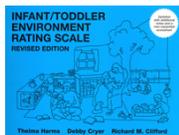




Provisions for Children with Disabilities

ITERS-R Indicator	Why is this important?
<ul style="list-style-type: none"> • Staff have information from available assessments. • Staff contribute to individual assessments and intervention plans. 	<ul style="list-style-type: none"> • Having information from the formal assessments allows staff to describe (general) and understand the special needs a child with a disability may have. • Like parents, staff have significant knowledge about how a child is progressing and ideas for activities that will help promote the child's development. Staff see the child in a different environment, where he/she may not behave in the same way as at home during a formal assessment in a strange place. Having all responsible adults in the child's life to give input about the child to determine his/her developmental level and make plans for the future gives the child a better chance for success.
<ul style="list-style-type: none"> • Staff follow through with activities and interactions recommended by other professionals (medical doctors, therapists, educators) to help children meet identified goals. 	<ul style="list-style-type: none"> • The recommendations from others who specialize in treating disabilities can make a big difference in the ability of classroom staff to better meet the special needs of a child. A cooperative, collaborative approach works best.
<ul style="list-style-type: none"> • Modifications made as needed in environment (ramp, time for therapists, or changes in schedules), program, and schedule so that children can participate in many activities with others – see examples on page 410 in All About ITERS. 	<ul style="list-style-type: none"> • Making modifications in the classroom or program allows for a child with disabilities to participate in many of the activities.
<ul style="list-style-type: none"> • Parents frequently involved in sharing information with staff, setting goals, and giving feedback about how program is working. <ul style="list-style-type: none"> ○ Informal communication daily or almost daily. ○ Formal meetings should take place at least 2 times a year. 	<ul style="list-style-type: none"> • Parents should share information often enough to ensure that staff and parents work as partners in meeting the child's needs.
<ul style="list-style-type: none"> • Most of the professional intervention is carried out within the regular activities of the classroom by staff or specialists. 	<ul style="list-style-type: none"> • Intervention activities have been shown to be most effective when they are carried out as a usual part of a child's home or classroom experiences. When most of the intervention is incorporated into regular classroom practices, a child gets more chances to develop the skills being targeted.
<ul style="list-style-type: none"> • Children with disabilities are integrated into the group and participate in most activities. 	<ul style="list-style-type: none"> • Only in relatively unusual cases, when a child has extremely severe disabilities, should the child be segregated in any way, and no child should often be segregated from the group.



SOURCE: *Infant/Toddler Environment Rating Scale (ITERS)*