



LifeSpan

Day Care You Can Trust For Children.

ENTITIES AFFECTED: LifeQuest LifeQuest Nursing Center Mosser Nursing Home x LifeSpan Day Care TogetherCare LifeQuest Foundation LifeQuest Enterprises Inc.	FUNCTION: To ensure that all facilities provide inclusive child care that is responsive to the needs of all children and families.			
	TITLE: Inclusion Policy			POLICY No.: LSDC -0003
	ORIGINATION DATE:	7/2019	BY: Nicole Fetherman	DO
	REVISION DATE:		BY:	
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I. POLICY

Supporting all children's success

Definition of inclusion per OCDEL/NAEYC/DEC: Early Childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and contexts as full members of families, communities and society. The desired results of inclusive experiences for children with and without disabilities and their families, include a sense of belonging and membership, positive social relationships and friendships, and development and learning to reach their full potential. The defining features of inclusion that can be used to identify high quality early childhood programs and services are access, participation and supports.

Philosophy: Lifespan, in collaboration with families, staff and local Early Intervention and Intermediate Units and other partner agencies, will support the social and emotional growth of young children by implementing an inclusive learning environment in our program services that focuses on actively

including young children with disabilities. Lifespan will use a team-based approach to make evidence based decisions on practice to support reduction of challenging behaviors and the strengthening of social/emotional competencies for success in the classroom. We accomplish this by implementing the following practices:

- a. Creating a Caring and welcoming school environment- create a tone of belonging and valuing individuals. *Bucketfilling philosophy- Have you filled a Bucket Today?*
- b. Create an explicit set of school values- we do this by the implementation of positive behavior supports (PBIS).
- c. Build communication, engagement and involvement with all families. (including parent conferencing, daily reports, Hi Mama, parent events and parent education, resource sharing, etc)
- d. Intervene when signs of behavioral issues first become apparent using a school-wide behavior system. Implement a behavior tracking using Behavior Incident reports (BIRs).
- e. Refer for support services and interventions to community partners. Coordinate services for seamless supports during evaluation and assessment, service planning, development of IEP's/IFSP's, and tracking & monitoring results.
- f. Advocate with/on behalf of the child/family.

II. PROCEDURE

1. Identify and describe the behavior in observable and measurable terms using a variety of authentic assessments.
2. Collect Data: Documentation of behavior incident reports, anecdotal teacher notes, incident and injury reports, classroom observations, self assessments.
3. Parents as Partners: Parent Conferences and Collaboration Team meeting to discuss data collected and how to address with open, frequent communication. Share benefits of inclusion and their rights related to inclusion.
4. Creating Behavior Intervention/Support Plans (BIPs): including accommodations and modifications, and considerations for use of Assistive Technology.
5. Conduct program inclusion self assessment. Consider Universal Design for Learning (UDL) environment scan to ensure that barriers are removed that would prevent including children with disabilities.
6. Referrals to outside support services/interagency collaboration- see chart
7. Consultation with LSDC Health, Safety and Compliance Consultant Team

III. Data Collection/ Documentation

Identification through Authentic assessments:

1. Getting to Know You questionnaire at enrollment, and completing a Special Care Plan at enrollment meeting with Director
2. Ages and Stages Questionnaires within 45 days of enrollment
3. Developmental Assessments: Ounce and Work Sampling- done 3 times per year: Oct, Feb and May
4. TPOT and TIPTOES – PBIS classroom assessments
5. Child observations: Frequency charts, running records, time sampling, anecdotes
6. Classroom Self assessments such as ITERS3, ECERS-3 AND SACERS- U; UDL checklists
7. BIR reports and Incident & Injury reports
8. Reports and observations from outside agency professionals such as Early Intervention and Early Childhood Mental Health.

IV. Family Communication and partnership- Review results with families in parent conferences. Discuss next steps.

V. Access to Community Resources and Supports- Aide in the referral process and how to navigate. Help coordinate observations and evaluations to be done in the natural setting at school. Offer space and time for meeting with Early Intervention team and parents to support the child. Staff will aide in the development in IEP or IFSP by contributing data collected and information to support the success of the child. Be sure we have a seat at the table and arrange coverage for teachers to attend meetings for collaboration. All centers will continue to partner with Intermediate Units and other community based organizations that support inclusive practices. Ongoing communication including frequent emails, meetings to support the process is necessary.

VI. Staff Professional Development

Staff are provided with professional development in a number of training opportunities including but not limited to: PBIS Modules, Challenging Behaviors, Inclusive Practices, Self Regulation in ECE Settings, Classroom Management. The individual professional development plans of each staff will be re-evaluated annually and PD plans adjusted accordingly. LifeSpan is a proud host of many trainings for our communities to enhance practices in our communities. We participate in a number of collaborative groups such a Tender Bridges, Quality Child Care Coalition, Early Childhood Summit, Pre K Counts Consortium to engage partners in high quality service delivery for all children and families.

VII. Other Useful Resources

PA Early Learning Standards – social/emotional

Functional Behavioral Assessment (FBA)- Antecedent, Behavior and Consequence

Universal Design for Learning (UDL) and Culturally Linguistic and Ability Diverse (CLAD) scale

CARA's kit- Least Restrictive Environment (LRE) and People first language

Response to Intervention (RTI)

Model Childs Care Health Policies by the American Academy of Pediatrics- Special Care Plan Appendix G/H

PBIS materials: BIR's, BIRCHIS, TPOT and TIPTOES

The Benefits of Inclusion (Pa Promise for Children)

Preventing Suspension and Expulsion Implementation Plan

Referral to Service Protocol flow chart

Every Child Belongs, Welcoming a Child with a Disability, NAEYC article Aug/Sept 2017

Parent Rights Agreement

Appendix A

Early Intervention

While all children grow and develop in unique ways, some children experience delays in their development. Children in Pennsylvania with developmental delays and disabilities benefit from a state supported collaboration among parents, service practitioners and others who work with young children. Pennsylvania's Early Intervention program provides support and services to families with children, from birth to age five, with developmental delays and disabilities. Early intervention builds upon the natural learning opportunities that occur within the daily routines of a child and their family.

Early Intervention:

- Helps children with disabilities develop and learn to their fullest potential
- Enhances each family's capacity to meet the developmental needs of their child in the settings where children would be if they did not have a disability
- Respects the family's strengths, values, diversity and competencies and answers families' questions about their child's development.

Services such as parent education, support services, developmental therapies and other family-centered services that assist in child development may be included in a family's early intervention program. Services may be provided in the child's home, child care center, nursery school, play group, Head Start program, early childhood special education classroom or other settings familiar to the family. Early intervention supports and services are embedded in typical routines and activities, within the family, community and/or early care and education settings. Early intervention services are provided at no cost to families.

Parents who have questions about their child's development may contact the **CONNECT Helpline at 1-800-692-7288**. The CONNECT Helpline assists families in locating resources and providing information regarding child development for children ages birth to age 5. In addition, CONNECT can assist parents by making a direct link to their county early intervention program or local preschool early intervention program.

To make a referral for early intervention, please call the **CONNECT Helpline at 1-800-692-7288**
www.connectpa.net

Appendix B

Understanding Challenging Behaviors

1. Behavior is always a form of communication.
2. There is always a reason for challenging behavior.
3. Challenging behaviors continue because they are effective.
4. Challenging behavior often indicates that a child lacks skills in some areas.

Goals of Misbehavior

Attention Seeking Ask: Could it be that you want special attention? Teacher feels annoyed	Power Ask: Could it be that you want your own way and hope to be the boss? Teacher feels beaten or intimidated
Revenge Ask: Could it be that you want to hurt others as much as you feel hurt by them? Teacher feels hurt or wronged	Helplessness Ask: Could it be that you want to be left alone? Teacher feels inadequate

Cooperative Discipline Model

Appendix C

Classroom Management Guidelines

Have a consistent and basic schedule and regular routines.

Make sure all materials and activities are developmentally appropriate and accessible to foster independence.

Reduce the number of transitions throughout the day.

Be prepared with materials for activities.

Use the power of peers to model appropriate behaviors. Choose buddies intentionally, some children make better partners than others.

Teach social and emotional skills:

a. Model taking turns, sharing and other social skills like comforting a classmate.

b. Teach children how to problem solve and negotiate when sharing materials.

c. As a group, come up with 5-6 classroom rules that state what children should do rather than what they should not do. Ex. "Use gentle touches" versus "No hitting". "Walking feet" instead of "no running".

Use the PBIS language and rules: ***Be Cooperative, Be Respectful, Be Responsible and Be Safe***

Teach and practice the rules.

Have clear consequences for not following the rules, enforce them fairly and consistently with all children.

d. Acknowledge and reinforce appropriate behaviors and positive child and adult interactions. Catch children being good!

Utilize Self assessments: ERS-3 , TPOT/TIPTOES then modify the environment. UDL- universal design for learning and or CLAD – culturally linguistic and ability diverse inventory. Evaluate your current classroom schedule.

Be a reflective practitioner. Ask yourself, "what's working, what isn't and why"? What do I need to do more of? Less of?

Appendix D Special Care Plan adopted from Model Child Care health policies Appendix G and H

(insert here)

Appendix E

Centerwide

PBIS LIFESPAN Expectations



- Be Cooperative**
- Be Respectful**
- Be Responsible**
- Be Safe**

Appendix F Behavior Incident Report and Check in System (BIRCHIS)

Child's Name	Classroom	Date	Time	Staff Involved					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; vertical-align: top;"> Routines: Arrival Centers Circle Time Small group Classroom jobs Meals Clean up Nap Departure Free play Individual activity Outdoor play Self care/bathroom Special activity Therapy Transition Field trip Other </td> <td style="width: 20%; vertical-align: top;"> Motivations: 1. Obtain preferred object 2. Obtain preferred activity 3. Obtain peer attention 4. Obtain adult attention 5. Obtain sensory stimulation 6. Avoid/escape non preferred activity/task 7. Avoid peer attention 8. Avoid adult attention 9. Avoid sensory overstimulation 10. Unknown 11. other </td> <td style="width: 20%; vertical-align: top;"> Challenging Behaviors: Disruption/tantrum Inappropriate language Non-compliance Physical aggression Property damage Running away/flight risk Self injury Social withdrawal/isolation Unsafe behaviors Verbal aggression/threats Other </td> <td style="width: 20%; vertical-align: top;"> Staff Responses: 1. verbal reminder of expectation/directive 2. curriculum modification 3. move within group 4. remove from activity 5. remove from area 6. re-teach and practice behavior 7. physical guidance to engage in alternative, appropriate behavior 8. time with adult in different classroom 9. family contact 10. loss of item/privilege 11. other </td> <td style="width: 20%; vertical-align: top;"> Admin Follow Up: 1. talk with child 2. telephone contact with family 3. parent/family meeting 4. arrange behavioral consultation/team 5. reduce hours in program 6. targeted group intervention 7. transfer to another classroom/program 8. early dismissal 9. referral 10. other </td> </tr> </table>					Routines: Arrival Centers Circle Time Small group Classroom jobs Meals Clean up Nap Departure Free play Individual activity Outdoor play Self care/bathroom Special activity Therapy Transition Field trip Other	Motivations: 1. Obtain preferred object 2. Obtain preferred activity 3. Obtain peer attention 4. Obtain adult attention 5. Obtain sensory stimulation 6. Avoid/escape non preferred activity/task 7. Avoid peer attention 8. Avoid adult attention 9. Avoid sensory overstimulation 10. Unknown 11. other	Challenging Behaviors: Disruption/tantrum Inappropriate language Non-compliance Physical aggression Property damage Running away/flight risk Self injury Social withdrawal/isolation Unsafe behaviors Verbal aggression/threats Other	Staff Responses: 1. verbal reminder of expectation/directive 2. curriculum modification 3. move within group 4. remove from activity 5. remove from area 6. re-teach and practice behavior 7. physical guidance to engage in alternative, appropriate behavior 8. time with adult in different classroom 9. family contact 10. loss of item/privilege 11. other	Admin Follow Up: 1. talk with child 2. telephone contact with family 3. parent/family meeting 4. arrange behavioral consultation/team 5. reduce hours in program 6. targeted group intervention 7. transfer to another classroom/program 8. early dismissal 9. referral 10. other
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Antecedent _____
Behavior _____
Consequence _____

Behavior Intervention Plan

Not sure about this yet