

CHILD CARE

plus +

SUMMER 1993

A Resource for Integrated Child Care Providers

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+ The Americans with Disabilities Act (ADA) is good news for child care!

The Americans with Disabilities Act (ADA) truly is good news for early childhood professionals. It recognizes our commitment to creating environments that respond to the needs of individual children. Simply stated, realization of the ADA means children may not be excluded from child care programs because of disability. What is meant by disability? Disability is described as a physical or mental impairment that substantially limits major life activities--communicating, hearing, seeing, walking. (Disability is not, however, communicable disease such as chicken pox or flu.)

You may be wondering what effect this milestone legislation has on you and your program. To be specific, here is a list of effective practices and policies that help you comply with this law:

- ★ Continuing to use developmentally appropriate practices--which emphasize individual growth patterns, strengths, interests, and experiences of young children--to design appropriate learning environments.
- ★ Adopting an attitude of "how can I meet this child's needs . . ." and adapting creatively.
- ★ Making simple changes in the typical activities/routines in your program to meet the child's needs (using tactile play materials for a child with a vision impairment).
- ★ Eliminating program eligibility standards which have the effect of screening out children with disabilities, such as being toilet trained (some children may never qualify).
- ★ Including a question in your enrollment procedure that asks parents if there is anything you (or your staff) need to know that would help you care for their child (she goes to sleep with a pacifier or he wears hearing aids).
- ★ Working closely with parents and professionals to integrate the child's developmental and therapy goals into your daily routines and activities (using sign language to expand your communication with the children at snack or circle time).



★ Identifying and removing barriers to the child's participation (widening pathways between activity areas for walkers and wheelchairs or repositioning materials at the child's level for visual or motor activities). Costly structural changes are not required if affordable alternatives are available (providing pitchers and cups rather than lowering or raising a water fountain).

★ Using community resources to make accommodations to your program and/or provide needed services or equipment. (Materials may be donated and/or built; recruiting volunteers may enhance child/staff ratios.)

★ Spreading added costs (if any) of insurance, etc., among all of the families, just as you do other expenses. (Under certain circumstances, a federal tax credit or deduction is available for expenses associated with accommodating special needs.)

In general, the ADA places more emphasis on revising your child care practices and procedures than on making major physical modifications to your facility. If you are still unsure about your compliance, the following list describes practices which are not considered in compliance with the ADA:

- ★ Having policies or procedures that exclude children from your program or from regular activities based on disability or circumstances resulting from a disability, such as lack of language or mobility.
- ★ Excluding a child because you lack specialized skills, such as sign language, if training is readily available from parents or in your community at a manageable expense.
- ★ Excluding a child because of the intolerance of staff members, parents, or other children in your program.
- ★ Refusing to accept a child with a disability because of increased insurance rates.
- ★ Charging a higher fee solely because a child has a disability.

In fact, many child care providers will be in compliance with the ADA by continuing to do what they have always done--carefully and creatively responding to the unique and individual needs of children (and families) as they enroll in their programs. And, in most cases, you will have little difficulty--even in making physical modifications--when you make adaptations in response to one child at a time. +

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+ FROM THE SOURCE: When *can do* becomes *can't do*...

Because of the individual nature of each child (and each child care program) as well as the complexity of legal issues, you may wish to contact the following organizations when you feel you need specialized assistance in making accommodations for a particular child:

Office on the ADA - Civil Rights Division
U.S. Department of Justice
P.O. Box 66738
Washington, DC 20035-9998
(202) 514-0301 (TDD 202-514-0383)

Arc (formerly Association for Retarded Citizens)
National Headquarters
P.O. Box 1047
Arlington, TX 76004
1-800-433-5255 (TDD 817-277-0553)

Child Care Law Center
22 Second Street, 5th Floor
San Francisco, CA 94105
(415) 495-5498

Occasionally, available resources along with your best efforts may not be enough to adapt your program to match a child's needs. In this case, the ADA describes a few acceptable reasons for not admitting a child. Be aware that any standard you impose must be applied equally to every child enrolled in your program. Telephone calls to professionals, expense estimates, parent conferences, and any other efforts to make accommodations must be carefully documented.

After thoroughly assessing the abilities and disabilities of the child and making efforts to obtain necessary resources, you may exclude a child if you can establish that any of the following conditions exist:

- providing the necessary services or equipment would impose an *undue burden* on your program. An *undue burden* is a significant difficulty or expense.
- the child's needs require your making physical accommodations that go way beyond what is *readily achievable*. *Readily achievable* means "able to be accomplished easily and without much difficulty or expense."
- meeting the child's need for equipment or services would necessitate a *fundamental alteration* or *require dramatic changes in the nature* of your program and would result, in essence, in a program quite different from the one you are running.
- the child's participation poses a significant risk to health or safety of self or others, which cannot be lessened by modifications in your policies, practices, or procedures or by the provision of equipment or appropriate services.

With rare exceptions, you will be able to accommodate and care for any child with a disability by taking reasonable steps, and that is all the ADA requires. +

+ MAKING IT WORK: Resource Bonanza



One of the hardest parts of implementing the principles of the ADA is locating and utilizing resources readily available in the local community to help with accommodations, equipment, and services to meet a particular child's needs. Child care providers report having contacted and received valuable assistance from a number of agencies like these:

- Child care resource and referral agencies have responded to requests for assistance either directly or by referral to the appropriate community agency.
- Child and family service agencies are also well acquainted with assisting providers to integrate children with disabilities.
- Adult independent living centers have provided ideas to promote accessibility and independent use of buildings, rooms, activities, and play materials.
- County commissioners/officers have been consultants on legal issues and questions.
- Medical and health care supply services have answered questions about acquiring adaptive equipment and appropriate services.
- Specialty catalogs for young children typically display ideas for positioning devices, play equipment modifications, and adapting play materials.
- Other child care providers have shared their experiences in adapting and modifying their routines and activities for children with particular needs.
- Service clubs--Kiwanis, Elks, Shriners--and churches regularly dedicate funds as well as donate time to do volunteer work. +

★ ★ ANNOUNCEMENT ★ ★ FOR NAEYC MEMBERS

This is your last issue of *Child Care plus+*. To continue to receive this valuable resource, mail \$ 5.00 and the enclosed subscription card to:

Child Care plus+
Rural Institute on Disabilities
Corbin Hall - University of Montana
Missoula, MT 59812.

THANK YOU! to the National Association for the Education of Young Children (NAEYC). For the past three years, NAEYC has provided funding for *Child Care plus+* through a Membership Action Grant.



+ SPOTLIGHT: SPICE OF LIFE PRESCHOOL

Daniel Schoch is five years old. He loves the song "Twist and Shout." And although he definitely shouts during the song, he usually needs some help with the "twist" part. Daniel is a child with severe cerebral palsy and a seizure disorder. Assistance with the twisting usually comes from Daniel's child care provider, Lesley. Lesley bounces Daniel on his feet, back and forth in time with the rest of the children's jumping. And believe me . . . all the children can shout! "And that is the point, after all," says Lesley, "to have all of the children doing what they can, and what they want to, during a silly song like this!"

Yes, that's the point at **Spice of Life Preschool**, a family child care and preschool program located in the pines of Coeur d'Alene, Idaho. Children in this program are encouraged not only to do what they can do, but to do what they are interested in doing. Lesley uses her twenty-two years (in September!) of child care experience to individualize for children's needs, desires, and abilities. When Lesley decided to start her own program, the decision to have a fully inclusive program was a natural one. You see, when Lesley helps Daniel jump up and down to "Twist and Shout," it is with more than a provider's motherly care . . . it is with a mother's love for she is Daniel's mother.

Lesley Schoch's decision to start her own program was also influenced by the fact that she felt her son would grow and thrive in a program that was small, home-based, and integrated. Since that type of program was not in existence at the time, Lesley and Daniel made their own. When asked about her reaction to the American's with Disabilities Act (ADA), Lesley's response is a mix of child care professional and experienced mother. She says, "Plain and simple--it's just not that hard to comply." True to her word, Lesley continually searches for ways to stretch herself and her program's ability to individualize for children in her care. She recently completed a sign language course on American Sign Language (ASL). Children in her program now know how to "sing" the cleaning-up song in sign. She says that kids particularly like the phrase "It's time to stop . . . !" because the sign for "stop" is so much fun.

Lesley is spending the summer redesigning her parent information packet to establish a more cooperative relationship with her parents. She is developing a parent contract, information on policies and philosophies, and describing her health and safety practices. Informed parents can make good choices about Lesley's program.

Lesley is active in her local child care association and was part of a group that was awarded an Idaho Child Care Block Grant to purchase fine-motor equipment. The process was a cooperative effort, and the equipment is

now ordered, benefiting all of the children in each of the participating programs.

Perhaps the most significant project that Lesley is tackling is one that came about quite by accident. Lesley and her husband were drawing up plans to remodel their house, by turning the garage into bedrooms for her sons. Lesley was looking at the finished plans for remodeling and had a sudden brainstorm. Her preschool program is located down a small flight of stairs, which has already caused problems as Daniel has grown longer and heavier. She also feared that stairs could cause problems for other children with motor impairments. Lesley decided to move the preschool to the old garage area and turn the current preschool area into the bedrooms for her boys.

This idea alone means that 1) the entrance, preschool, and play yard are all on the same level, 2) parents can come directly into the preschool without going through the house, 3) supervision of children in the fenced yard is easier, 4) the home and the preschool program can remain essentially separate, and 5) best of all (says Lesley), wet and dirty

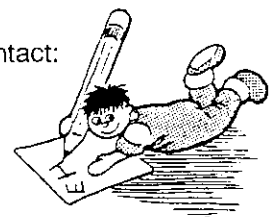
shoes won't track all the way through her home to get to the preschool room ☺!! All of these benefits came from an effort to address just one problem--getting a child with motor impairments up and down a flight of stairs. And the architectural change is possible at no extra cost from the original plan!

After several months of uncertainty--and a lot of faith that the right thing would happen--Daniel is headed for a fully inclusive kindergarten class this fall. With the ADA in mind, the school was built with full inclusion as a program philosophy. Daniel and his brother and sisters will all attend the same school, ride the same school bus, and begin their formal education with the same right to their expectations and dreams.

It is certainly clear to see why Lesley sees compliance with the ADA as "easy." She feels that when life doesn't have enough spice, you add some to it. A child without a smile can easily be given one. A problem doesn't seem so big when two or three people work on it. Daniel is ready to take on the world, and the world can be ready to receive him. It is the "Spice of Life" that makes it all worthwhile. +

For additional information, contact:

Lesley Schoch
Spice of Life Preschool
4001 Laurel Avenue
Coeur d'Alene, ID 83814
(208) 664-0777



+ WHAT DO I DO WHEN . . .

QUESTION: *I really do believe in meeting each child's individual needs, so I am all for the ADA. But, I am still not sure how I can rationalize spending tons of money to "adapt" my program for one child who has a disability when there are so many other things that ALL of the children would benefit from.*



ANSWER: First, it is important to remember that implementing the Americans with Disabilities Act (ADA) does not mean that you have to spend "tons of money" on just one child. Essentially, the key elements of the ADA for young children and child care are that a) you may not deny access to enrollment in your program just because the child has a disability and b) you must make reasonable accommodations that meet the child's needs and allow participation in your regular daily routines and activities.

Reasonable accommodations may be something like: learning the signs a child uses to communicate, attending a therapy session to understand how to handle and position the child, meeting with parents to learn the proper way to feed the child, or incorporating a piece of adaptive equipment into your program.

Of course you do not want to deprive the other children in your program. However, many providers claim that improving their ability to individualize and adapt activities and materials for a particular child's needs has improved their sensitivity to ALL of the children's needs. In fact, you will probably find that the new skills or the different equipment you learn to use will be of benefit to all of the children in your program.+

(If you have a question about children with disabilities in child care settings, please send your question to CHILD CARE plus+.)

+ RESOURCE REVIEW

The Child Care Law Center is a non-profit legal services organization dedicated to improving and expanding the child care services available in the country. One publication in their ADA series, *Caring for Children with Special Needs: The Americans with Disabilities Act and Child Care* (1993), is a step-by-step guide for child care providers to assess their legal responsibilities in admitting and caring for children with disabilities. This timely resource includes sections on reasonable accommodations, landlord/tenant, licensing, confidentiality, cost, and liability insurance issues. Also included is a national resource list and a flow chart for easy reference. For information, write Child Care Law Center, 22 Second Street, 5th Floor, San Francisco, CA 94105 or call (415) 495-5498.+

CHILD CARE plus+ is designed to enhance the integration of children with disabilities in child care settings by supporting care providers, parents, and community service providers including social workers, therapists, physicians, teachers, and administrators.

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