

CHILD CARE

CENTERS

AND THE

AMERICANS

WITH

DISIBILITIES

ACT (ADA)

Dr. Theresa Vadala

The Americans with Disabilities Act (ADA) is a federal civil rights law. The Act states that people with disabilities are entitled to equal rights in employment, state and local public services, and public accommodations such as preschools, childcare centers, and family childcare homes.



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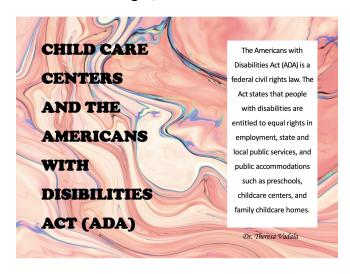
Childcare Centers and the Americans with Disabilities Act (ADA)

by

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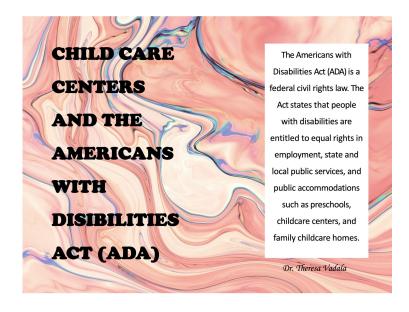
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Childcare Centers and the Americans with Disabilities Act (ADA)



3 Clock Hour





0.3 CEU

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Learning Objectives

Participants will be able to:

- 1. Identify how the Americans with Disabilities Act applies to childcare.
- 2. Implement clear communication skills with adult care providers and children in their care.
- 3. Organize an early childcare facility that is all inclusive.
- 4. Identify how to offer quality care to all children by using the resources provided.

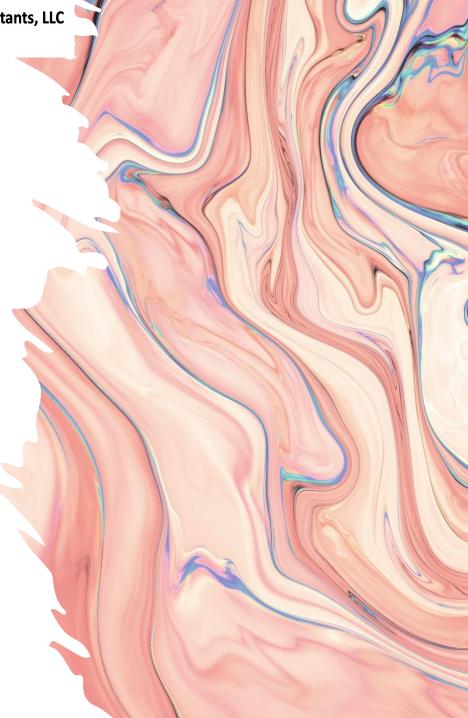


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Learning Outcomes

Participants will be able to:

- 1. Identify at least 2 types of childcare agencies/organizations applicable to follow the ADA.
- 2. Name 3 methods of clear communication skills to use with adult care providers.
- 3. List 2 different ways to organize an early childcare facility that is all inclusive.
- 4. Name 2 types of resources offered by the ADA to share with providers.



AGENDA

Part 1: The Americans with Disabilities Act (ADA)

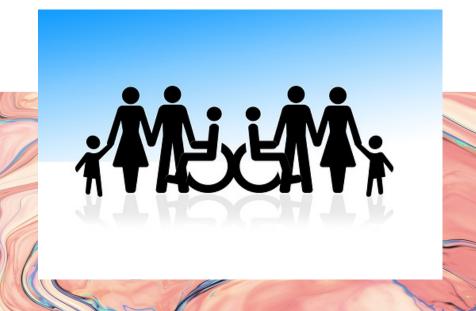
Part 2: Communication Skills with Adult Care Providers and Families

Part 3: Inclusive Healthy Learning Childcare Center Environments

Part 4: ADA Resources & References

Review

Quiz/Evaluation





The Americans with Disabilities Act (ADA)

Does the Americans with Disabilities Act (ADA) apply to childcare centers?

Applying New Knowledge:

Learning & Transfer

Yes. Privately-run childcare centers -- like other public accommodations such as private schools, recreation centers, restaurants, hotels, movie theaters, and banks -- must comply with title III of the ADA.

Childcare services provided by government agencies, such as Head Start, summer programs, and extended school day programs, must comply with title II of the ADA. Both titles apply to a childcare center's interactions with the children, parents, guardians, and potential customers that it serves.

Almost all childcare providers, regardless of size or number of employees, must comply with title III of the ADA. Even small, home-based centers that may not have to follow some State laws are covered by title III.



Part 1: The Americans with Disabilities Act (ADA)

Applying New Knowledge:

Learning & Transfer

The exception is childcare centers that are run by religious entities such as churches, mosques, or synagogues. Activities controlled by religious organizations are not covered by title III.

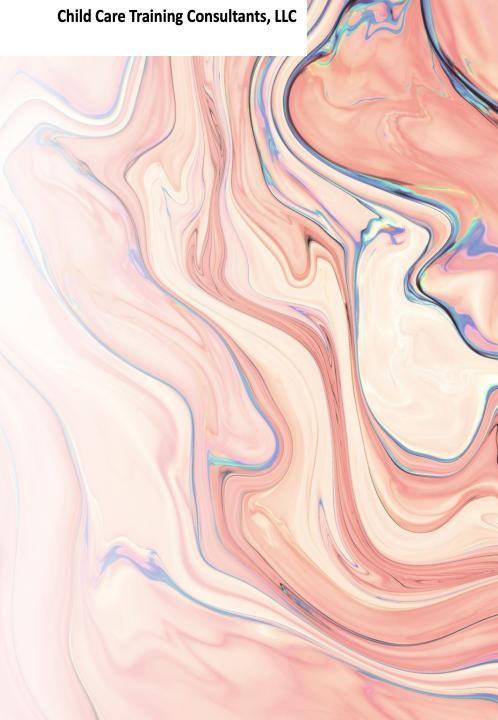
Private childcare centers that are operating on the premises of a religious organization, however, are generally **not** exempt from title III. Where such areas are leased by a childcare program not controlled or operated by the religious organization, title III applies to the childcare program but not the religious organization.

For example, if a private childcare program is operated out of a church, pays rent to the church, and has no other connection to the church, the program has to comply with title III but the church does not.



What are the basic Requirements of Title III

The ADA requires that childcare providers not discriminate against persons with disabilities on the basis of disability, that is, that they provide children and parents with disabilities with an equal opportunity to participate in the childcare center's programs and services.



Centers cannot exclude children with disabilities from their programs unless their presence would pose a *direct threat* to the health or safety of others or require a *fundamental alteration* of the program.

Centers have to make *reasonable modifications* to their policies and practices to integrate children, parents, and guardians with disabilities into their programs unless doing so would constitute a *fundamental* alteration.

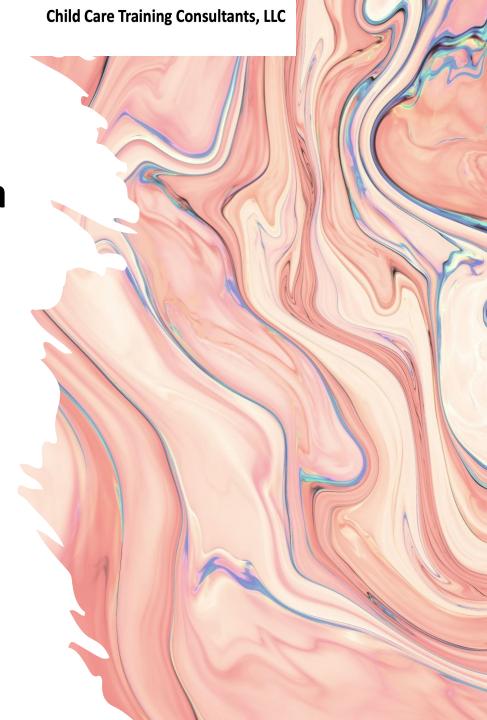
Centers must provide appropriate auxiliary aids and services needed for effective communication with children or adults with disabilities, when doing so would not constitute an undue burden.

Centers must generally make their facilities accessible to persons with disabilities. Existing facilities are subject to the *readily achievable* standard for barrier removal, while newly constructed facilities and any altered portions of existing facilities must be *fully accessible*.



How do I decide
whether a child with a
disability belongs in
my program?





Childcare centers cannot just assume that a child's disabilities are too severe for the child to be integrated successfully into the center's childcare program.

The center must make an *individualized assessment* about whether it can meet the particular needs of the child without fundamentally altering its program. In making this assessment, the caregiver must not react to unfounded preconceptions or stereotypes about what children with disabilities can or cannot do, or how much assistance they may require.

Instead, the caregiver should talk to the parents or guardians and any other professionals (such as educators or health care professionals) who work with the child in other contexts. Providers are often surprised at how simple it is to include children with disabilities in their mainstream programs.

Childcare centers that are accepting new children are not required to accept children who would pose a *direct threat* or whose presence or necessary care would *fundamentally alter* the nature of the childcare program.

Our center specializes in "group childcare." Can we reject a child just because he/she needs individualized attention?

No. Most children will need individualized attention occasionally. If a child who needs one-to-one attention due to a disability can be integrated without fundamentally altering a childcare program, the child cannot be excluded solely because the child needs one-to-one care.

For instance, if a family with a child who has Down Syndrome applies for admission and needs one-to- one care to benefit from a childcare program, and a personal assistant will be provided at no cost to the childcare center (usually by the parents or though a government program), the child cannot be excluded from the program solely because of the need for one-to-one care. Any modifications necessary to integrate such a child must be made if they are reasonable and would not fundamentally alter the program. This is not to suggest that all children with Down Syndrome need one-to-one care or must be accompanied by a personal assistant in order to be successfully integrated into a mainstream childcare program. As in other cases, an *individualized assessment* is required. But the ADA generally does not require centers to hire additional staff or provide constant one-to-one supervision of a particular child with a disability.

One of the children in my center hits and bites other children. What do I do?

The first thing the provider should do is try to work with the parents to see if there are reasonable ways of curbing the child's bad behavior. He may need extra naps or changes in his diet or medication.

If reasonable efforts have been made and the child continues to bite and hit children or staff, he may be expelled from the program even if he has a disability.

The ADA does not require providers to take any action that would pose a *direct* threat -- a substantial risk of serious harm -- to the health or safety of others.

Centers should not make assumptions, however, about how a child with a disability is likely to behave based on their past experiences with other children with disabilities. Each situation must be considered individually.



One of the children in my center has parents who are deaf. I need to have a long discussion with them about their child's behavior and development. Do I need to provide a sign language interpreter for the meeting?

It depends. Childcare centers must provide effective communication to the customers they serve, including parents and guardians with disabilities, unless doing so poses an undue burden. The person with a disability should be consulted about what types of auxiliary aids and services will be necessary in a particular context, given the complexity, duration, and nature of the communication, as well as the person's communication skills and history.





One of the children in my center has parents who are deaf. I need to have a long discussion with them about their child's behavior and development. Do I need to provide a sign language interpreter for the meeting?

Different types of *auxiliary aids and services* may be required for lengthy parent-teacher conferences than will normally be required for the types of incidental day-to-day communication that take place when children are dropped off or picked up from childcare. As with other actions required by the ADA, providers cannot impose the cost of a qualified sign language interpreter or other auxiliary aid or service on the parent or guardian.

Aparticular auxiliary aid or service is not required by title III if it would pose an *undue burden*, that is, a significant difficulty or expense, relative to the center or parent company's resources.



If an older child has delayed speech or developmental disabilities, can we place the child in the infant or toddler rooms?

Generally, no.

Under most circumstances, children with disabilities must be placed in their age-appropriate classroom, unless the parents or guardians agree otherwise.

Can parents be charged for special services provided to a child with disabilities?

It depends. If the service is required by the ADA, you cannot impose a surcharge for it. It is only if you go beyond what is required by law that you can charge for those services. For instance, if a child requires complicated medical procedures that can only be done by licensed medical personnel, and the center does not normally have such personnel on staff, the center would not be required to provide the medical services under the ADA. If the center chooses to go beyond its legal obligation and provide the services, it may charge the parents or guardians accordingly.

Can parents be charged for special services provided to a child with disabilities?

On the other hand, if a center is asked to do simple procedures that are required by the ADA – such as finger-prick blood glucose tests for children with diabetes it cannot charge the parents extra for those services. To help offset the costs of actions or services that are required by the ADA, including but not limited to architectural barrier removal, providing sign language interpreters, or purchasing adaptive equipment, some tax credits and deductions may be available.

Can I refuse to give medication to a child with a disability at our center?

No. In some circumstances, it may be necessary to give medication to a child with a disability in order to make a program accessible to that child. While some state laws may differ, generally speaking, as long as reasonable care is used in following the doctors' and parents' or guardians written instructions about administering medication, centers should not be held liable for any resulting problems.

Providers, parents, and guardians are urged to consult professionals in their state whenever liability questions arise.

Can we reject children older than three from our program who need diapering because of a disability?

Generally, no. Centers that provide personal services such as diapering or toileting assistance for young children must reasonably modify their policies and provide diapering services for older children who need it due to a disability.

Generally speaking, centers that diaper infants should diaper older children with disabilities when they would not have to leave other children unattended to do so.

Centers must also provide diapering services to young children with disabilities who may need it more often than others their age.

Some children will need assistance in transferring to and from the toilet because of mobility or coordination problems. Centers should not consider this type of assistance to be a "personal service."



Centers cannot generally exclude a child just because he or she has mental retardation.

The center must take reasonable steps to integrate that child into every activity provided to others.

If other children are included in group sings or on playground expeditions, children with disabilities should be included as well.

Segregating children with disabilities is not acceptable under the ADA.



Severe Allergies

Children cannot be excluded on the sole basis that they have been identified as having severe allergies to bee stings or certain foods.

A center needs to be prepared to take appropriate steps in the event of an allergic reaction, such as administering a medicine called "epinephrine" that will be provided in advance by the child's parents or guardians.

Part 2: Communication Skills with Adult Care Providers and Families

Parents have the right to:

- Information on academics of the school program
- Inspect the child's record and respond to any statement
- Be informed of and to appeal any school policies
- Be informed of and to appeal any administrative decisions
- Be informed of all special education programs
- Appeal the placement of their child in a special education class
- Extra assistance from the school, including counseling, tutorial, and remedial programs

Part 2: Communication Skills with Adult Care Providers and Families

Parents have the right to:

- Be treated with courtesy by all members of the staff
- Participate in meaning parent-teacher conferences to discuss their child's school progress and welfare
- Visit schools and classes
- Know that they can approach a staff member with a concern and that the staff member will listen carefully and will do everything possible to address the issue

Part 3: Inclusive Healthy Learning Childcare Center Environments

Parents have the right to:

- Know that their child will be safe at school, both physical and emotionally
- Know that all children will be treated fairly regardless of race, creed, national origin, economic status, gender, or age and that each child will be treated as an individual
- Know that staff is experienced and trained I child development
- Know that any negative or cruel behavior among students or between students and staff will not be tolerated

Part 4: ADA Resources & References

The ADA Home Page contains the Department of Justice's

Regulations and technical assistance materials

https://www.ada.gov/

ADA Information Line

Talk to us at 800-514-0301 | 1-833-610-1264 (TTY)

M, Tu, W, F: 9:30am - 12pm and 3pm - 5:30pm ET

Th: 2:30pm - 5:30pm ET

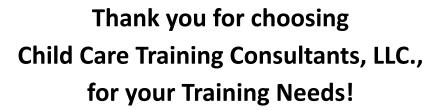
Learning Outcomes

By the end of this training participants will be able to:

- 1. Identify at least 2 types of childcare agencies/organizations applicable to follow the ADA.
- 2. Name 3 methods of clear communication skills to use with adult care providers.
- 3. List 2 different ways to organize an early childcare facility that is all inclusive.
- 4. Name 2 types of resources offered by the ADA to share with providers.



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Learning Assessment:

Learners will be assessed by answering 5-10 questions on a quiz and the evaluation.

Learners must complete the quiz and receive 100% to obtain a certificate of completion with NV Registry Hours and

Support Services:

Please contact us 24/7 at childcaretrainingconsultants1@gmail.com. Questions? Need Help?

We are happy to help.