

Including Children with Disabilities and Chronic Health Conditions in the Child Care Settings

- Benefits of Inclusion
- Children first language
- Care plans
- Special needs rate
- Training
- The American with Disabilities Act (ADA)

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 and 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. 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
- 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 should provide the information needed to care for all children.

Special Needs Rate

A special needs reimbursement rate is available to providers who care for children with disabilities. This special needs rate is higher than the reimbursement rate for other children. A child is eligible for the special needs rate if they:

- Receive special education services
- Receive SoonerStart services
- Receive Supplemental Security Income (SSI)
- Meet the medical definition of disability as determined by the Social Security Administration

Contact your local OKDHS office for more information.

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. Contact the College of Allied Health at OUHSC for more information. The website is

http://www.ah.ouhsc.edu/rehab/centers_excellence.asp

Oklahoma Child Care Resource and Referral Association at www.oklahomachildcare.org

Center for Early Childhood Professional Development at www.cecpd.org

The SoonerStart program serves infants and toddlers to age 3 who have a delay or disability. With parent's permission, SoonerStart staff can come to the center to work with their child and give ideas on inclusive activities. SoonerStart also provides training through their STARS program at www.ah.ouhsc.edu/tolbert/courses_workshops

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 children 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 provisions 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 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/childq&a.htm