language

Children should not be referred to or labeled by their diagnosis. If you need to discuss their diagnosis, identify the child first, and then their diagnosis. For example, this is Sarah who has Down Syndrome, or this is Ashley who wears a hearing aid. It is important to understand the child's diagnosis so supports can be identified, however, the diagnosis should not be the most important part of the child.

Terms used by programs and agencies to describe children with disabilities, delays and chronic health conditions include:

- children who are developmentally disabled, developmentally delayed, or at risk for developmental delays,
- children with cognitive delays or disabilities,
- children with behavioral or emotional disabilities,
- children with hearing impairment or deafness,
- children with visual impairment or blindness,
- children with speech-language delays or disorders,
- children with traumatic brain injury,
- children with autism, and
- children with physical disabilities.

Say the child's name first, then their disability or the equipment they use.

Care Plans

The care plan for a child with a disability should not be significantly different than the rest of the children in the program. The program intake form will often provide the information needed. Refer to Chapter 10 for sample care plans for certain chronic health conditions.

Special Needs Rate and Certification Process

If a family is receiving DHS subsidy, you may be certified to receive a higher reimbursement rate. The child must be participating in one of the following programs:

- Special education services (public school program for children age three and older),
- SoonerStart (early intervention services for children birth to third birthday),
- Supplemental Security Income (SSI), or
- Meet the medical definition of disability as determined by the Social Security Administration.

The process includes:

- The parent or guardian identifying the child's care needs,
- The child care provider completing a child care plan to address how the child's needs will be met,
- The licensing specialist verifies that the child care provider meets minimum licensing requirements, has current CPR and first aid certification, has received on-site consultation regarding the child's care, and agrees to receive training in special needs within six months, and
- The DHS social service specialist for the family authorizing the reimbursement rate.

For additional information, contact your DHS county licensing office.

Training

The child's parent is the expert on their child and the best source for information.

TIC-TOC (Training Inclusive Child care equals Terrific Opportunities for Children) is a training series for child care providers intended to increase the number of children with disabilities participating in community-based child care settings. To find out about registering for the TIC TOC training call (405) 271-1836, or visit the website at www.ah.ouhsc.edu/tolbert/. Click on "Conferences and Workshops" to find the correct information.

Each regional child care resource and referral agency (R & R) holds training for child care providers on many different topics. You can locate your regional R & R through the Oklahoma Child Care Resource and Referral Association website at www.oklahomachildcare.org.

The Center for Early Childhood Professional Development has a list of training opportunities on their website at www.cccpd.org.

The SoonerStart program serves infants and toddlers to age three who have a delay or disability. With parent's permission, SoonerStart staff can come to the child care facility to work with their child and give ideas on inclusive activities. To locate the Sooner Start office near you call OASIS at (800) 426-2747. SoonerStart also provides training through their STARS program. Find out more through the website at www.ah.ouhsc.edu/tolbert/.

Other Resources

Family Voices is a national grassroots network of families and friends which advocates for health care services and provides information for families with children with special health care needs. www.familyvoices.org

The National Dissemination Center for Children with Disabilities (NICHCY) is a source of information on disabilities, IDEA (law authorizing special education), and research-based information on effective educational practices. NICHCY has fact sheets on specific disabilities. www.nichcy.org

Child Care Plus+ provides training, tips and help for caregivers with specific articles on working with children with disabilities. www.ccplus.org/

The American with Disabilities Act (ADA)

The ADA is a federal civil rights law, which was passed in 1990. Among other things, the ADA prohibits discrimination by child care centers and family child care providers against those individuals with disabilities. The basic requirements are:

- Providers cannot exclude children with disabilities from their programs unless their presence would pose a direct threat to the health or safety of others or require a fundamental alteration of the program.
- Providers have to make reasonable modifications to their policies and practices to integrate children with disabilities into their programs unless doing so would constitute a fundamental alteration.
- Providers must provide appropriate auxiliary aids and services needed for effective communication with children or adults with disabilities, when doing so would not constitute an undue burden.
- Providers must generally make their facilities accessible to a person with disabilities.

Child care providers are to make a case-by-case assessment of what the child requires to be fully integrated into the program. Once they know what is needed, they must assess whether reasonable accommodations can be made to allow this to happen.

The ADA sets out three primary types of accommodations (changes in policies, practices, or procedures, removal of barriers in existing programs, and provision of auxiliary aids and services-special equipment and services to ensure effective communication). Making these accommodations is required unless:

- In the case of changes in policies, practices or procedures, the accommodation would fundamentally alter the nature of the program;
- In the case of auxiliary aids and services, the accommodation would fundamentally alter the nature of the program or pose an undue burden (significant difficulty or expense)
- In the case of the removal of barriers in an existing program, the accommodations are not readily achievable (cannot be done without much difficulty or expense).

What is “reasonable” will vary, depending on the accommodations requested and the resources available to the program. Generally speaking, less will be required of a family child care home, which typically has fewer resources and staff than a center.

For more information:

The Child Care Law Center, 1-415-394-7144;
www.childcarelaw.org

The Department of Justice Hotline, 1-800-514-0301;
www.usdoj.gov/crt/ada/