

Chapter #: N/A	
Policy: Supported Child Development Program	
Effective Date of Policy: August 1, 2013	Amendment Date of Policy:

Policy Statement: #1: Determining Eligibility for Supported Child Development Services and Supports

The Ministry of Children and Family Development (MCFD) provides the Supported Child Development (SCD) program to eligible children through contractual arrangements between MCFD regions and community agencies.

SCD Programs are responsible for determining the eligibility of a child for the supports and services provided by SCD, through consideration of the child's strengths and needs and the capacity of the child care provider to meet those needs.

Outcomes

- Access to Supported Child Development services and supports is fair and equitable.
- Services are provided efficiently and effectively to the appropriate population.

Standards

- 1.1** The SCD program uses a consistent approach to determine eligibility and the range of support needed for each child in the context of the child care setting.
- 1.2** Recognizing that Aboriginal children and families are best served by Aboriginal Supported Child Development programs (ASCD), the SCD has a protocol or other formal agreement in place with ASCD, in communities where the program exists, to ensure that referrals for Aboriginal children are directed to ASCD in a timely manner.
- 1.3** The organization informs the family of other programs and services available in their community.

Procedures

Referrals

- The program accepts referrals from professionals and self-referrals from parents.
- The SCD Consultant confirms with the referring professional that the family who is referred to the program is aware of and in support of the referral before making contact with the family.
- The SCD Consultant explains to families:
 - The SCD program's intent and purpose
 - The program's eligibility criteria
 - The parents' rights and responsibilities
- The SCD program is intended for children who:
 - are under the age of 19;
 - are residents of British Columbia;
 - have a documented developmental delay or disability, and;
 - have a documented need for extra support in a child care setting due to the developmental delay or disability.
- The program informs the family of the required eligibility documents.
- The following are required in order to determine eligibility:
 - Proof that the child is under age 19 (such as a birth certificate)
 - Current BC Care Card (as proof of residency)
 - Documentation of suspected or confirmed developmental delay or disability. This may be in the form of a letter, report or assessment from one of the following:
 - Family physician
 - Medical specialist
 - Paediatrician
 - Diagnostic team or clinic
 - Speech-language pathologist
 - Physiotherapist
 - Occupational Therapist
 - Registered psychologist
 - Early Childhood Educator
 - Infant Development Consultant
 - Public Health Nurse
 - Or other related professional
 - If documentation of developmental delay or disability is unavailable, and/or additional information is required, the SCD consultant may complete a developmental screening/ assessment to determine eligibility.

Written Consent

- The program obtains written consent from parents to provide the SCD program to an eligible child.
- The parent(s) must provide written consent for:
 - the eligible child to participate in all aspects of the SCD program, including developmental screening or assessment; and,
 - the SCD program to exchange relevant information about the child or family with other service providers, including, as relevant, bringing the child's file to meetings with the family and visits to child care centres.

Determining eligibility

- The program uses the Support Guide or equivalent to assess and document the need for extra support in a child care setting due to the developmental delay or disability.
- Programs may use the third or fourth version of the Support Guide and may adapt it to align with their internal documentation practices and accreditation standards.
- The SCD consultant completes the Support Guide with information gathered from one or more meetings with the family, preferably including the child, and the child care provider where applicable.
- Upon completing the Support Guide, the Consultant will be able to determine whether or not a child care setting will require SCD services to include a child and/or children with support needs.
- If the program determines that the child is not eligible for SCD, the family and referral source are informed of the reasons why and the family is referred to an alternative program.
- The SCD program maintains records of the number of children deemed ineligible, and notes the reason(s) for ineligibility.

Informing families of other supports and services

- All families, regardless of whether they are eligible for the SCD program, are informed of other supports and services for which they may be eligible, including:
 - Ministry of Children and Family Development programs for children and youth with special needs.
 - Disability-specific community supports such as parent support groups, advocacy groups, etc.
 - Generic community supports and services such as recreation programs.

Policy Statement #2: Supported Child Development Supports and Services

Agencies contracted to deliver the SCD program will provide a range of supports to meet the individual needs of each child served in the context of their child care setting.

Outcomes

- Children achieve their developmental goals as identified in their individual plans.
- Primary caregivers have an increased knowledge of child development and growth and an awareness of the supports available.
- Child care settings have increased knowledge and skill to practice inclusion.

Standards

- 2.1** The program uses developmental and social-emotional screening and assessment tools as appropriate to inform the development of an individualized plan.
- 2.2** The developmental and social-emotional screening and assessment instruments meet the following criteria:
 - The purpose of the instrument is to screen or assess developmental and social-emotional health rather than to predict the future academic success of the child.
 - It includes a range of domains, including at minimum: motor skills, cognition, communication and social-emotional status.
 - The instrument has adequate psychometric properties with reliability, validity, sensitivity and specificity scores of 0.70 or above.
 - Norm-referenced tests need to be normed against a sufficiently large and diverse sample size that, as closely as possible, reflects the social environment of the children being tested, within the past twenty years.
 - The instruments are intended for the age group for which they are being utilized.
- 2.3** Each child has a written, individual service plan (ISP) specific to the child and child care setting that documents the child's strengths and needs and sets forth specific, measurable objectives and goals as well as strategies and interventions that will work toward achievement of those objectives and goals.
- 2.4** Children with significant health care needs have a medical care plan prepared by the appropriate resource in addition to the ISP.
- 2.5** The program uses a collaborative, team-based approach to planning, monitoring

and review.

- 2.6 The SCD program uses a consistent approach to determine the level and nature of support needed for each child in the context of the specific child care setting.
- 2.7 The program provides different levels of support to eligible children based on their individual needs.
- 2.8 The program has a consistent structure that reviews recommendations for extra staffing supports and determines what extra supports may be allocated.
- 2.9 The program provides SCD services to eligible children in their home on an exceptional basis only.
- 2.10 SCD programs collaborate and work in partnership to provide SCD to children across the programs' geographic boundaries.
- 2.11 The program serves children with complex health care needs through coordination with Nursing Support Services (NSS.)
- 2.12 The program provides general and child-specific training for families, child care providers, support workers, and other community resources and thereby builds capacity and knowledge.

Procedures

Screening and assessment

- The SCD consultant may administer norm-referenced and/or criterion-referenced developmental screening and/or assessment tools.
- The practitioners using the instrument meet the minimum qualifications for administration of the instrument. Qualifications may be specific levels of education, courses of study, or instrument-specific training.
- The SCD consultant conducts developmental screening and/or assessment of children to:
 - document the child's developmental stage
 - facilitate and support early identification of developmental concerns
 - identify the child's mastered and emerging skills and areas of need
 - inform goals and objectives for the Individual Service Plan
 - facilitate appropriate and timely referrals to other professionals, interventions
 - track progress over time,
 - promote and support parents' knowledge/understanding of their child's development
 - increase parents' capacity to maximize their child's development
 - provide information to support transitions
 - provide information to promote inclusion

- The process of and time involved in administration is reasonable for the practitioner, child and parent.
- Parents are active participants in screening and assessment.
 - Parents know their children best and provide key information required for accurate assessment.
 - Parents are the primary agent of change impacting their child's development.
 - Parents provide informed consent for all screening and assessment processes.
- The resulting data and reports are understandable to the practitioner and the parents.
- Parents are active participants in screening and assessment.
 - Parents know their children best and provide key information required for accurate assessment.
 - Parents are the primary agent of change impacting their child's development.
 - Parents provide informed consent for all screening and assessment processes.

Individual planning

- The ISP documents and guides the intervention and support services provided to achieve collaboratively-determined goals focussed on increasing the child's participation in valued activities and enhancing the family's capacity.
- The family's concerns, priorities, and resources guide the ISP process. Families are active participants. Following family-centred principles, families have flexibility in determining who will develop the plan and who will act as service coordinator.
- When a family chooses a service provider or professional other than the SCD consultant to complete the planning process, the SCD consultant will ensure that the ISP is on the family's SCD file.
 - the child's strengths, motivators, interests, and preferences;
 - the child's present levels of physical, cognitive, communicative, social, and emotional development, as determined through assessment/screening;
 - the family's priorities and concerns related to enhancing their child's development;
 - the major outcomes to be achieved for the child and the family and the timelines and resources to be used to determine progress;
 - specific early intervention services necessary to meet the unique needs of the child and the family, including the frequency, intensity, and the method of delivery;
 - the natural environments in which services will be provided;
 - the projected dates for initiation of services and their anticipated duration;
 - the name of the service provider who will be responsible for implementing the plan and coordinating with other agencies and persons;
 - cultural considerations; and,
 - steps to support the child's transition to school or other appropriate services

when needed.

- The Support Guide or equivalent informs the development of the ISP but is not an ISP.
- The ISP is reviewed and updated every twelve months or more frequently if required, or if requested by the parents.
- The family is informed that the services provided are affected by progress towards goals, changes in the family's situation, changes in the needs of the child care setting, and available resources.

Collaborative, team-based approach

- Family members and service providers work collaboratively to gather and review information, plan, implement, and evaluate intervention goals, objectives, and strategies tailored to the child's unique developmental needs.
- Team meetings are held as required to support parents, to share new information, to review plans and set new goals, to plan transitions and to problem solve.
- Team meetings include the parents, child care provider, SCD consultant and other professionals as requested by the parents and are scheduled at times and in locations that are convenient for the parents.
- SCD consultants and parents collaborate on service coordination.

Support guide

- The Support Guide is a tool that is used by the SCD Consultant, in partnership with the family and the child care setting to determine the extra supports needed to successfully include a child with developmental delays or disabilities in a child care setting.
- Programs may adapt the Support Guide to align with their internal documentation practices and accreditation standards.
- The Support Guide is not used to diagnose developmental delay or disability.
- The SCD consultant, in conjunction with the family and child care provider(s) uses the Support Guide or equivalent to identify:
 - Existing resources, skills, strategies and approaches in the child care program that will support the child's participation and development during each routine.
 - The additional SCD services that are needed to support the existing resources in the child care program. These services may include:
 - Strategies, information and training for child care staff
 - Toys, adaptive equipment
 - Extra staffing support, either short term or long term
 - Criteria that indicate when a review of support needs is required.
 - The child's mastered and emerging skills in each area of development.
 - The child's interests and strengths.
 - The family's priorities for the child and family.
 - What other services are in place, what resources the family already has,

and what they would like to know more about.

- Upon completing the Support Guide, the consultant will determine:
 - Whether or not the child care setting will require SCD services to include a child with support needs.
 - The types of services needed in order to effectively include the child with support needs.
 - If services needed include extra staffing support, the Support Guide helps to determine the goals, frequency and duration of that support.
- The Support Guide (or equivalent) and the Individual Service Plan identify the family's, child's, and child care provider's support needs and determine the level of supports that will be provided:
 - All children who are eligible for SCD receive consultant services, which may include training and support for the family and/or child care setting.
 - Some children are eligible for extra staffing supports which may be short or long term, transitional, intermittent, shared, or individual support.
- The SCD consultant, in collaboration with the family and child care setting, reviews the level and nature of support every three to six months, as indicated by the child's needs. This may be achieved through reviews and updates of the Support Guide and/or ISP.

Extra Staffing Support

- The SCD consultant coordinates and prepares a recommendation for extra staffing support based on information in the completed Support Guide (or equivalent) and the Individual Service Plan. The recommendation may include:
 - Information about the child and child care setting
 - Child's schedule of attendance
 - Child's recommended schedule of support
 - Capacity of the setting for shared support
 - Estimated costs
 - Start and review dates
- Additionally, the recommendation for extra staffing takes the following into consideration:
 - The goals for the child requiring the extra support
 - The needs of the children in the setting
 - The qualifications, skills and needs of the child care setting staff
 - The age of the child, given the following priorities:
 - Children up to age 6 who attend preschool for developmental reasons or whose parents are working and/or attending school.
 - Children age 6 – 12 who require before and/or afterschool care while the parent is working and/or attending school.
 - Youth aged 13 – 19th birthday, who require before and/or afterschool care while the parent is working and/or attending school, under exceptional circumstances.
- Extra staffing support is provided in one of the following ways:

- The program employs trained, qualified support workers who are assigned on an individual or shared basis taking into account the child's needs, environmental needs, cultural background and parent input where possible.
- The child care setting employs support workers for individual or shared support taking into account the child's needs, environmental needs, cultural background and parent input where possible. The program reimburses the child care setting for the actual costs of the support worker.
- The parent employs a support worker and assumes the responsibilities of an employer. The program reimburses the parent for wages and benefits of the support worker.
- The Government Master Insurance Program (GMIP) is extended to support staff employed by the program, child care setting or parent.
- Extra staffing support may be provided during periods of school closure, i.e. spring, summer and winter vacations as well as professional development/administrative days.
- Children and youth are not eligible for extra staffing supports during school hours. Exceptions may be made on an individual basis if the child or youth is temporarily unable to attend school for medical reasons or if a plan is under development for a transition to their school program.

In own home

- The program may provide SCD supports and services, including staffing supports, to the child in his or her home under the following conditions:
 - Parents are employed and/or attending school, and;
 - All other alternatives have been exhausted, and;
 - The ISP outlines strategies and outcomes that demonstrate moving to greater inclusiveness, peer interaction and social-skill development, and;
 - One of the four following criteria are met:
 - The child has significant medical issues and is considered medically fragile or;
 - The parents work non-traditional hours and child care is not available for those hours or;
 - The child is a youth aged 13 to 19th birthday (inclusive) or;
 - There are no licensed or regulated child care programs in the broader community served by the program.
- Parents are responsible for paying a portion of the cost, based on the equivalent of the cost of child care, when care is provided in their own home.
- Once a determination has been made to provide services in the child's home, services are reviewed every three months and are driven by the needs of the child and available community resources.


Cross-boundary coordination

- Where the child lives in one community but accesses child care in another

community:

- The program that supports the child care setting provides SCD consulting services and is responsible for completing the Support Guide and ISP and determining if extra support staff is required.
- If extra support staffing is required, the program will request funding from the SCD program that serves the child's community of residence.
- The home community SCD program will provide funding in accordance with its resources; if there is a waitlist, the Waitlist Priority Rating Scale, or equivalent, is utilized to prioritize service requests.

Coordination with Nursing Support Services

- The SCD consultant is aware of the mandate of Nursing Support Services and how to access NSS in the community.
- The SCD consultant is familiar with and follows the recommended practices outlined in *Working with Children and Youth Who Require Nursing Support: A Manual for Child Care Providers* (revised December 2010), available at www.partnershipproject.bc.ca. 
- The SCD program refers to NSS when a child who is eligible for SCD has a chronic or medically complex health care need.
 - Eligibility for NSS does not necessarily indicate eligibility for SCD.
- If the NSS coordinator determines that the child requires nursing tasks that may be delegated to a non-nurse caregiver, the SCD staff participates in the delegation process:
 - The SCD consultant provides information.
 - The Support Worker participates in training, demonstrates competence in performing the task, and delivers care in accordance to the individual health care plan.
 - The SCD consultant and the Support Worker communicate with the parents and NSS coordinator any concerns regarding the care plan and participate in updating the care plan as needed.
- In cases where NSS provides direct nursing care, NSS provides a nurse (RN or LPN) to assist the child in the child care setting. The nurse is responsible for meeting the child's health care needs while the child care staff (and Support Worker if applicable) are responsible for meeting the child's developmental and social needs.

Community Involvement and Education

- The SCD program informs the community of the program and provides education about the program's purpose and mandate.
 - SCD builds awareness of SCD programs in Aboriginal and multicultural communities to promote access to SCD.
- The SCD program helps build community awareness of and capacity for inclusion of children with developmental delays and/or disabilities.
- The SCD program provides formal training, in collaboration with other community

professionals where feasible, on topics such as:

- Effective strategies for inclusion
- Family-centred practice
- Disabilities and developmental delays
- Positive approaches to behaviour
- The SCD program is involved in related community coalitions and/or networking groups as available.

References

Working with Children and Youth Who Require Nursing Support: A Manual for Child Care Providers - www.partnershipsproject.bc.ca

Policy Statement #3: Determining Priority for Supported Child Development Supports and Services

Agencies contracted to deliver the SCD program determine priorities for resource allocation when funding is not available to fulfill the request for services at the time the request is received. Agencies track and prioritize unmet service requests and determine which services may be provided within available resources.

Outcomes

- The process of determining priorities is administered in a professional and ethical manner. Decisions are objective and defensible.
- Allocation of resources to children and families is fair and equitable at all stages of the process.
- The same principles and criteria for determining priority and managing requests for service are to be followed by all programs, providing a consistent approach.

Standards

- 3.1** The SCD program uses a transparent and consistent process to manage and prioritize requests for services.
- 3.2** Requests for service are prioritized based on the length that the child has been waiting for service, as determined by the service request date, and urgency of need.


Procedures

Transparent and consistent process

- The family is informed about the service prioritization process and principles.
- The date of referral and the date of request for service are documented.
 - All needed services are documented.
 - The date of referral means the date of initial contact between the family and SCD. The date of referral remains constant and applies throughout the province, should a family move to a new community.

- Individuals receive information at the time of initial referral for service regarding the range of services available and the limitations on service availability as well as their relative priority.
- Information about the process by which priority is assessed, including decision-making stages and procedures, as well as other relevant policies, is to be made available to individuals requesting service.

Assessing priority for support

- The SCD program uses the Waitlist Priority Rating Scale (WPRS) or an alternate reliable tool to consistently measure urgency of need and assign a priority rating of 'high' 'medium' or 'low' to the family/child. 
- The Waitlist Priority Rating Scale (WPRS) assesses the family's support needs based on six specific areas of consideration. The WPRS produces a numerical score (the priority score) that summarizes the family's need for support.
- Urgency of need is determined by a combination of:
 - The child's age, as it is known that the early provision of support contributes to better outcomes for children and families.
 - The first priority is to support children under age 6. When the child is attending a preschool program, the allocation of support hours is in accordance with local community standards for preschool participation. When the parents are working/attending school, the allocation of support hours is aligned with the parents' work/school schedule.
 - The second priority is to support children aged 6 to 12 whose parents are working or attending school and who require before or after school care.
 - Youth aged 13 to 18 may be served on an individual basis when the youth requires before or after school care and parents are working or attending school.
 - Level of family needs, considering the strengths of the family as well as external supports available affect how well they can manage until formal services are available.
 - Level of intensity and/or nature of child's needs, e.g. health and safety concerns, the effect of a delay in service on the child's development, and key transition points such as the move from pre-school to school.
 - Level of the child's needs in the context of the child care setting.
 - Observations/feedback from community partners, therapists and/or child care staff.
- Each program uses a single, comprehensive document to track all unmet SCD

service requests.

- The Local Advisory Committee is informed as to the number of children waiting for service, without identifying information.
- The waitlist records are reviewed a minimum of every three months to ensure that urgency ratings are updated and that the relative priorities reflect current need.
 - The family is contacted to determine if any factors related to their request for service and/or urgency of need have changed.
 - The family is informed of their relative priority.
 - The urgency rating is confirmed or adjusted.
 - The review date is documented, along with any changes, on the family file.
- Families may be requesting more than one service. When a new SCD service is put in place, the family's urgency rating and priority for service is reviewed.

Policy Statement #4: Supported Child Development Program Staff Qualifications

Agencies contracted to deliver the Supported Child Development program ensure that program staff have the skills, knowledge, and experience to deliver the program effectively and in accordance with the program's intent, principles, and goals.

Outcomes

- Children achieve their developmental goals as identified in their individual plans
- Primary caregivers have an increased knowledge of child development and growth and an awareness of the supports available.
- Child care settings have increased knowledge and skill to practice inclusion

Standards

- 4.1** The program funds qualified individuals to work as SCD Support Workers.
- 4.2** The program funds qualified individuals to work as SCD Consultants.
- 4.3** The program funds qualified individuals to work as SCD Program Coordinators to oversee the day to day operations of the SCD program.



Note:

- These procedures set forth the minimal qualifications for the roles of support worker, consultant and program coordinator, recognizing that capacity varies across communities.
- These procedures are not job descriptions.
- These procedures are not intended to replace, but augment, the organizations' job descriptions and qualifications.
- It is understood that a combination of relevant education and experience may serve to qualify an individual for a specific position.

Procedures

SCD Support Workers

- The minimum requirements for SCD Support Workers are:
 - Training in childhood development or equivalent, as indicated by the needs of the child/ren
 - One year of work experience in child care settings and/or recent experience working with children who require additional support needs.
- The preferred qualifications are:
 - Basic early childhood education training, or equivalent
 - Current Child Care Facilities and Licensing approved first aid certificate
 - Current BC License to Practice as an Early Childhood Educator
 - Three years work experience in inclusive child care settings
- Required Skills, Knowledge and Abilities:
 - Ability to develop and maintain a warm, caring, responsive relationship with the children.
 - Ability to establish and maintain supportive, collaborative relationships with families and setting staff.
 - Demonstrated ability to use a cultural safety framework when working with Aboriginal children, families and communities.
 - Ability to maintain a positive, professional, non-judgmental attitude.
 - Knowledge and skills in adult education

SCD Consultants

- The minimum requirements for SCD Consultants are:
 - Diploma in Early Childhood Education, or a related field; and,
 - Three years of work experience in inclusive child care including experience with community-based, multi-disciplinary services.
 - Current Child Care Facilities and Licensing approved first aid certificate
- The preferred qualifications are:
 - BA in early childhood development or a related field (e.g. child and youth care, psychology, social work, education) OR
 - Certificate in Infant Development and Supported Child Development (UBC)
- Required Skills, Knowledge and Abilities:
 - Knowledge of community child care resources and other community support services
 - Demonstrated ability to use a cultural safety framework when working with Aboriginal children, families and communities
 - Knowledge of the strengths, needs and diversity of the communities served by the agency

- Demonstrated knowledge of family-centred service, early intervention, typical and atypical child development, family support and individual planning.
- Skill in administering formal and informal developmental assessment tools
- Knowledge and skills in adult education
- Ability to exercise independent judgement and initiative.

SCD Program Coordinators

- In addition to the preferred qualifications for SCD Consultants, the minimum requirements for SCD Program Coordinators are:
 - Three years experience in program administration, coordination and supervision in the social services sector.
- The additional preferred qualifications for the SCD program coordinators are:
 - Three years program management experience in the community social services sector with a demonstrated and in-depth working knowledge of SCD, child care, early intervention programs and services, applicable legislation and policies.
- Skills, Knowledge and Abilities:
 - Demonstrated teamwork, leadership and supervisory skills
 - Well developed planning, organizing, administrative and decision making skills
 - Ability to work effectively with program staff, Ministry staff, community groups and agencies
 - Demonstrated ability to use a cultural safety framework when working with Aboriginal children, families and communities
 - Strong conflict resolution skills

Policy Statement #5: Supported Child Development - Transitions

The SCD program provides support to eligible children through key transition points.

Outcomes

- Children and their families experience seamless transitions.
- Children achieve their developmental goals as identified in their individual plans

Standards

- 5.1 The program supports eligible children who will be transitioning from the Infant Development program (IDP) to SCD.
- 5.2 The program provides support to the child and parent(s) when a new SCD consultant or a new SCD support worker is assigned.
- 5.3 The program provides support and assistance to the child and parent(s) when the child and parent(s) move to a new SCD program.
- 5.4 The program collaborates with the parent(s), child care provider and school district personnel when the child transitions to kindergarten.
- 5.5 The program provides support when the child is leaving the SCD program.

Procedures

Transitions from IDP

- The SCD program accepts referrals from the Infant Development program (IDP) up to six months before the point of transition, when the IDP file may be closed.
- In collaboration with the IDP consultant, the SCD consultant may assist with arranging visits to a child care or other community setting, and accompany the parent to the new setting.
- The SCD consultant ensures that the intake process takes place, as per the eligibility policy and standards for SCD.

- The program ensures that files and reports are up-to-date, and includes a summary

report with follow-up recommendations.

New SCD support worker or consultant

- The current SCD program provides the Support Guide, individual service plan and other relevant information to the receiving SCD program, accompanied by written consent from the parent to do so.
- The receiving SCD program completes the intake process in accordance to internal procedures and in compliance with provincial policies and standards.
- The waitlist management policy and standards apply when families move from one community to another.
- Where extra staffing supports are currently provided, the parent is informed as early as possible of the projected availability of extra staffing supports through the receiving program.
- As part of the transition planning for the child, the original SCD program works collaboratively with the parent and receiving SCD program to determine:
 - the cost of the support services required
 - the capacity of the receiving community to cover the cost of these support services, and
 - a mutually agreed upon method of either transferring funds or continuing payment for transition period of up to three months.

Transition to Kindergarten

- In order to facilitate the transition to kindergarten, SCD consultants:
 - Provide information about transitioning to kindergarten to parents, up to one year prior to transition;
 - At the parent's request, and with written consent, contacts school district personnel to share information about children transitioning to school and to create transition plans that may include observations and meeting with parents and child care staff;
 - May complete a developmental assessment of the child to inform planning on the part of the school district, and;
 - Provide written and/or oral reports to school district staff, as required, with the written consent of the parent.

Leaving the SCD program

- The SCD program provides information about – and facilitates referrals to – appropriate, relevant services and resources to the child and family, when SCD is no longer needed or the child is no longer eligible.

- The SCD consultant may provide written or oral information to new service providers, with the written consent of the parent.
- The SCD consultant provides any required information to Community Living BC or any other relevant program when the child leaves the program with the written consent of the parent.

Policy Statement # 6: Supported Child Development Services to Aboriginal Children and Families

Agencies delivering SCD programs demonstrate a cultural approach to serving Aboriginal children, families and communities. SCD programs work collaboratively with Aboriginal SCD programs where those programs exist.

Outcomes

- Children and families receive culturally appropriate services
- Child care providers have enhanced ability to provide culturally appropriate services

Standards

- 6.1** The program adopts a cultural safety and a holistic approach to services for Aboriginal children, their families and communities.
- 6.2** The program provides culturally-relevant services to Aboriginal children and families.
- 6.3** The program partners with Aboriginal communities and organizations to further strengthen their capacity to deliver services to their peoples, recognizing that provision of services is a shared responsibility.

Procedures

- Staff of programs that are providing services to Aboriginal children and families are:
 - Sensitive to the history and unique resiliency of Aboriginal peoples
 - Open to learning and sharing about cultural diversity
 - Open to learning and sharing about cultural safety
 - Aware of Aboriginal history, Aboriginal family systems, and the local Aboriginal communities.
- The SCD program uses a cultural approach that includes serving the Aboriginal child in the context of the family as a whole and within the child's community. This holistic approach:
 - encompasses the physical, emotional, spiritual and mental aspects of the child and family;
 - involves the whole family unit;
 - includes culture, traditions and language specific to the family, community

- and Nation;
 - focuses on a strengths based approach, and;
 - is sensitive to the history and unique resiliency of Aboriginal peoples
- SCD consultants participate in training and professional development opportunities to improve their understanding and knowledge of Aboriginal cultures and worldviews.
- When supporting Aboriginal children, SCD consultants and support workers utilize resources and materials that are relevant to the children's culture and family.
- The importance of relationships is acknowledged with adequate time spent on building relationships between children, families, community partners, and Elders.
- SCD programs collaborate with other Aboriginal services in the community when there is no ASCD program.

Shared responsibility

- The SCD program is responsible for providing services to Aboriginal children where ASCD is not available.
 - In communities with both SCD and ASCD, the SCD program works with the ASCD program to develop a protocol agreement which guides referral procedures, processes for collaboration and communication, and allocation of extra staff and supports.
- Aboriginal families may choose to receive services from SCD even though there may be an Aboriginal SCD program available.
- Enhancing the capacity for Aboriginal organizations to deliver ASCD to the Aboriginal community is a shared responsibility among the SCD programs, Local Advisory Committees, and Aboriginal communities and programs.
 - Process are in place to ensure exchange of skills, knowledge and expertise between Aboriginal and non-Aboriginal agencies and service providers.
 - Aboriginal staffing capacity is strengthened by supporting the training of Aboriginal people for the SCD program.
- Every attempt should be made to recruit and train required staff in rural and remote areas (including Aboriginal-specific mentoring, apprenticeship, practicum and bursary/grant support) to increase recruitment and success of Aboriginal candidates in rural, remote and isolated areas.

References

- *Aboriginal Supported Child Development Guidelines Manual*, M. Greysmith, 2010
- *Steps in the Right Direction: Connecting & Collaborating in Early Intervention Therapy with Aboriginal Families & Communities in British Columbia*. A. Gerlach, 2007



Policy Statement #7: Supported Child Development Local Advisory Committee

The program establishes and maintains a Local Advisory Committee that includes parents and other community partners.

Outcomes

- Parents and community partners have a voice in guiding and supporting SCDP through Local Advisory Committees.

Standards

7.1 The program is advised by a Local Advisory Committee that acts as an advisory body that guides and supports the SCD program in the delivery and ongoing development of SCD services.

Procedures

- The Local Advisory Committee provides community input into the development of organizational procedures and practices in accordance with best practices.
- The Local Advisory Committee provides support, advice and direction to the SCD for overcoming challenges and achieving the mandate of the program.
- Membership of the Local Advisory Committee reflects the diversity of the local community, including but not limited to culture, abilities, and socio-economic status.
 - Parental participation is necessary for a strong and responsive Local Advisory Committee.
 - The membership includes professionals and community partners such as public health, child care providers, Early Childhood Development agencies, paediatric therapist, school district, MCFD, etc.
 - Membership is reviewed and confirmed annually, at minimum.
 - Members of the Local Advisory Committee assist the agency to recruit new members in accordance with this standard.
- The Local Advisory Committee works with the program to promote equitable funding and to address gaps in service for eligible children.
 - Members of the Local Advisory Committee are guided by the principles of the SCD program.
 - Members are aware of and compliant with the organization's conflict of interest guidelines.
 - The Local Advisory Committee is aware of and supports the agency's

quality assurance requirements, methods and performance.

- The Local Advisory Committee seeks to increase local awareness of SCD, Early Childhood Development, and/or services for children with special needs.
 - The Local Advisory Committee enables information sharing across programs and services for young children and their families.
 - The Local Advisory Committee works collaboratively with community groups such as early childhood development committees, Aboriginal early childhood development committees, local Aboriginal communities and other Local Advisory Committees that may exist in the community.
 - Where feasible, the Local Advisory Committee for the SCD may be a joint Local Advisory Committee that meets the needs of two or more programs with complimentary scopes, such as the Infant Development Program.
- The committee is flexible and responsive to meet community needs and program priorities.
 - The Local Advisory Committee meets every three months or in accordance to community needs.
 - The committee is not a decision-making body.

Policy Statement #8: Administration of Supported Child Development

Agencies contracted to deliver SCD ensure effective program management, integrity, and accountability.

Outcomes

- The program is administered in a professional and ethical manner.
- Decisions are objective and defensible.
- Allocation of resources to children and families is fair and equitable at all stages of the process.

Standards

- 8.1** The contracted agency has conflict of interest policies that identify and address potential conflicts of interest for staff and members of the Local Advisory Committee.
- 8.2** The program has a financial management system and procedures that enables support funding decisions to be made in a timely manner, manages risks and allows the program to maximize its resources.
- 8.3** The organization has written procedures for determining, allocating and managing funding for extra staffing supports.
- 8.4** The program promotes ongoing professional development and performance enhancement for staff.
- 8.5** The program provides or enables access to regular / ongoing clinical consultation/supervision.
- 8.6** The program has a transparent and consistent process for managing complaints and appeals that is consistent with their contract with MCFD and, where applicable, accreditation standards.
- 8.7** The organization maintains an up-to-date lending library.
- 8.8** The program assists parents and child care providers to identify and address barriers to participation in fully inclusive early childhood development opportunities that meet the needs of the child and family.
- 8.9** The program adheres to a quality assurance framework that includes continuous quality improvement.
- 8.10** The SCD program develops and maintains protocol agreements with key partners.

Procedures

Conflict of interest

- Conflicts of interest are identified and either eliminated or managed in an open and transparent manner.
- The program manages conflicts of interest where the organization both delivers SCD and operates a child care setting in which SCD is provided.

Financial management

- The financial management system provides financial oversight of the day-to-day operations and is embedded in the contracted agency's overall financial system.
- The program has a risk management plan that identifies and addresses the risks associated with dispersing funding for extra staffing supports.
- The SCD program prepares and adheres to an annual operating budget that best meets the needs of the children served, with regular reviews of expenditures against the budget in order to maximize the utilization of resources.
- Child-specific and total budgets for support funding are reviewed and revised, in conjunction with program reviews of the supports needed for each child/child care program.
- A written contract is required when the organization contracts with a child care program/provider or family for provision of extra support staff. It is recommended that the organization use the *Service Agreement Resource Package*, or equivalent, to guide this process.



Professional development

- SCD consultants have access to resources regarding best practices and current trends in child care, child development, early intervention services and supports for children with special needs and inclusion. Resources may include, but are not limited to:
 - Print materials
 - Electronic materials
 - Peer to peer networking
 - Training opportunities
- Clinical consultation/supervision may be provided in a variety of means, depending on the community and agency structure.

Complaints and appeals

- The program informs parents of a child who is not eligible for the SCD program of the reasons why he/she is not eligible and of the process by which the eligibility decision may be appealed.
- The organization informs the parents of the level of support that the child is eligible to receive and of the process by which this may be appealed if the parent disagrees with the determination.

Lending library

- The lending library contains a range of resources to meet the needs of children with developmental delays or disabilities and their families and that reflect diversity of cultures, families, and abilities. The resources may include:
 - Toys and equipment that promote fine and gross motor skills
 - Children's books and puzzles
 - Books, videos and DVDs on a range of topics, such as:
 - Specific disorders
 - Child development
 - Communication
 - Curricula
 - Child Care
 - Grief and loss
 - Early intervention
 - Family centred practice
 - Inclusion
 - Aboriginal
 - Multiculturalism
 - Deaf culture and sign language
 - Medically fragile children
- Parents, child care providers, and community partners are able to access materials from the lending library at no charge.
- Where feasible, the program develops and maintains a lending library in partnership with other community resource libraries.

Addressing barriers

- Barriers to participation may include:
 - Financial (e.g. child care space fees)
 - Schedules for work or school may be incompatible with child care provider hours of operation
 - Lack of child care space
 - Lack of trained, experienced staff at the child care setting

- Lack of qualified support workers
- Unavailability of child care staff or support worker of the child/family's culture and/or language
- Transportation
- Family circumstances (e.g. teen parents, single parents, grandparents caring for grandchild)
- Lack of awareness of SCD and its benefits
- Suggested strategies to address access barrier and service voids include:
 - SCD program and all staff are familiar with all possible community resources
 - Local Advisory Committees have inclusive membership that represents the cultural diversity of the community
 - The SCD and Local Advisory Committee work with other community groups to address key barriers

Quality assurance

- The SCD program identifies desired outcomes and related goals/objectives and measures for the program and in relation to what children/families and child care settings wish to achieve through working with the program.
- The SCD program completes annual evaluations to measure achievement of these outcomes. These evaluations include feedback from parents, child care providers, and other stakeholders.
- The SCD program develops quality improvement plans based on the findings of the annual evaluation and review of annual statistical information.
- Accredited agencies meet the standards of the accrediting body and remain in good standing.
- The SCD program maintains program statistics for quality assurance purposes and for monthly SIRF reporting to MCFD.
 - The SCD program gathers demographic information from families, such as their language preference, and when volunteered, culture, faith, etc, as needed in order to provide responsive services that best meet the families' needs.
 - The SCD program maintains records of the number of children deemed eligible and ineligible, and notes the reason(s) for ineligibility, along with statistics pertaining to types and levels of services provided.

Protocol agreements

- The program develops and maintains protocol agreements with neighbouring SCD programs, where applicable, to simplify cross-boundary access to SCD services.
- The SCD program develops and maintains protocol agreements with school districts in which it provides services to address service provision for children delaying or transitioning into kindergarten.

- The SCD program develops and maintains protocol agreements with Aboriginal SCD programs in the community, where applicable, in order to ensure that children and families who are Aboriginal have the opportunity to receive services from a culturally relevant program.

References



Examples of protocol agreements can be found in the *Aboriginal Supported Child Development Guidelines Manual* (2010.)

Appendix 1: Glossary

- **Aboriginal Community** means Aboriginal families, service providers, organizations, social programs and agencies, non-profit societies, authorities and councils.
- **Aboriginal Child** means a child living on and off reserve, status and non-status, Metis, First Nations, and Inuit, and includes those children who self-identify as Aboriginal.
- **Cultural Safety Framework** means being aware of and examining and understanding the historical power inequities, individual and institutional discrimination, colonization and relationships with colonizers, as they apply to working with Aboriginal children and families.
- **Child care** refers to settings where both learning and care occur for children while they are in the care of someone other than a parent. Child care may include licensed child care services (preschools, group child care centres, family child care and out of school care) and registered license not required settings. In some cases, SCD may provide supports for in-own-home child care.
- **Conflict of Interest** means a situation in which an individual or organization has a real or perceived ability to exploit a professional or official capacity in some way for their personal or organizational benefit.
- **Developmental delay or disability** means that there is a lack of expected progress in one or more of the following areas:
 - Physical – child who is blind or visually impaired, has a neuro-motor or sensorimotor challenge or a special health care need
 - Cognitive – child who has an intellectual delay or disability
 - Communicative – child who is deaf or hard of hearing, or has significant language and speech challenges
 - Social/Emotional/Behavioural – child who has severe social, emotional, or behavioural challenges. Severe behaviour is defined as: behaviour which is dangerous to self and to others; extremely disruptive behaviour which is consistent and persistent over time; behaviour which is serious enough to be known to other community agencies and to warrant intensive interventions by other community agencies.
- **Extra support** means the additional support a child needs in a child care setting because of a documented developmental delay or disability in one or more of the following areas: physical, cognitive, communicative, social/emotional/behavioural. Extra support may include strategies, adaptive equipment, training or additional staffing support.

- **Local Advisory Committee (LAC)** means a committee at the community level that provides direction to the Supported Child Development program and agency. Parents, community members, and professionals are members of this committee.
- **Parent** is defined in accordance with the Child, Family and Community Service Act and means:
 - The mother of a child
 - The father of a child
 - A person to whom custody of a child has been granted by a court of competent jurisdiction or by an agreement, or
 - A person with whom a child resides and who stands in place of the child's mother or father but does not include a caregiver or director
- The SCD **Support Worker** is the individual who provides the extra staffing support to a child care centre, in order for a child with extra support needs to fully participate in the child care setting. The Support Worker works as a team member with child care setting staff and with all the children and families providing general support to the whole program to ensure effective inclusion of the child.
- The SCD **Consultant** is the individual who provides information to families on matters directly related to Supported Child Development, and offers support and assistance in choosing a child care setting, if the child is not already in such a setting. The consultant determines eligibility and the range and level of supports required to promote inclusive child care.
- The SCD **Program Coordinator** is the individual who oversees the day-to-day program operations of the SCD program, and provides planning, coordination, administration, and supervision of SCD for the SCD agency.