

**Child Care Services**

**Inclusion of Children with Special Needs**

**Policy Manual**

**February, 2009**



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**SECTION I: Overview**

For the purposes of this document, special needs refers to delay and/or exceptional ability in any of the developmental domains (social, cognitive, language, physical and/or self-help); children may have many different diagnoses or medical conditions; and/or present with emotional, behavioural, sensory and/or learning difficulties unrelated to a particular diagnosis or condition. Environmental circumstances, either short or long term, that affect a child's development, may require consideration when programming is developed/implemented in a child care centre/family child care home. The type and/or severity of the delay, condition, or circumstance would determine whether the above should be considered a special need or whether there should be programming sensitivity.

In principle, inclusion means that all children should be able to attend the same child care programs they could attend if they did not have special needs. Quality child care programs foster the development of all children, including those with diverse backgrounds and special needs, to help ensure their optimal overall development. Children with special needs and their parents are welcomed, encouraged to enrol and be involved in child care programs. High quality child care programs support parental involvement. The partnership between parents/caregivers and staff/providers in an early childhood centre/home is critical to providing the optimum environment for the child. Parents are encouraged to be involved in the identification of required supports, services and/or developmental/behavioural goals for their child/ren to be addressed in the child care centre/family child care home, in consultation with regional staff (e.g., Inclusion Consultants, Child Care Services Consultants and/or other professionals). Identification of supports, services and/or goals is through the development and annual review of a child's Individual Support Services Plan (ISSP). Refer to Section 4: *Replacement Staffing for Attendance at ISSP Meetings* for further information on parental role and ISSP.

There are six main principles of inclusion<sup>1</sup>. These include:

- *Zero reject.* No child should ever be excluded for reasons of level and/or type of disability;
- *Naturally occurring proportions.* Child care programs should include children with special needs in proportion to their occurrence in the general population;
- *Same range of options.* Children with special needs should never be limited to shorter child care days or excluded from home-based or school-age care. Children with special needs should have the same range of attendance options as all other children (e.g., full day, part day, flexible hours);
- *Full participation.* Necessary supports should be provided so that all children can participate in some way in all activities;
- *Parent participation.* Parents should be able to participate to the maximum extent of their comfort level;

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<sup>1</sup> Dr. Sharon Hope Irwin, Director of SpecialLink. For further information on inclusion in Canada, see SpecialLink at <http://www.specialinkcanada.org>

## Child Care Services Inclusion of Children with Special Needs

- *Advocacy.* Staff and parents should promote ‘inclusive, accessible, affordable, quality child care’ for all children – at a centre, family child care home, in the community and as public policy.

The inclusion of children with special needs into child care centres/homes is important for many reasons, including, but not limited to:

- Inclusion is a basic human right.
- All children need a sense of belonging in their community for healthy child development and positive self-esteem.
- All children benefit from inclusive child care. Inclusion of children with special needs promotes respect, tolerance and celebration of diversity among all children.
- Being with other typically developing children facilitates the development of positive social skills.
- Inclusion contributes to children leading active and independent lives.
- The potential costs, both economic and social, are minimized when children with special needs are included early in child care programs.
- Families and communities benefit from inclusive child care. Families of children with special needs are able to learn about typical child development and may feel more accepted in their community. Families of children with typical development may develop relationships with parents of children with special needs and possibly provide a support to them and their communities.

Most children with special needs require minimal support and/or modifications (to the environment, equipment and/or programming) to be fully included in child care centre/home programming and activities. A small percentage of children with special needs require more intensive levels of support and/or modifications to the environment, play materials, equipment and/or programming to be included in all activities in a child care centre/home. These children may have significant delay in multiple developmental domains. Every effort should be made to facilitate least intrusive ways of including children with special needs in child care. Supports offered should be appropriate to a child’s or parent/caregiver’s needs and/or wants. The level and/or type of support required may vary from time to time and may be dependant upon many factors, including but not limited to:

- child’s diagnosis (e.g., need for routine and structure, minimal transition, sensory stimulation, dietary requirements, etc.);
- capacity of staff (i.e., their attitudes, values, experience, skill and interest) to address special needs toward inclusion;
- child’s developmental status (e.g., progress and/or regression in one or more areas of delay);
- factor(s) related to the child’s health and/or well-being (e.g., illness, lack of sleep, poor diet, etc.); and/or
- environmental factors (e.g., staffing change, new child/ren in the room, move to a different homeroom, family vacation, etc.).

## Child Care Services Inclusion of Children with Special Needs

For some children, inclusion may require considerable planning, coordination of professional resources/services and parental input/support.

As a means to support the inclusion of children with special needs in child care centres/homes, several provincial initiatives have been developed and are being implemented in this province. On February 25th, 2005 and May 24th, 2006, the Department of Health and Community Services announced inclusion supports under early learning and child care initiatives. These support the inclusion of children with special needs in child care centres/homes, and encourage a positive attitude toward inclusive practice.

Inclusion of children with special needs in child care entails much more than children being able to access and be physically present in a child care centre/home: the program and practices must be able to foster the development of all children, including those with special needs, to help ensure their optimal overall development. The objective of these supports is to enhance child care services for children with special needs by enhancing inclusionary programming and practices in child care.

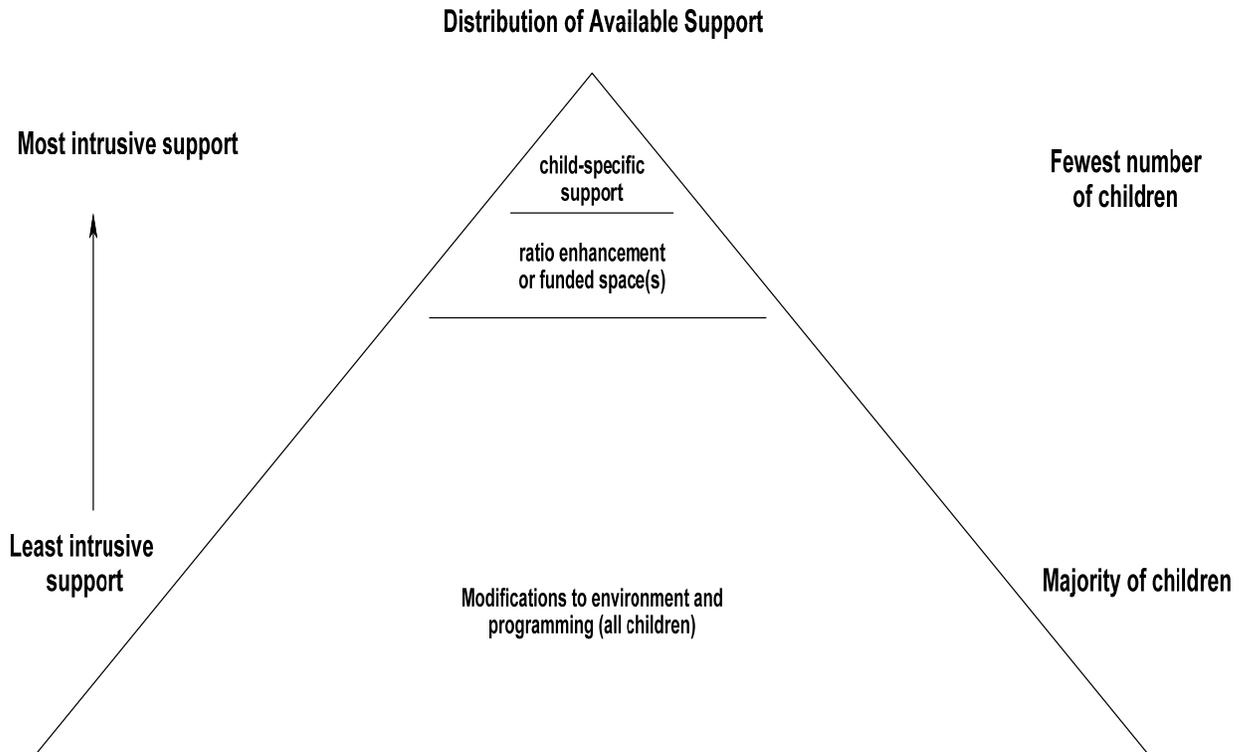
Three supports have been implemented to help establish and maintain inclusive quality child care; regional consulting, training in inclusion and grants to support inclusion of children with special needs:

- *Regional services* are available to support centres/homes in their role of providing care and education to young children. For children with special needs, these supports include primarily the role of the regional Inclusion Consultant. To provide an integrated approach to Child Care Services, Inclusion Consultants work closely with the other members of the Child Care Services team and RHA staff, especially Child Care Services Consultants in program planning.
- *Training in Inclusion and Special Needs* - A significant requirement for inclusive child care is appropriately trained staff/providers. Specific training on understanding special needs and challenging behaviours, implementing inclusive practices, interacting with parents of children with special needs, and working with professionals involved with the child/ren are all important to the maintenance of inclusive child care.
- *Grants to Support Inclusion of Children with Special Needs* - Child care services may require additional supports, including grants to support inclusive child care. These supports take a variety of forms:
  - ❖ *Replacement Staffing for Attendance at ISSP Meetings* – funding for substitutes for individual program planning, consultation with referring professionals, or attendance at ISSP meetings;
  - ❖ *Funded Space(s)* - funding one or more spaces to reduce group size in a homeroom/family child care home;
  - ❖ *Ratio Enhancement* - funding for the provision of additional qualified personnel to increase the number of staff in a homeroom or the number of providers in a family child care home; and
  - ❖ *Child-specific Support* - funding for the provision of an additional person to support the personal care or attendant needs of a specific child.

## Child Care Services Inclusion of Children with Special Needs

At all times, the least intrusive program adaptations, environmental modifications and support options will be recommended and implemented. The following diagrams profile the anticipated distribution of supports available for children.

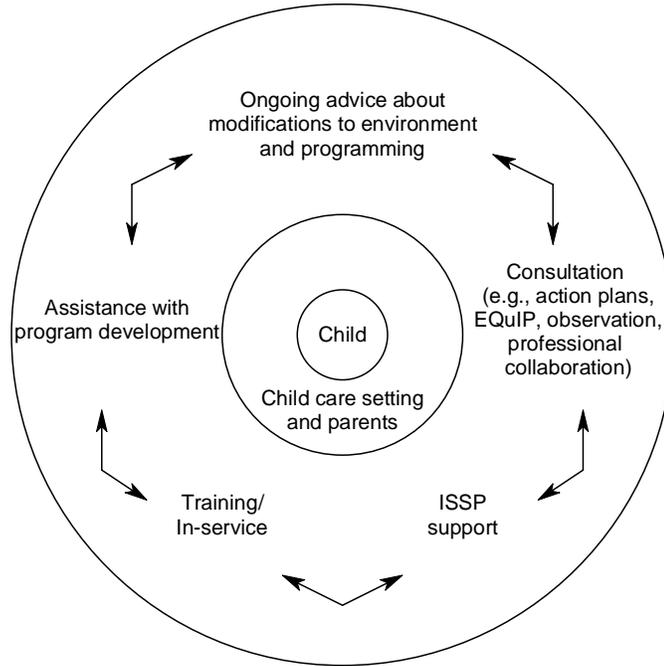
### Inclusive Child Care: Available Support



Note: The above triangle represents an ideal distribution of support for children with special needs

# Child Care Services Inclusion of Children with Special Needs

## Comprehensive Ongoing Supports Available



NOTE: See Section III for further discussion of available supports.

**SECTION II: Consultation with the Inclusion Consultant**

**Policy: Regional Inclusion Consultants are resources available to provide consultation to operators and family child care providers regarding the inclusion of children with special needs into child care centres/family child care homes.**

Commentary:

Regional Inclusion Consultants support operators and family child care providers regarding best inclusive practices and the administration of inclusion initiatives. The initial single entry point of contact is through the operator or provider. The duration and intensity of the consultative process will vary, depending on circumstances and need. Consultation may include:

- information about training, funded space(s), ratio enhancement, or child-specific support;
- basic hands-on demonstration of techniques to support children with special needs and guide children's behaviour;
- identification of play materials and equipment suitable to support inclusion;
- staff/provider training relative to specific special needs or behaviour;
- advice on improving inclusionary programming, practices and policies; and/or
- support for contact with other professionals, including the ISSP process.

Supports are summarized in diagram format on the previous page.

When inquiries about inclusion or requests for consultation are received, the Inclusion Consultant will:

- check past involvement with and recommendations of Child Care Services Consultants and other RHA staff;
- meet with the operator/provider, to determine if further consultation is warranted. If so, a decision is made regarding whether the nature of the consultation is centre/home or child-specific. If child-specific, this requires the operator/provider to have informed parental consent for consultation on file. Inclusion Consultants may present suggestions about how centres can work collaboratively with parents;
- as needed, set up a time(s) for further discussion or observation of the child care centre/home;
- involve ECEs/providers in the process by encouraging continued observation and documentation of children in their care, and, if necessary, the completion of any additional data collection necessary to complete a functional analysis of the environment;
- conduct observations as needed;
- make adjustments to recommendations as needed; and
- when information has been gathered, collaborate with operators/providers and staff to develop an action plan to identify further follow up, funding, services, etc.

## Child Care Services Inclusion of Children with Special Needs

The following also applies:

- Prevention is the least intrusive option, and is always preferred to intervention.
- Ongoing consultation with regional Child Care Services Consultants is essential to address programming issues/modifications.
- The Inclusion Consultant will ensure that all recommendations are in line with the existing approved program for the centre/home.
- An action plan may be required when the following is recommended:
  - ❖ modifications to the environment;
  - ❖ purchase of play materials, equipment, etc.;
  - ❖ “hands-on” demonstration by Regional Child Care Services staff (Child Care Services Consultant and/or Inclusion Consultant) to address identified issues;
  - ❖ individualized observation, assessment and/or programming by other professionals (e.g., Speech Language Pathologists, Psychologists, Child Management Specialists, etc.);
  - ❖ ISSP team meeting (where this process is not initiated, information would be provided by the Inclusion Consultant for this process to be initiated);
  - ❖ training and/or in-servicing for ECE/child care providers to address identified issues (e.g., guiding children’s behaviour, transition planning, session on supporting/generalizing functional communication, such as PECS, etc.); and/or
  - ❖ ratio enhancement, funded space(s) or child-specific staffing support.
- The Inclusion Consultant will monitor and review the recommendations of an action plan, based upon an agreed schedule.

These recommendations may include, but are not limited to:

- completion of in-service and/or training on inclusion of children with special needs or specific identified training requirements by regional Inclusion Consultant;
- completion of an in-depth functional analysis of the child care centre homeroom or family child care home by regional Inclusion Consultant;
- discussion between the ECE/provider and parent(s) regarding a referral to another professional(s), such as a Child Management Specialist, Speech Language Pathologist, Occupational Therapist, etc., for child-specific observations in the child care centre/home, functional analysis of child-specific behaviour(s) and for professional assessment and/or service;
- suggestion that the operator approach the parent(s) to request written permission for the regional Inclusion Consultant to access/review other involved professionals’ reports, observations and recommendations regarding child-specific interventions;
- request for child care staff/licensee/provider to complete observations and/or data collection for an identified period;
- request for involvement of other Regional Child Care Services staff (e.g., Social Workers, Child Care Services Consultants) and/or other professionals for guidance, support and providing in-service and specific training to ECEs/providers;

## Child Care Services Inclusion of Children with Special Needs

- recommendation for individualized intervention strategies; and
- recommendation for staff mentoring and consultation by regional Inclusion and/or Child Care Services Consultant (Inclusion Initiatives and/or EQuIP, respectively).

**Policy: When an RHA staff person is requested to observe or interact with a specific child attending a child care centre/home, it will only be done where the child care operator/provider has on file an informed written parental consent specific to the service.**

### Commentary:

On occasion there may be a need for another professional to visit the child care centre/home for additional support. If individual observation of a child is required, a regional Inclusion Consultant shall consult with an operator or provider, who will contact the parents regarding who should be involved. Identified professionals may include Occupational Therapists, Speech Language Therapists, Child Management Specialists, etc. Inclusion Consultants can provide support to centres/homes by providing resources, facilitating discussions about how to involve other professionals and/or identifying pros and cons about who should be involved in supportive teams. All individual programming must be consistent with the program approved for the centre/home. Inclusion Consultants do not administer developmental, behavioural or sensory assessments. If an individual child assessment is required, the Inclusion Consultant will provide support to the operator/provider as needed regarding how to discuss with parents the completion of a referral to other professionals.

If a professional is required to observe a child, the operator/provider shall ensure that parents are fully informed, and written parental consent is obtained and in the child's file, prior to all child-specific observations (See Appendix D, *Consent to Release Information Form*). Parents shall be involved in the process of identifying supports, and provide ongoing input (e.g., during team meetings, case conferences and ISSP Team Meetings, etc.) regarding their child/ren. Parental input and involvement may be related to programming, developmental/behavioural and/or other concerns and need for further observation, assessment and intervention to support healthy child development and inclusion of their child/ren.

**SECTION III: Replacement Staffing for Attendance at ISSP Meetings**

**Policy: The Provincial Model for the Coordination of Services requires that an Individual Support Services Plan (ISSP) shall be initiated where a child is in need of (or already receiving) ongoing services from one or more partner government departments (Departments of Education, Health and Community Services, Justice and Human Resources Labour and Employment), or their agencies.**

Commentary:

Individual Support Services Planning is used to promote a comprehensive, coordinated approach to meeting the needs of children and youth in this province. The ISSP is a working plan which should address areas including needs/risks, strengths and protective factors, goals, interventions, safety issues, education and accommodations. The overall purpose of the ISSP process is to ensure continuity of service at all developmental levels. It should be noted that the ISSP process within the Model for Coordination of Services is under review, which may impact the use of the term ISSP. The concept of collaborative services will remain unchanged, however.

In accordance with government protocol which supports the Model for Coordination of Services, where a child/youth is receiving one or more services from government funded agencies, an ISSP must be initiated. The composition of the ISSP team will depend on the needs of the child and should include any service providers relevant to the child's developmental and transitional needs. Parents/caregivers are encouraged to be Managers of their child's ISSP team. In circumstances whereby parent(s)/caregiver(s) require support in the initial stages of organizing an ISSP team (e.g., as in the case whereby they have not received ISSP training), a professional currently and actively involved in service provision to their child may act in the capacity of co-chair for a pre-determined period of time or until the parent(s)/caregiver(s) is able to be sole manager for their child's ISSP team (i.e., they receive ISSP training). Once the ISSP is signed, it is the only written multidisciplinary plan that should be used to document planning for the child.

For further information on the Model for Coordination of Services, the Individual Support Services Planning process and the Child/Youth profile, see [www.mcscy.nl.ca](http://www.mcscy.nl.ca) or contact the Social Worker responsible for the child care centre/home.

Parental/caregiver consent is required and shall be maintained on file at the child care centre/home if professional involvement is requested by the operator/provider for any purpose (e.g., to initiate the ISSP process, to access existing ISSP documentation, to observe, document and/or provide child-specific programming/intervention) to support inclusion of an individual child. See Appendix D: *Consent to Release Information Form*.

Where an operator/provider is requesting consultation to support an individual child, a regional Inclusion Consultant, while not an actual member of the ISSP team, shall be available to provide guidance to child care centres/homes to determine whether an ISSP team is already in place for a child or whether the process needs to be initiated. An

## Child Care Services Inclusion of Children with Special Needs

Inclusion Consultant may attend an ISSP if requested, if the operator/ECE/provider has not been a part of an ISSP before. Parental agreement for the Inclusion Consultant to attend must be secured prior to the meeting. It must, however, be made clear verbally, by positioning and by body language that the Inclusion Consultant role is purely observational and not participatory. The Inclusion Consultant should sign the attendance page, and be documented as attending in the comments section, but should not sign the signature page at the end of the ISSP document. After the meeting, the Inclusion Consultant may share observations and provide feedback about the meeting with the operator/ECE/provider.

Where an ISSP is not already initiated for a child, the regional Inclusion Consultant shall provide general information regarding the Model for Coordination of Services necessary for the child care centres/homes and/or parent to commence the process/initiate an ISSP team.

**Policy: All licensed child care centres and regulated family child care homes may apply for support to fund replacement staffing to attend an individual ISSP. Monies issued are dependant on funding availability and approval by a representative of the RHA.**

### Commentary:

ECEs and family child care providers may be invited to attend or participate in ISSP meetings in order to fully support the inclusion of individual children with special needs. Provision of funding for additional staffing support is intended to provide child care centres/family child care homes with funding for replacement staff/providers so that they can attend such meetings if requested by the ISSP team manager. In exceptional circumstances, other activities related to the ISSP goals may be approved.

Licensees/providers can be reimbursed for costs associated with replacement staffing for attendance at ISSP meetings by filling out the *ISSP Attendance Claim Form* and submitting it to the regional Inclusion Consultant (see Appendix B, form B1). Proof of cost for a substitute must be provided, and must not exceed the rate of pay for current employees.

Although most inclusion support requests require the involvement of an Inclusion Consultant, this is not the case with funding for a substitute to take the place of a staff person/provider attending an ISSP team meeting. Centres/homes may be contacted as needed, however, by a regional Inclusion Consultant and other Child Care Services staff.

**SECTION IV: Funded Space**

**Policy: Funded space is available where deemed necessary through consultation between the operator/provider and the regional Inclusion Consultant.**

Commentary:

Funding a child care space which will remain vacant reduces the group size and provides additional time for the ECE/provider to meet the needs of a child/ren with special needs. The need for and provision of a funded space is based on consultation with the operator/provider, the regional Inclusion Consultant and other RHA staff, as necessary. The attendance hours designated for funded space(s) shall be determined collaboratively between the regional Inclusion Consultant and the operator/provider. If child-specific, parents and other members of the ISSP team may also be involved in the development of a request for support. All cost estimates are to be documented by the licensee/provider on the *Inclusion Consultant Recommendation Form* (see Appendix C, form C1), and provided to the regional Inclusion Consultant. Approval for funding must be received prior to a space being purchased. Cost estimates are based on the number of spaces, and the rate of subsidy.

Upon approval, a *Funding and Program Requirements Form – Funded Space* shall be reviewed (see Appendix C, form C2), and the licensee/provider informed in writing of the start and end dates of approval. If the request is child-specific, the family is also informed. The regional Inclusion Consultant will complete an *Initiation/Review/Change of Inclusion Staffing Supports Form* (see appendix C form C5), which must be signed by the licensee/provider or designate, indicating pertinent information about the approval. The RHA is not responsible for staffing support costs prior to the date of approval, nor after the end date. Funded space can only be used if current enrolment allows and the space is included in the calculation of the group size. Reimbursement for funded space is paid in arrears on a monthly basis. Licensees/providers shall complete the *Staff/Provider Enhancement Funding Reimbursement Form* (see Appendix C, form C6), and provide this to the regional Inclusion Consultant.

The amount of support required through funded space is based on the circumstances and needs of the child care centre/home. A smaller group size is needed to implement inclusive practices and meet the children's needs when:

- one or more children with special needs are registered for or in attendance at a child care centre/home, and the existing child-staff ratio is not sufficient to provide ongoing inclusion and support for all children in that centre/home; or
- it is required for a specific child with special needs for a temporary period of time.

The attendance time approved is based on the recommendation of the Inclusion Consultant, and paid at the prevailing subsidy rate. Any status change that may affect the need for funded space(s) must be immediately reported to the Inclusion Consultant.

## Child Care Services Inclusion of Children with Special Needs

Reviews and changes to the staffing support approval will also be documented on *Form C5* (Appendix C).

**SECTION V: Ratio Enhancement**

**Policy: Ratio Enhancement is available where deemed necessary through consultation between the operator/provider and the regional Inclusion Consultant.**

Commentary:

The ratio enhancement initiative provides funding for an additional staff member in a centre if this is required to include all children in the daily program. The additional staff person is responsible for all the children in the room in the same way as the other staff. S/he is not in place to focus on the child/ren with special needs.

In family child care homes, the additional person works with the approved provider to address the needs of all children in the home. For requirements of staff, see regulations 4 and 18, *Child Care Services, Child Care Centres, Regulations, Policies and Standards* (March, 2007).

**Policy: Written parental consent is required to be in the child's file, prior to all child-specific observations.**

Commentary:

If ratio enhancement is requested, there may be a need for other professionals to observe an individual child. Where required, for the purpose of recommending an appropriate level and type of additional staffing support, the operator/licensee or provider shall ensure that written parental consent is obtained and in the child's file, prior to all child-specific observations. If a child requires individual observation, assessment, and/or programming to reduce barriers to inclusion, regional Inclusion Consultants shall consult with operators/licensees and/or ECEs/providers regarding the identification and involvement of other professionals. Parents must be encouraged to be fully involved in this process. However, the extent of the involvement that they choose to have is to be respected.

Where a licensee/provider is requesting consultation to support an individual child, regional Inclusion Consultants, while not an actual member of the ISSP team, shall be available to provide guidance to child care centres/homes to determine whether an ISSP team is already in place for a child or whether the process needs to be initiated. Where an ISSP is not already initiated for a child, the regional Inclusion Consultant shall provide general information regarding the Model for Coordination of Services necessary for the child care centre/home and/or parent to commence the process/initiate an ISSP team. In situations where the request is not child-specific, an ISSP is not required.

## Child Care Services Inclusion of Children with Special Needs

Considerations for ratio enhancement are as follows:

- Cost estimates are to be based on the hourly staff wages and benefits of the other staff within that child care centre. In a family child care home, salary must be equivalent to the rate paid for a substitute.
- Upon approval, a *Funding and Program Requirements Form – Ratio Enhancement/Child-specific Support* shall be agreed to by all parties (see Appendix C, form C3), by signatures on the *Initiation/Review/Change of Inclusion Staffing Supports form* (see Appendix C, form C5)
- Once this agreement is signed, the licensee/provider shall be provided with a copy for centre/home files. Upon receipt of this copy, the licensee/provider may then proceed with recruitment and hiring of an ECE/provider to complement the existing child-staff/provider ratio.
- Once approved and in place, the *Staff/Provider Enhancement Reimbursement Form* (see Appendix C, form C6) must be completed and forwarded to the regional Inclusion Consultant on a regular basis. Only wages consistent with those of a substitute shall be approved for payment. Only those costs with prior approval shall be reimbursed.
- Reimbursement for additional staff/provider costs is on a monthly invoice payment system.
- If the hiring is a direct result of recruitment for the ratio enhancement initiative, the cost of advertising may be covered.
- Any status change that may affect the need for ratio enhancement must be immediately reported to the Inclusion Consultant.
- Reviews and changes to the staffing support approval will also be documented on *Form C5* (Appendix C).

The amount of and type of support provided through ratio enhancement is based on the circumstances and needs of an individual child care centre/home. Ratio enhancement may be available to support inclusive practices where:

- one or more children with special needs are registered for or in attendance at a child care centre/home, and the existing child-staff/provider ratio is not sufficient to provide ongoing inclusion and support for all children in that centre/home; or
- it is required for a specific child with special needs for a temporary period of time.

Ratio enhancement involves the provision of one additional staff person, for child care centres, or one additional child care provider, in the case of family child care homes. Options include either a part-time or full-time position, in one or more homerooms/family child care homes, for an identified period.

**SECTION VI: Child-specific Support (One on one or Personal Care Attendant)**

**Policy: Child-specific support is available where deemed necessary through consultation between the operator/provider and the regional Inclusion Consultant.**

Commentary:

A child-specific support is a person employed by the parent or centre/home to provide personal care/attendant supports to a child who needs the dedicated attention of one adult, due to circumstances such as a specific medical condition and/or multiple special needs (e.g., tube feeding requirements, administration of a medical procedure or required continuous supervision for safety reasons). If currently in place, centres/homes will work with the regional Inclusion Consultant to review the arrangement and determine the desirability of a transition to a ratio enhancement model. The child-specific support is not part of the child-staff ratio in a centre and is not a provider in a child care home. S/he is expected to interact appropriately with the other children, but is to have no responsibility for them.

In all situations, in addition to specific job requirements identified by the operator/provider or parent, child-specific support staff are expected to:

- work under the direction of the operator/provider to promote inclusion of the child in the regular program of activities;
- become familiar with and adhere to the approved program for the centre/home;
- allow the child for whom the arrangement has been made to develop natural relationships with other children and adults in the centre, by providing close physical monitoring only when required;
- work under the guidance of other staff/providers to ensure that children of all abilities are included in the approved program; and
- work under the supervision of the operator/provider to assist with fostering independence of all children, especially the one for whom the arrangement was set up.

Least intrusive programming, environmental modifications and support options will be recommended and implemented at all times, by all staff/providers, especially child-specific support staff.

Where child-specific support is being requested, child care licensees/providers shall complete a *Request for Consultation Form* (see Appendix A, form A1) and submit it to the regional Inclusion Consultant. Historically, child-specific supports may be or have been employees of individual parents, and staff/providers hired to work only with an identified child in a child care centre/family child care home. The role of a child-specific support person in that setting is limited, and if parents are employers, there are implications for the licensee/provider. In such cases, it is strongly recommended that a written agreement among the licensee/provider, parent(s) and child-specific support person be developed, designating the responsibilities, rights and authorities of each. It is

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also recommended that child-specific supports be employees of child care centres/homes wherever possible, and considered only in those circumstances where attendant care is the support requirement.

If the centre/home is the employer, *Funding and Program Requirements* must be reviewed, to ensure the most inclusive environment possible (see Appendix C – form C3). In arrangements where the parent/legal guardian of the child is the employer, *Suggestions for Operators to Share with Child-specific Supports* (see Appendix C – form C4) should be reviewed. The form may be used to clarify parental or operator/provider role, and the involvement of the child-specific support in the child care environment.

An Inclusion Consultant may recommend further observation and/or documentation to support a request for child-specific support to address an individual child's personal care needs. Other RHA Child Care Services staff and/or other professionals may be involved in the documentation/provision of recommendations and/or funding approval for child-specific supports, with the informed consent of the parent(s).

Guidelines to determine level of staffing support (funded space, ratio enhancement or child-specific support) in early childhood centres/family child care homes include consideration of the following criteria:

- certification levels of operator and staff;
- child care services experience of operator and staff;
- inclusion experience of operator and staff;
- quality of developmentally appropriate and inclusive programming that the centre provides;
- level of need of the child(ren); and/or
- any existing human resources supports in place.

To determine the supports that a child requires to attend a child care centre or family child care home, least restrictive and least intrusive measures should always be considered. In all cases, the ability of the centre to meet these needs should be evaluated. Supports should not be offered on the basis of a diagnosis alone. Children should be provided with necessary supports, and should not be offered unnecessary supports. Existing ratio enhancement or child-specific supports in place should be reviewed to determine if they can meet any additional need. Only children that require significant assistance to participate in daily routines, or children that engage in behaviours that may result in injury to self or others, will be considered for child-specific support. For a sample form, refer to Appendix F, form F1.

The approved child-specific support hours are specific to a child care centre/home and are based on the type and level of support approved by regional Child Care Services. Any status change that may affect the need for child-specific supports must be immediately reported to the Inclusion Consultant.

## Child Care Services Inclusion of Children with Special Needs

All child care operators/providers shall document a cost estimate for child-specific support on the *Inclusion Consultant Recommendation Form* (see Appendix C – form C1), and provide it to the Inclusion Consultant for review prior to approval of funding and recruitment of staff. Proof of current pay scales is to be submitted with this form. Once approval has been provided, the regional Inclusion Consultant will complete an *Initiation/Review/Change of Inclusion Staffing Supports Form* (see appendix C form C5), which must be signed by the licensee/provider or designate, indicating pertinent information about the approval. All child care licensees/providers shall document a detailed listing of child-specific support expenses on the *Staff/Provider Enhancement Reimbursement Form* (see Appendix C – form C6), and submit it to the regional Inclusion Consultant.

If a child in receipt of child-specific support is absent from a licensed child care facility or family child care home, the individual providing support may continue in their role of centre/home employee, for a period of two weeks, with prior approval of the Regional Director of Child Care Services.

Their role during periods of absence may involve:

- program planning to facilitate inclusive practice of the identified child upon his or her return;
- a ratio enhancement role, with the intention of facilitating inclusive practice with all children in the centre;
- researching current information about inclusion and/or specific disabilities;
- attending relevant training and/or consultation with involved professionals regarding the implementation of recommendations;
- preparing appropriate materials/equipment;
- preparing observational tools; and/or
- collation of past documentation.

Specific responsibilities are at the discretion of the operator/provider, but are subject to review by Child Care Services staff.

Child-specific support staff who do not attend the centre during an identified child's absence will not be compensated.

The regional Director of Child Care Services may extend the period in extenuating circumstances (e.g., if the centre is full, and if the identified child will lose their space and/or child-specific support). Normally this will be for no more than one month. For absences longer than the approved periods, funding for the child-specific support will be discontinued.

**SECTION VII: Caseload Documentation**

Commentary:

Inclusion Consultants are available as a resource to provide support and recommendations to operators and ECEs/providers in the inclusion of children with special needs. It is recommended that a regional Inclusion Consultant's caseload is considered to be each individual child care centre/home.

General documentation. Documentation pertaining to the Inclusion Consultant and special needs initiatives includes, but is not limited to:

- *Request for Consultation Form* (see appendix A, form A1);
- all documentation/records of observational visits (e.g., *Inclusion Consultant Observation Recording Form*, see appendix E, form E1);
- all recommendations provided to a child care centre/home (e.g., *Inclusion Consultant Recommendations Form*, see appendix E, form E2);
- non-child-specific documentation including data collection forms, functional analysis of homeroom/family child care home environment;
- all documentation pertaining to funding/support requests, approvals and reimbursement (e.g., ratio enhancement, replacement staffing for ISSP meetings);
- completed *Initiation/Review/Change of Inclusion Staffing Supports* forms (see Appendix C – form C5);
- visit summary reports;
- statistics forms; and/or
- record of contact and consultation with others, such as regional Child Care Services Consultant and/or other professionals (e.g., phone calls, visits, consultations, attendance at meetings, etc.).

Child-specific documentation. Prior to access to child-specific information (either verbally and/or in writing) about any child in a child care centre/home, a regional Inclusion Consultant shall have written parental/caregiver consent. In addition, in all circumstances where referrals to other professionals and/or access to other professionals' reports are required, parental consent shall also be obtained. Refer to *Consent to Release Information Form* (see Appendix D - form D1).

Documentation of recommendations. A regional Inclusion Consultant in consultation with a regional Child Care Services Consultant may suggest a variety of short and/or long term recommendations to identify and address issues following observation(s) of a child care centre homeroom/family child care centre. It is recommended that all suggestions be documented in writing and maintained in the file for each individual child care centre/home, specific child, or other file records system determined by the RHA. Appendix E (Caseload Documentation) includes a template of an *Inclusion Consultant Recommendations Form* (form E2), as well as templates of other forms recommended for use by the regional Inclusion Consultant.

**SECTION VIII: Appendices**

# **Appendix A: Request for Consultation**

Form A1 - Request for Consultation Form

Form A1

**Request for Consultation Form  
Inclusion Consultant  
[address]**

Centre/family child care home: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_ (phone) \_\_\_\_\_ (fax)

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Observations of homeroom:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action(s) to address concern(s) to date:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# **Appendix B: Replacement Staffing for Attendance at ISSP Meetings**

Form B1 - ISSP Attendance Claim Form and Guide to Completion

Child Care Services Inclusion of Children with Special Needs

Form B1

<b>CHILD CARE SERVICES CLAIM FORM – Attendance at ISSP Meeting</b>		
<b>A. To be Completed by Child Care Provider attending ISSP Team Meeting (see instructions on reverse)</b>		
Name: _____ Certification Level: _____		
CC Centre/FCC Home: _____ Tel #: _____		
Street Address: _____		
<b>B. To be Completed by ISSP Manager (see instructions on reverse)</b>		
Date of Meeting: _____ Start Time: _____ End Time: _____		
Location: _____		
Signature of ISSP Manager (or Designate) _____		
<b>C. To be Completed by Licensee/Provider (as employer) (see instructions on reverse)</b>		
Name of Substitute Staff: _____		
Wage Calculation for Substitute Staff:	$\frac{\text{_____}}{\text{(# hours)}} \times \frac{\text{_____}}{\text{(hourly rate)}} = \frac{\text{_____}}{\text{(Cost of Substitute Wages)}}$	
Travel Calculation	$\frac{\text{_____}}{\text{(# kms)}} \times \frac{\text{_____}}{\text{(rate per km.)}} = \frac{\text{_____}}{\text{(Cost of Travel)}}$	
<b>Total Claim:</b>	$\frac{\text{_____}}{\text{Wages}} + \frac{\text{_____}}{\text{Travel}} = \frac{\text{_____}}{\text{Total Amount}}$	
<b>I, the undersigned, do hereby certify that all the information provided in this claim is accurate and true to the best of my knowledge.</b>		
Signature of Licensee/Provider (or Designate) _____	Signature of Substitute Staff/Provider _____	
Date _____	Date _____	
<b>D. For Office Use</b>		
Comments: _____		
Approved By: _____ Date Approved: _____		

Revised February 24<sup>th</sup>, 2009

Child Care Services Inclusion of Children with Special Needs  
**Instructions for Completing Claim Form**

**Section A**

- This section must be completed by the ECE/child care provider who attended the ISSP meeting on behalf of a child attending the child care centre/family child care home.

**Section B**

- This section must be completed by the Manager (*or designate*) of the child's ISSP Team and signed by both the manager (*or designate*) and parent. In the event that the parent is the manager, the signature of another team member is required.
- For location, provide street address and indicate whether the location is a home (child's), the child care centre/home or office (team member).

**Section C**

- This section must be completed by the licensee/provider (or designate) who employs a substitute in order to allow for a staff person/family child care provider to attend the ISSP meeting.
- Claim can be made for reimbursement of substitute wages when there has been an **actual cost** (e.g., a substitute was required in order to allow for attendance of regular staff at an ISSP meeting and where, in the absence of that staff person, a substitute was required in order to maintain required staff-child ratio).
- Rate of pay for substitute staff must be in line with the rate normally paid for substitute staff at the centre/home.
- Calculate the wage cost by multiplying # of hours (units of 15 minutes) by the hourly rate of pay.
- Claim can be made for **actual** mileage expense or taxi expense incurred to attend the ISSP meeting.
- Distance is the number of kilometres between the child care centre and the location of the ISSP meeting. Mileage rate per kilometre is the provincial government rate.
- Calculate the travel cost by multiplying the number of kilometres by the rate per kilometre.
- Signatures are required in this Section from both the licensee/provider (as employer) and the substitute staff person (as employee).

**Notes**

1. Claim Forms must be completed and signed by all required personnel, as indicated. Incomplete forms will be returned and will result in a delay in your claim being processed.
2. Claim Forms must be submitted to Regional Integrated Health Authority at the month's end.
3. As part of accountability practices, audits of payroll records may be conducted by regional Child Care Services Staff. Licensees/providers are advised to retain relevant records.

If you have questions or need assistance completing the Claim Form, contact Child Care Services – Regional Integrated Health Authority.

Mail or Fax completed Claim Form to: Regional Health Authority

## **Appendix C: Support for Staffing**

Form C1 – Inclusion Consultant Recommendation Form and Guide to Completion

Form C2 - Funding and Program Requirements Form – Funded Space

Form C3 - Funding and Program Requirements Form – Ratio Enhancement/Child-specific support (Centre/home as employer)

Form C4 – Suggestions for Operators to Share with Child-specific Support (Parent as Employer)

Form C5 – Initiation/Review/Change of Inclusion staffing Supports

Form C6 - Staff/Provider Enhancement Reimbursement Form and Guide to Completion

Child Care Services Inclusion of Children with Special Needs

Form C1

Regional Health Authority  
[address]

Form C1	<b>Child Care Services</b>
<b>Inclusion Consultant Recommendation Form for Additional Staff/Provider</b>	
To be completed by Inclusion Consultant and operator/licensee/provider requesting staffing supports (see instructions on reverse).	
Operator/Provider Name: _____ Tel #: _____	
CC centre/family child care home: _____	
Street address: _____	
Staff/provider enhancement support option:	Schedule: M T W T F S S
Option 1 _____ Funded space(s)	Start time: _____ End time: _____
Option 2 _____ Ratio enhancement	Other: _____
Option 3 _____ Child-specific support	_____
Location(s): _____	
<b>Option 1:</b> Funded space(s): _____ Number of spaces requested: _____	
Calculation: _____ X _____ X _____ = _____ (amount as per subsidy schedule) (# of days per week) (# of spaces) (projected cost of funded space per week)	
<b>Option 2 or 3:</b> Ratio enhancement or child-specific support	
Wage calculation of staff/provider per week: _____ X _____ = _____ (# of hours per week) (hourly rate) (cost of wages)	
Staff benefits per week: \$ _____	
Total amount per week: _____ + _____ = _____ (cost of wages) (staff benefits) (total amount per week)	
Recommended approval period: _____ (inclusive dates)	
Estimated cost for recommended approval period: _____ X _____ = _____ (cost per week) (estimated # of weeks) (estimated cost for approval period)	
<b>I, the undersigned, do hereby certify that all of the information provided in this claim is accurate and true to the best of my knowledge.</b>	
_____ Signature of licensee/provider (or designate)	_____ Date
_____ Signature of Inclusion Consultant	_____ Date

For office use only

Comments: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date approved: \_\_\_\_\_

Revised February 24<sup>th</sup>, 2009

**Child Care Services**  
**Inclusion Consultant Recommendation Form for Additional Staff/Provider Guide to Completion**

- This form is to be completed by the regional Inclusion Consultant and the child care operator/licensee or provider who is requesting staffing supports (i.e., funded space, ratio enhancement or child-specific supports).
- Name indicates the name of the operator/licensee or provider of the centre/home who has requested support.
- Tel # is the contact telephone number where the operator/licensee or provider can be reached.
- CC Centre/family child care home refers to the name of the centre (or name of the home, if there is one) for which support is being requested/recommended.
- Street address indicates the address at which supportive staff will be provided.
- Staff/provider enhancement support option - mark with appropriate option (x).
- Schedule specifies which days the support option is requested for. Each day required (Monday to Sunday) should be circled.
- Start time and end time is the daily schedule that staffing support is required for.
- Other indicates options besides regular part-time or full-time attendance (e.g., alternating weeks). Schedule must be detailed in order to estimate cost of funding.
- Location(s) indicates where the staffing support will occur, either in one or more homerooms of a centre, or in a family child care home.
- Number of spaces requested refers to the number of funded spaces requested.
- Calculation is based on the child care subsidy fee schedule (see the Child Care Services Subsidy Manual, Appendix III) multiplied by the number of days per week requested, multiplied by the number of spaces requested, resulting in the projected cost of the funded space(s) per week.
- Wage calculation for staff/provider per week specifies the number of hours that staff/provider enhancement is required, multiplied by the hourly rate of pay, resulting in an estimated cost of ratio enhancement wages per week. Wages must be in line with those normally paid to a substitute in a centre or family child care home.
- Staff benefits per week denotes a summary of employer expenses, including CPP, EI, federal/provincial taxes, WC, vacation pay, stat holidays, sick leave and/or medical benefits, only if provided to other staff/providers.
- Total amount per week is a summary of the total amount required for the provision of staffing support per week. This is calculated by multiplying the total number of hours per week (as in the wage calculation line), by the hourly rate plus the total of staff benefits.
- Recommended approval period indicates the anticipated beginning and end dates that support will be provided.
- Estimated cost of recommended approval period is calculated by multiplying the cost of support per week by the estimated number of weeks that support will be provided.
- Signature of licensee/provider (or designate), signature of Inclusion Consultant and dates are essential for completion and approval of the request/recommendation.

## Child Care Services Inclusion of Children with Special Needs

### NOTES:

1. Advertising for and hiring of staff is the responsibility of the operator/licensee or provider. Hiring should not commence until funding approval has been provided. Any costs related to employing an additional staff person/provider prior to written approval from the RHA is the responsibility of the licensee/provider.
2. Reimbursement for all actual wages will occur upon submission of a completed *Staff Enhancement Funding Reimbursement Form* (see Appendix C – form C6).
3. As part of accountability practices, all funding and program requirements must occur for continued approval and administration of any additional staff/provider support funding. In addition, audits of payroll records may be conducted by regional Child Care Services staff. Licensees/providers are advised to retain relevant records.

If you have any questions or need assistance completing the claim form, contact Child Care Services.

Mail or fax completed claim form to: Inclusion Consultant, Regional Health Authority

### **Funding and Program Requirements for Funded Space**

In accepting funding from the [Regional Health Authority], the employer [Child Care Centre Operator/Family Child Care Provider] has responsibility for the following activities:

#### Program Involvement

- participating in training opportunities provided by the Inclusion Consultant and/or child care centre/home as it relates to programming in that setting;
- participating as a team member in all meetings pertaining to inclusion support and review of recommendations identified by the Inclusion Consultant and/or Child Care Consultant, as required for programming or to support inclusion of the child in that setting;
- working with the identified child to facilitate their interest and involvement in the child care centre/home programming;
- practicing consistent delivery of recommendations by the Inclusion Consultant and/or Child Care Consultant;
- enabling appropriate staff/provider participation in ISSP team meetings;
- ensuring that materials used for programming and recommended by the Inclusion Consultant and/or Child Care Consultant are available and in use by the homeroom;
- acknowledging that all changes to delivery of recommendations are to be discussed/made at meetings and with full consent of parents, regional consultants, operator/licensee and ECEs/providers;
- maintaining a record of child-specific recommendations, implementation and review, and supporting documentation for the period of funding approval;
- ensuring that written parental consent is obtained for the Inclusion Consultant to observe and document findings pertaining to any child and/or to provide Child Care Centre/family child care home documentation to the Inclusion Consultant;
- addressing behavioural issues in a manner that is consistent with “Guiding Children’s Behaviour” as outlined in the *Child Care Services Standards for Early Childhood Programs in Centre-Based Child Care Manual*, Fall, 2004;
- embedding any child-specific therapy and/or intervention within curriculum, so that a child is not “set apart” from other children;
- maintaining one or more vacant spaces, as agreed, and informing the regional Inclusion Consultant immediately of any changes in staffing needs; and/or
- providing an invoice to Regional Inclusion Consultant on a monthly basis for reimbursement of funded space expenses.

Revised February 24<sup>th</sup>, 2009

Form C3

### **Funding and Program Requirements for Ratio Enhancement/Child-specific Support**

**It is imperative that any additional staff person hired through ratio enhancement or child-specific support is in addition to the required ratio at the times identified on the request.**

The following paragraphs identify the responsibilities of [Regional Health Authority] and [Child Care Centre/Family Child Care Provider] in relation to the provision of funding for the purchase of ratio enhancement or child-specific staffing supports. In accepting funding from the [Regional Health Authority], the centre/family child care home has responsibility for:

- hiring staff/child care provider;
- ensuring staff has access to required information and/or training, including training specific to the additional needs of any child for whom service was initiated;
- evaluating performance of staff;
- enabling appropriate staff participation in meetings pertaining to inclusion support and review of recommendations, including ISSP team meetings;
- encouraging the staff person hired to work with the identified child/ren to facilitate the interest and involvement of the child/ren in the child care centre/home programming;
- ensuring that materials used for programming and recommended by the Inclusion Consultant and/or Child Care Consultant are available and in use by the homeroom staff/child care providers within a reasonable time period (e.g., if materials need to be ordered/purchased);
- ensuring consistent delivery of recommendations by the Inclusion Consultant;
- acknowledging that all changes to delivery of recommendations are to be discussed/made at meetings and with full consent of parents, regional consultants, operator/licensee and ECEs/providers;
- maintaining a record of ratio enhancement or child-specific recommendations, implementation and review, and supporting documentation for the period of funding approval;
- hiring ECE staff/provider at a rate that is equivalent to pay of other centre staff, or in the case of a family child care home, hiring staff at a rate of pay that is equivalent for substitutes;
- ensuring that child-specific support and ratio enhancement staff have a child protection records check and certificate of conduct, including the vulnerable sector check, on file at the centre or regulated home. In addition, ratio enhancement staff must hold a first aid certificate. Where it is recommended by the child's physician or the ISSP team, child-specific support staff must hold a first aid certificate. For requirements of the above, see *Child Care Services Child Care Centres Regulations, Policies and Standards, 2007, Appendix A*.
- ensuring that staff hired for ratio enhancement meet the educational and certification requirements identified in Child Care Regulations (i.e., minimally entry level certification);

### Child Care Services Inclusion of Children with Special Needs

- strongly recommending that staff hired for child-specific support meet the educational and certification requirements identified in Child Care Regulations (i.e., minimally entry level certification);
- informing the regional Inclusion Consultant immediately of any changes in staffing or staffing needs, including changes in the child's hours of attendance;
- providing an invoice to Regional Inclusion Consultant on a monthly basis for reimbursement of staffing expenses; and
- keeping copies of all required documentation for review by Regional Child Care Services staff.

Revised February 28<sup>th</sup>, 2009

**Suggestions for Operators to Share with Child-Specific Support (Parent as Employer)**

**It is imperative that any additional staff person hired through child-specific support is in addition to the required ratio at the time identified on the request.**

The following paragraphs identify the responsibilities shared by the operator/provider and parent/guardian in relation to child-specific staffing supports. Some responsibilities may fall to one or the other of these two parties, but collaboration between the centre/family child care home and the child's family is essential for the child's well-being. Responsibilities include:

- arranging a meeting among all parties prior to the child attending a new child care arrangement, as well as periodic checks throughout the year;
- hiring a child-specific support person;
- ensuring that the support person understands the philosophy of Early Childhood Education for the centre or home;
- ensuring that child-specific support staff have a child protection records check and a certificate of conduct, including the vulnerable sector check, on file at the centre or regulated home. Where it is recommended by the child's physician or the ISSP team, child-specific support staff must hold a first aid certificate. For requirements of the above, see *Child Care Services Child Care Centres Regulations, Policies and Standards, 2007, Appendix A*;
- strongly recommending that staff hired for child-specific support meet the educational and certification requirements identified in Child Care Regulations (i.e., minimally entry level certification);
- ensuring the support person has access to required information and/or training, including training specific to the additional needs of the child for whom service was initiated;
- evaluating performance of the support person;
- enabling appropriate participation in meetings pertaining to inclusion support and review of recommendations, including ISSP team meetings;
- encouraging the support person hired to work with the identified child to facilitate the interest and involvement of the child in the child care centre/home programming;
- ensuring that materials used for programming and recommended by the Inclusion Consultant and/or Child Care Consultant are available and in use by the homeroom support person/child care providers within a reasonable time period (e.g., if materials need to be ordered/purchased);
- ensuring consistent delivery of recommendations by the Inclusion Consultant;
- acknowledging that all changes to delivery of recommendations are to be discussed/made at meetings and with full consent of parents, regional consultants, operator/licensee and support persons/providers;
- maintaining a record of child-specific recommendations, implementation and review, and supporting documentation for the period of funding approval;
- informing the regional Inclusion Consultant immediately of any changes in support persons or support person needs;
- keeping copies of all required documentation for review by Regional Child Care Services staff;
- ensuring that written parental consent is provided for the Inclusion Consultant to observe and document findings pertaining to the identified child and/or to provide child care centre/home documentation to the Inclusion Consultant;

## Child Care Services Inclusion of Children with Special Needs

- ensuring that the support person hired to work in the child care centre/home address behavioural issues in a manner that is consistent with “Guiding Children’s Behaviour” as outlined in the *Child Care Services Standards for Early Childhood Programs in Centre-Based Child Care Manual*, Fall, 2004; and/or
- ensuring that the support person does not engage in any child-specific therapy and/or intervention whereby the child is “set apart” from other children, and engaging in activities that are not part of the approved child care centre/home program.

Revised February 24<sup>th</sup>, 2009

### Initiation/Review/Change of Inclusion Staffing Supports

Child Care Centre/Family Child Care Home: \_\_\_\_\_

Support Option:

- Funded Space                       Ratio Enhancement                       Child-specific Support

***Please note that the following action has been taken:***

- Support is initiated effective: \_\_\_\_\_
- Support is completed effective: \_\_\_\_\_
- Support is extended effective: \_\_\_\_\_ to \_\_\_\_\_  

Start Date

End Date

  
for \_\_\_\_\_ hours weekly at a rate of \_\_\_\_\_ per hour.

Location: \_\_\_\_\_

\*All conditions outlined in the *Program Requirements Form* are applicable to this period.

Estimated cost for period:

	X		=	
<b>Cost per week</b>		<b># of weeks</b>		<b>Estimated cost for period</b>

- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Signature of Inclusion Consultant</b>	<b>Date</b>

I have read and understood the above information.

<b>Signature of Licensee/Provider (or designate)</b>	<b>Date</b>

For office use only:  
Comments: \_\_\_\_\_  
  
Approved by: \_\_\_\_\_

**Child Care Services  
Staff/Provider Enhancement Funding Reimbursement Form**

To be completed by operator/licensee/provider requesting staffing supports (see instructions on reverse).

Name: \_\_\_\_\_ Tel #: \_\_\_\_\_

CC centre/family child care home: \_\_\_\_\_

Street address: \_\_\_\_\_

Staff/provider enhancement support option:

Option 1 \_\_\_\_\_ Funded space(s)      Covering period: \_\_\_\_\_  
 Option 2 \_\_\_\_\_ Ratio enhancement      (inclusive dates)  
 Option 3 \_\_\_\_\_ Child-specific support

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**Option 1:** Funded space(s)      Number of spaces to be reimbursed: \_\_\_\_\_

Calculation: \$ \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_ = \$ \_\_\_\_\_  
 (daily amount as per subsidy schedule) (# of days per week) (# of spaces) (actual cost of funded space per week)

**Option 2 or 3:** Ratio enhancement or child-specific support

Staff/provider wages per week: \$ \_\_\_\_\_ Per covering period: \$ \_\_\_\_\_

Staff benefits per week: \$ \_\_\_\_\_ Per covering period: \$ \_\_\_\_\_

Total claim: \$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 (actual cost of wages per covering period) (staff benefits per covering period) (total cost of staffing support per covering period)

**I, the undersigned, do hereby certify that all of the information provided in this claim is accurate and true to the best of my knowledge.**

\_\_\_\_\_  
 Signature of licensee/provider (or designate)      Signature of Ratio Enhancement or Child-specific Staff/Provider

\_\_\_\_\_  
 Date      Date

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For office use only

Comments: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date approved: \_\_\_\_\_

## Child Care Services Inclusion of Children with Special Needs

### Child Care Services Staff/Provider Enhancement Funding Reimbursement Form Guide to Completion

- This form is to be completed by the child care operator/licensee or provider who is requesting reimbursement for staffing supports (i.e., funded space, ratio enhancement or child-specific supports).
- Name indicates the name of the operator/licensee or provider of the centre/home who has requested support.
- Tel # is the contact telephone number where the operator/licensee or provider can be reached.
- CC Centre/family child care home refers to the name of the centre (or name of the home, if there is one) for which support is being requested/recommended.
- Street address indicates the address at which supportive staff will be provided.
- Staff/provider enhancement support option - mark with appropriate option (X).
- Covering period – indicate the inclusive dates that reimbursement is being requested for.
- Number of spaces to be reimbursed - indicate the number of spaces approved for reimbursement.
- Calculation - is based on the daily amount provided by the child care subsidy fee schedule (see the Child Care Services Subsidy Manual, Appendix III), multiplied by the number of days per month and by the number of spaces, resulting in the actual cost of a funded space per week.
- Staff/provider wages per pay week - indicate the weekly wages for staff/provider enhancement (as indicated on the Inclusion Consultant Recommendation Form for Additional Staff/Provider). Wages must be in line with those normally paid to a substitute in a centre or family child care home.
- Per covering period indicates the amount of wages being requested for reimbursement. This is calculated by multiplying the wages per week by the number of weeks to be reimbursed.
- Staff benefits per week - summarize weekly employer expenses (as indicated on the Inclusion Consultant Recommendation Form for Additional Staff/Provider). If number of hours or staff benefits are not identical for each period (e.g., due to sick leave, dismissal, child withdrawal, etc.), attach a separate sheet indicating the reasons and appropriate amounts. Actual costs should be indicated in the total claim section.
- Total claim - total the amount required for the provision of staffing support. Total cost of staffing support per covering period is the actual cost of wages per covering period plus staff benefits per covering period.
- Signature of licensee/provider (or designate) and date is essential for completion and approval of the request. For ratio enhancement or child-specific supports, signature of staff/provider fulfilling that role is also required.

#### NOTES:

1. Reimbursement for all actual wages will occur upon submission of a completed *Staff Enhancement Funding Reimbursement Form*. Verification of actual pay (i.e., copies of pay stubs for pay periods during the requested reimbursement period) must be attached to claim form.
2. As part of accountability practices, all funding and program requirements must occur for continued approval and administration of any additional staff/provider support funding. In addition, audits of payroll records may be conducted by regional Child Care Services staff. Licensees/providers are advised to retain relevant records.

If you have any questions or need assistance completing the claim form, contact Child Care Services – Regional Health Authority. Mail or fax completed claim form to the Inclusion Consultant.

# Appendix D: Consent to Release Information

Form D1 - Consent to Release Information Form



## Appendix E: Caseload Documentation

Form E1 - Inclusion Consultant Observation Recording Form

Form E2 - Inclusion Consultant Recommendation Form

Form E3 - Frequency Recording Chart

Form E4 - ABC Chart

Form E5 - Visit Summary Report

**Inclusion Consultant Observation Recording Form**

Date completed: \_\_\_\_\_ Inclusion consultant initials: \_\_\_\_\_

Center/family home: \_\_\_\_\_ Homeroom: \_\_\_\_\_  
(if applicable)

Number of Staff in home room: \_\_\_\_\_ Number of children: \_\_\_\_\_

Observation period: (times) \_\_\_\_\_

Time	Activity	Number of Participants	General Observations/ Comments
e.g., 9– 9:30	Artwork		art activity laid out, children able to access appropriate and plentiful materials, staff engages children according to interest,

SAMPLE

Revised February 24<sup>th</sup>, 2009

Child Care Services Inclusion of Children with Special Needs

Summary of Peer to Peer Interaction: \_\_\_\_\_

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Summary of Staff/Provider to child Interactions: \_\_\_\_\_

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Other general observations (normal day vs. atypical day, extra staff, children absent, etc.): \_\_\_\_\_

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SAMPLE

Child Care Services Inclusion of Children with Special Needs

**Inclusion Consultant Recommendation Form**

Form E2

Child Care Center/Family Child Care Home: \_\_\_\_\_

Observation	Recommended Action ( <i>target date</i> )	Action to be completed by	Review Date	Other

Inclusion Consultant: \_\_\_\_\_

Date: \_\_\_\_\_

**Frequency Recording Chart**

**Child's name:** \_\_\_\_\_ **Week of:** \_\_\_\_\_

**Completed by:** \_\_\_\_\_

**Identified Behaviour:** e.g., Incidents of physical aggression toward others and objects including, but not limited to punching, kicking, hitting and pushing others or objects/property

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Day	Punching	Kicking	Hitting	Throwing Objects	Pinching	Pulling hair	Pushing others
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Place a small checkmark in each block each time the behaviour occurs on that day. If it happens twenty times a day place twenty checkmarks in the correct slot for the correct behaviour. For example, if you observe hitting behaviour five times in the morning and then four times in the afternoon, place nine checkmarks under hitting.

Does the behaviour happen with a certain person? Certain people? Where does the behaviour occur?

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What brought on the behaviour? (e.g., tired? sick? fighting over a toy? looking for attention? being teased? teasing others? boredom?)

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Comments: \_\_\_\_\_

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Form E4

ABC Chart

Date	Time	Antecedent What happened before the behaviour?	Behaviour	Consequence What happened after the behaviour?

SAMPLE

Child's name: \_\_\_\_\_

Date: \_\_\_\_\_

Centre/home: \_\_\_\_\_

Form E5

### Visit Summary Report

Location: \_\_\_\_\_ Room: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Comments
<b>SAMPLE</b>
Actions Required
<b>SAMPLE</b>

Child Care Services Staff: \_\_\_\_\_  
Received By: \_\_\_\_\_

Date: \_\_\_\_\_  
Date: \_\_\_\_\_

Revised February 24<sup>th</sup>, 2009

# **Appendix F: Guidelines to Determine Level of Staffing Support**

Form F1 - Guidelines to Determine Level of Staffing Support in Early Childhood Centres/  
Family Child Care Homes

**Guidelines to Determine Level of Staffing Support in Early Childhood Centres  
(Funded Space, Ratio Enhancement or Child-specific Support)**

**CENTRE INFORMATION**

**Certification levels and experience of operator and staff:**

Please complete the following information for the applicable homeroom/ home:

<b>Position</b>	<b>Years of experience</b>	<b>Meets requirements (Yes/No)</b>	<b>If no, level and category of certification</b>
Operator			
Lead staff			
Staff/provider			
Staff/provider			
Staff/provider			
Other:			
Other:			

**Inclusion experience of operator and staff:**

Is this the first experience with the Inclusion Consultant for the....

<b>centre?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom?</b>	<b>Yes</b>	<b>No</b>
<b>operator?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom lead staff?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom other staff?</b>	<b>Yes</b>	<b>No</b>

Is this request the first experience with the Inclusion Consultant addressing the inclusion of a child with this type of special need for the....

<b>centre?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom?</b>	<b>Yes</b>	<b>No</b>
<b>operator?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom lead staff?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom other staff</b>	<b>Yes</b>	<b>No</b>

Is this request the first experience with a child with special needs for the ...

<b>centre?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom?</b>	<b>Yes</b>	<b>No</b>
<b>operator?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom lead staff?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom other staff?</b>	<b>Yes</b>	<b>No</b>

Revised February 24<sup>th</sup>, 2009

Child Care Services Inclusion of Children with Special Needs

Is this request the first experience with this specific special need for the...

<b>centre?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom?</b>	<b>Yes</b>	<b>No</b>
<b>operator?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom lead staff?</b>	<b>Yes</b>	<b>No</b>
<b>homeroom other staff?</b>	<b>Yes</b>	<b>No</b>

**Quality of developmentally appropriate and inclusive programming that the centre provides:**

Are materials/equipment currently in place to provide for the inclusion of a child with this type of special need? **Yes No**

Has the SpecialLink Tool been administered in this centre/home? **Yes No**

If yes, indicate scores for practices \_\_\_\_\_ and principles \_\_\_\_\_

If no, indicate anticipated date of completion

\_\_\_\_\_

Violation orders issued in the past five years: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Programming recommendations related to the situation (Inclusion Consultants should collaborate with the Child Care Services Consultant):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Child Care Services Inclusion of Children with Special Needs  
**INFORMATION ABOUT THE CHILD(REN)**

**Level of need of the child(ren):**

Check off all that apply, and include anecdotal information to support this recommendation. Include frequency and date of last behavioural incident(s). Signed consents are required.

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

- Engages in self-abusive/dangerous behaviours (includes running away from the centre)

Explain:

\_\_\_\_\_

- Engages in behaviours that are potentially injurious to others

Explain:

\_\_\_\_\_

- Requires significant assistance to participate in daily routines

Explain:

\_\_\_\_\_

- Requires child-specific support for other reasons

Explain:

\_\_\_\_\_

If child-specific supports are requested for other reasons, indicate why these needs cannot be met by other lesser intrusive measures:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Indicate any diagnosis that may warrant child-specific supports (including severe mobility challenges, sensory issues, behavioural challenges, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Child Care Services Inclusion of Children with Special Needs

Indicate issues that may meet Delegation of Function criteria (may not necessarily indicate need for child-specific support)

<input type="checkbox"/> Requires diapering (beyond age 3) <input type="checkbox"/> Requires suctioning <input type="checkbox"/> Requires tube feeding <input type="checkbox"/> Requires catheterization <input type="checkbox"/> Has seizures <input type="checkbox"/> Requires diabetic injection <input type="checkbox"/> Has severe asthma attacks	<input type="checkbox"/> Has allergies that require epi-pen <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____
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Other relevant information:

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The following ratings should be based on the Inclusion Consultant's understanding of the information collected during this interview (1=requires significant support, 2=average, 3=requires minimal support).

Ability of the centre to meet all of the child's physical and developmental needs.    1   2   3  
 Ability of child to function in the centre independently (without additional support). 1   2   3  
 Ability of the centre to develop the resources to meet the child's needs over time.    1   2   3

Conclusion/Recommendation:

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Submitted by:

\_\_\_\_\_

Inclusion Consultant

\_\_\_\_\_

Date

Revised February 24<sup>th</sup>, 2009

## **Appendix G: Delegation of Function**

Form G1 – Delegation of Function Protocol

Form G2 - Delegation of Function Signature Form

## Delegation of Function Protocol

### Planning for Delegation of function

When it is determined that a medical procedure must be completed in a regulated child care setting, good inclusive practice would suggest that all individuals in the child's homeroom should avail of child-specific training to perform that procedure. For consistency in administration and the child's well-being, one person should be assigned to perform the procedure if at all possible, especially in cases requiring sensitivity to a child's right to privacy.

### **At all times children's dignity must be respected.**

When delegation of function is necessary, the following requirements must be met:

- A written plan for the administration of any procedures must be in place prior to the child attending a licensed centre or family child care home.
- The individuals trained in procedure administration must be directly involved with the child on a consistent basis, preferably in the same homeroom. The employee must be a permanent staff member/provider (except in the case of child-specific support) and someone that the child trusts.
- The individual(s) who will typically perform the procedure must be identified and receive the appropriate training in administration of the procedure, prior to the child attending.
- Training must be:
  - specific to the child for whom it is required;
  - by qualified medical personnel (e.g., a physician or nurse);
  - accompanied by confirmation in writing that states the individual has received training to complete the procedure with a specific child; and
  - re-done if there is a change in the administration of the procedure, with a new letter of confirmation indicating same
- The employee is not permitted to train others in the procedure.
- The employee must not perform the procedure on other children.
- Written confirmation of training completed must be maintained on file at the centre or home.
- A second employee (and preferably others) must be identified and trained in the procedure (see above criteria), to be used in circumstances when the primary individual is not in attendance.
- To avoid missing a procedure, or having it completed twice, procedure administration is to be charted in the same way as medication administration (see Delegation of Function form attached).

Revised February 24<sup>th</sup>, 2009

## Child Care Services Inclusion of Children with Special Needs

### Expectations for Parents

- Written parental consent must be on file at the centre prior to the administration of the procedure.
- Parents must complete a parental consent form for each procedure (not each time it is performed).
- Parents must renew their written permission to administer a procedure to a child who requires it on a long-term basis, at least every six months and whenever the recommendations are changed.
- Parents should be advised to tell their child that he or she will be given a procedure at the child care centre/family child care home.
- The licensee/provider must request that any changes to the procedure be communicated immediately to them in writing by the parents.

### Preparing the Child

- Parents know the best way to complete a procedure with their child, and should be asked for any suggestions they may have to make administering the procedure easier. The procedure should be consistent with how it is done at home, whenever possible.
- The child should be given a few minutes notice before the procedure is administered. Time should be allowed for the child to complete an activity, or to prepare to leave it for a few moments.
- The procedure must be administered in a quiet area, separate from other children whenever possible. Respect for the child's right to privacy must be ensured.
- It is suggested that staff/providers be truthful and matter-of-fact with the child about the procedure.
- Depending on developmental stage, the child should be allowed some control over the situation wherever possible (e.g., the child could help hold the tube, cleaning cloth, etc.).

### Guidelines for Administering Procedures

With regard to the administration of specific medical procedures, the following requirements must be met:

- All procedures must have medical documentation and written instructions with the child's name, the name and description of the procedure, and the frequency and duration with which to complete it, to be kept in the child's permanent file.
- It is recommended that procedure instructions be immediately available (e.g., posted in the area where the procedure will occur), and be followed exactly at all times.
- Especially if new to the administration of the procedure, staff/providers should:
  - **read the instructions for procedure administration;**
  - **check the chart to ensure that the procedure has not already been done;**
  - **prepare the child;**
  - **reread the instructions for administering the procedure; and**
  - **administer the procedure**

Recording the Procedures

- The procedure consent and record sheet must include:
  - the name of the child;
  - name of procedure to be administered;
  - the parent's signature;
  - the time and date of each administration; and
  - the name of the staff member administering the procedure.
  
- The procedure consent and record sheet should be kept nearby the procedure administration site to ensure that administration is recorded. A Delegation of Function file may be developed for this purpose.
- Date and time must be recorded, and initialled in the appropriate space on the administration record sheet.
- If the staff person is administering this procedure for the **first** time, the staff/provider must initial and sign the bottom of the sheet.
- The last date that the procedure was administered should be indicated by writing "stop."
- A copy of the form must be placed in the child's permanent file.

Child Care Services Inclusion of Children with Special Needs

Form G2

**Delegation of Function Form**

Child's name: \_\_\_\_\_

My child needs this procedure for: \_\_\_\_\_

Name of procedure: \_\_\_\_\_

Duration of procedure: \_\_\_\_\_

How is it administered: \_\_\_\_\_

Time(s) the procedure is to be administered: \_\_\_\_\_

The child received \_\_\_\_\_ (number) of procedures at home. Did the child have any reaction to this procedure? Yes  No . Please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special considerations for administration of this procedure (e.g., when congested):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_ (parent) give permission for \_\_\_\_\_ (staff)

to give \_\_\_\_\_ (procedure) to my child \_\_\_\_\_ (name) according to the instructions stated above. This staff person has received training in how to administer this procedure, and I will be contacted if there are any concerns regarding administration.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

(Write the date and time that the procedure was administered, and sign your initials in the appropriate boxes on reverse).



