Policy Advice Discussion Paper: Supporting the Inclusion of Children with a Disability in Mainstream School Age Childcare

**January 2021**

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# Executive Summary

Underpinned by the **Childcare Support Act 2018**, the **National Childcare Scheme** is the first statutory entitlement to financial support for school age childcare for eligible families. The NDA welcomes this measure, particularly in light of the challenges presented by lack of affordable childcare to families of children with a disability, and the continued need for childcare for some older children with a disability, even in their teenage years. However, the NDA notes that additional supports to enable children with a disability to access the school age childcare element of the **National Childcare Scheme** are not currently available.

There have been some positive developments in this space, including the recent publication of the **National Quality Guidelines for School Age Childcare** which recognise the need for inclusion and inclusive practices in mainstream school age childcare settings. Research undertaken by the NDA on the inclusion of children with a disability in school age childcare settings, presented Appendix B of this paper, reveals that the National Quality Guidelines align with many best practices in disability inclusion.

However, the NDA recommends that the Department of Children, Equality, Disability, Integration and Youth considers developing a supplement to the National Quality Guidelines, with an explicit focus on the inclusion of children with a disability. The NDA further advises that the effective implementation of the National Quality Guidelines will require the development of a comprehensive model of supports to empower school age childcare providers to deliver inclusive experiences. Promoting and supporting an inclusive culture within mainstream school age childcare settings for children with a disability requires not only inclusive guidelines, but also a variety of universal and targeted supports. These include educational and capacity-building initiatives, such as the provision of training, and expert advice and mentoring, to childcare practitioners on the inclusion of children with a disability.

The NDA notes that there has been much progress in the early learning and care context, where an effective model of supports, known as the **Access and Inclusion Model** (AIM), is available to enable children with a disability to access the **Early Childhood Care and Education** programme. The AIM programme has played an instrumental role in supporting the inclusion of children with a disability in mainstream early learning and care settings. In the absence of additional supports in the school age childcare context, there is concern that children with a disability, and their families, may not benefit from the statutory **National Childcare Scheme**.

The NDA believes that mainstream school age childcare providers, catering for children without disabilities, should also support and include children with a disability within their settings. The NDA advises that a similar programme to AIM can be adopted and implemented in school age childcare settings, an approach which would benefit from the learning and structures already in place for the early years sector.

This discussion paper presents the research evidence, albeit limited, on inclusive school age childcare services and outlines the learning for Ireland regarding the development of a model of universal and targeted supports to enable the effective inclusion of children with disabilities in school age childcare services. To this end, the NDA examined the barriers to accessing school age childcare services, the benefits of inclusive services and the features of an inclusive system for children with a disability.

The literature review revealed that families of children with a disability encounter both general and unique barriers to accessing appropriate, inclusive school age childcare. The lack of availability of inclusive services can adversely impact the employment prospects and choices of parents. The research also highlights the benefits of inclusive school age childcare for children with disabilities, including developmental gains, especially in the areas of communication, and social and motor skills. The benefits of inclusion also extend to childcare practitioners, children without disabilities and the families of children with disabilities, not least in terms of greater employment opportunities for the latter.

The ten identified features that can support the development of a model of an inclusive school age childcare system for children with a disability were as follows:

1. School age childcare services have an inclusive ethos
2. School age childcare services effectively communicate and collaborate with families of children with disabilities
3. School age childcare settings provide environments that are universally designed where children with disabilities can socialise and interact with peers without disabilities
4. School age childcare services have adequate staff-child ratios to ensure the inclusion of children with disabilities
5. School age childcare settings are physically accessible and usable by children with disabilities
6. School age childcare services adapt their activities and structure, and provide supports, to ensure the equal participation of children with disabilities
7. School age childcare professionals have positive attitudes and the necessary skills to facilitate the effective inclusion of school age children with disabilities within mainstream childcare settings
8. School age childcare managers are committed to the inclusion of children with disabilities within their settings and have effective staff management practices
9. Technical and professional assistance and information is available and provided to school age childcare services (such as expert advice and support on use of Assistive and mainstream technologies for alternative communication and mobility)
10. Children with disabilities receive continuity of care across care settings with effective inter-agency partnership and cooperation across such settings

In appraising the Department of Children, Equality, Disability, Integration and Youth’s current approach, this paper identifies the infrastructure which exists and supports the inclusion of children with disabilities in childcare, including school age childcare, and in education, where relevant (Appendix A). These building blocks include the aforementioned AIM programme and the **National Quality Guidelines for School Age Childcare**, as well as complementary measures designed to achieve greater inclusion in the field of education. From its analysis, the NDA is of the view that much of the foundational infrastructure necessary to build a model of supports to enable children with disabilities to access mainstream school age childcare services is already in place, and could be developed and adapted for an older age cohort.

The NDA welcomes plans by the Department of Children, Equality, Disability, Integration and Youth to conduct an end-of-year-three evaluation of the AIM programme. This evaluation will provide key learning that could be applied to include children with disabilities in school age childcare. There is also a possibility that a recommendation could be made to expand AIM to school age childcare settings. However, the results of this evaluation and implementation of any subsequent recommendations will take time and there are children with disabilities of different ages, including older children who may require access to mainstream school age childcare now or in the near future. The NDA therefore advises that the Department of Children, Equality, Disability, Integration and Youth examines the evidence on the inclusion of this cohort of children with disabilities in mainstream school age childcare, and addresses any research gaps in this area, including by way of consultation with older children with disabilities.

The NDA advises that the Department of Children, Equality, Disability, Integration and Youth, in consultation with the Department of Education, commence work on agreeing a model of supports, including a funding component, that would enable access to the school age childcare component of the **National Childcare Scheme** for children with a disability.

# Introduction

## National Disability Authority

The National Disability Authority (NDA) is an independent statutory body with a duty to provide information and evidence-informed advice to Government and officials in the public sector on disability matters, and to promote Universal Design.[[1]](#footnote-1) This includes policy advice on the inclusion of people with disabilities in mainstream policies and services. The **Disability Act 2005** underpins the policy of disability mainstreaming, placing a statutory obligation on public bodies to support access to services and facilities for people with disabilities.[[2]](#footnote-2)

## Background

Under the auspices of the **Childcare Support Act 2018**, the **National Childcare Scheme** was launched in 2019. One of the two primary elements of the **National Childcare Scheme** is to provide an income-assessedsubsidy to families for school age childcare. The scheme is a welcome one, establishing a statutory entitlement to financial support for school age childcare for eligible families for the first time. This scheme was a key feature of the school age childcare model proposed under the 2017 **Action Plan on School Age Childcare**, developed jointly by the then Department of Children and Youth Affairs and Department of Education and Skills.[[3]](#footnote-3)

In addition to measures to improve the affordability of school age childcare, the NDA recognises that initiatives are ongoing to build other essential components of the model envisioned under the 2017 Action Plan. Notable achievements to date include the mandatory registration of school age childcare providers participating in the **National Childcare Scheme** with Tusla, a requirement introduced in 2019.[[4]](#footnote-4) Furthermore, the Minister for Children, Equality, Disability, Integration and Youth published **National Quality Guidelines for School Age Childcare Services** in September 2020.[[5]](#footnote-5)

However, while acknowledging both progress to date, and that the proposed model is still in the early stages of development, the NDA underlines the importance of recognising and supporting inclusion as a core principle of Ireland’s publicly-supported mainstream school age childcare system. In this regard, the NDA notes that additional supports to enable children with a disability to access the school age childcare element of the **National Childcare Scheme** are not currently available. This stands in contrast to the State-funded early learning and care scheme, where an effective model of supports, known as the **Access and Inclusion Model** (AIM), is available to enable children with disabilities to access the **Early Childhood Care and Education** (ECCE) programme.

The 2017 **Action Plan on School Age Childcare** commits the Department of Children, Equality, Disability, Integration and Youth (the former Department of Children and Youth Affairs) to commissioning research on best practice in the provision of inclusive school age childcare services, to include children with disabilities. However, this research has yet to be progressed, despite an initial deadline for completion of December 2018. Additionally, the **First 5 Strategy** requires the Department of Children, Equality, Disability, Integration and Youth to undertake an end-of-year-three evaluation of the AIM programme and, subject to evaluation findings and other relevant developments, consider enhancements to and extension of AIM to all school age childcare services.[[6]](#footnote-6) This review is due for completion by the end of 2021.

While the NDA considers that any review of AIM would be relevant to discussions on developing inclusive school age childcare services, it is also the case that the childcare needs of older, school age children with disabilities may be different to younger children accessing early learning and care services. Further, early learning and care services and school age childcare services serve different purposes. The main purpose of school age childcare services is both to care for children outside of normal school hours and to promote their development. While this can include an educational component, this is not a requirement, and the primary focus is on play, rest and recreation. By contrast, education is core to the delivery of early childhood education and care services (in addition to the objectives of promoting children’s development and providing care).

The NDA therefore carried out a literature review on inclusive school age childcare services with a view to identifying relevant findings and learning for the Department of Children, Equality, Disability, Integration and Youth on supporting children with disabilities to access school age childcare services which fall within the scope of the **National Childcare Scheme**. The NDA also identifies elements of an inclusive childcare infrastructure which are already in place, and makes a number of recommendations regarding the measures necessary to create a more inclusive mainstream school age childcare system for children with a disability.

Appendix A provides further background information on the:

* Different definitions of ‘school age childcare’ in Irish law and policy
* Reforms introduced by the **Childcare Support Act 2018**
* Policy background on the inclusion of children with a disability in school age childcare services
* Relevant domestic and international legal standards relating to the inclusion of children with a disability in mainstream school age childcare services
* Impact of the **Access and Inclusion Model** in supporting the effective inclusion of children with a disability in early learning and care settings

# Methodology

The literature review was based on searches on inclusive school age childcare, out-of-school care and afterschool care for children with a disability. The following databases were consulted:

* Pubmed
* SocIndex
* Applied Social Sciences Index and Abstracts
* Google Scholar
* Google (for grey literature)

A mixture of keyword terms and index terms were used for the following concepts: “inclusive school age childcare”, “school age childcare for children with disabilities”, “inclusive after school care”, “after school care for children with disabilities”, “inclusive out-of-school care” and “out-of-school care for children with disabilities”. For Google and Google Scholar, the following keyword searches were used: ("after school" OR "out of school" OR school) AND care AND (“disab\*” OR “impair\*” OR “mental\*” OR “deaf” OR “blind” OR “autis\*” OR “learning difficult\*” OR “inclus\*”).

The relevant literature, while limited, was predominantly found in studies from the United States of America, along with a number from the United Kingdom. This literature was subsequently appraised in light of the system and infrastructure currently in place for school age childcare in Ireland, with a view to developing recommendations for the creation of a more inclusive school age childcare system for children with a disability.

This review did not examine the costs associated with the placement of children with disabilities in inclusive mainstream school age childcare settings, nor did it examine funding models. These matters may merit further consideration, and the NDA is happy to engage with the Department on this.

# Findings and Learning

As part of the development of this discussion paper, and available at Appendix B, the NDA undertook a literature review focusing on three distinct issues, namely:

* The barriers to accessing school age childcare for children with disabilities
* The benefits of inclusive school age childcare services
* The features of an inclusive school age childcare system for children with disabilities

This section summarises the findings from the research evidence and sets out the learning for Ireland in relation to the development of a model to support the effective inclusion of children with disabilities in school age childcare services. In addition, the NDA identifies a number of existing initiatives, guidelines, supports and programmes, including those from an early learning and care and education context, which could be built on, or tailored to, an older cohort of children attending school age childcare services. This exercise reveals that much of the foundational infrastructure necessary to build a model of school age childcare inclusive of children with disabilities is already in place.

Following an assessment of published literature and the identification of existing structures for inclusive school age childcare services in Ireland, the NDA formulated a number of recommendations for the Department’s consideration under each sub-section. The NDA acknowledges that some of these recommendations will be achieved if the **National Quality Guidelines for School Age Childcare** are effectively implemented and resourced in a manner which is fully inclusive of children with a disability. In this context, the NDA is pleased to note that our research supports and reinforces much of the guidance outlined in the National Quality Guidelines, such as the need for effective communication between providers and families, for partnerships between providers and schools and for services that are responsive to the communities they serve, including children with a disability.

A specific advice segment for the Department of Children, Equality, Disability, Integration and Youth follows this section.

## School age childcare services have an inclusive ethos

### Findings and learning from the literature

* School age childcare services which are inclusive of children with disabilities have an inclusive ethos, and this ethos informs the design and delivery of services, the allocation of resources, management policies, classroom practice, and methods of working with families
* Services should develop a written inclusive ethos in conjunction with key stakeholders, including children with disabilities and their families, and which articulates the explicit goal of providing inclusive childcare that meets the needs of all children, including those with a disability
* An inclusive ethos should be underpinned by a written plan of how the service will meet the needs of all children in practice, including how the programme intends to modify activities, the role of staff and staff development, and methods for monitoring and evaluating
* Services should actively communicate their inclusive ethos to staff, families and children
* All written policies and procedures should reflect the values and goals of inclusive school age childcare
* Ongoing evaluation, involving staff, children, families and other services or professionals engaged in the delivery of programmes, is key to ensuring that services are inclusive

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

The National Quality Guidelines for School Age Childcare Services stipulate that a written ethos reflecting the vision, aims, objectives and principles of the service should be developed, and this ethos should underpin and guide all aspects of policy, procedure and practice. The National Quality Guidelines provide that the ethos should be representative of the diversity of the service and the community, and form the basis of practice through which policies and procedures promote positive interactions and relationships between staff and children; between parents and families; between staff members; and between staff and management.

According to the National Quality Guidelines, the manager should regularly review and update the written ethos, and such reviews should be carried out in collaboration with staff, parents, children and other stakeholders as necessary, for example schools. Furthermore, the National Quality Guidelines advise that services ensure that all stakeholders, including children, parents and staff, are aware of the ethos of the service.

The National Quality Guidelines also state that policies and procedures should be drawn up in consultation with staff, parents, children and others where necessary, and these should be underpinned by the written ethos. Such policies and procedures should be reviewed on a regular basis, at least annually, and a system should be in place to alert staff and parents to same.

The National Quality Guidelines further direct services to develop a comprehensive Equality, Diversity and Inclusion Policy with the aim of supporting the participation of all children, regardless of their ability or disability. The National Quality Guidelines recommend that the Equality, Diversity and Inclusion Policy underpin all aspects of practice within the service and that staff promote culturally responsive and inclusive practices.

The National Quality Guidelines also address the issue of evaluation and appraisal. Guideline 1 provides that a system should be in place to ensure the quality development of the service, including systems to document self-assessment and quality improvement processes. In addition, the National Quality Guidelines provide that children, parents and staff should contribute to evaluations and reviews of the service and the programme of activities.

#### AIM programme

As part of the AIM programme, the Department of Children and Youth Affairs developed a national Diversity, Equality and Inclusion Charter for the early learning and care sector, along with Diversity, Equality and Inclusion Guidelines for Early Childhood Care and Education and an inclusion policy template. All pre-school settings participating in the ECCE programme are invited to sign up to the Charter by completing and publishing an Inclusion Policy in respect of their own setting. This ensures that each early learning and care setting has an explicit, visible and clearly documented Inclusion Policy articulating both its commitment to inclusion and the principles and practices underpinning that commitment.

#### European (National) Standard Design for All — Accessibility following a Design for All approach in products, goods and services — Extending the range of users 2019.[[7]](#footnote-7)

Extensive work has been conducted by NDA staff over a five year period in leading on the development of a European standard specifying requirements that enable an organization to design, develop and provide services including goods and products so that they can be accessed, understood and used by the widest range of users, including persons with disabilities.[[8]](#footnote-8) These requirements enables an organization to meet applicable statutory and regulatory requirements as related to the accessibility of its services as well as goods and products, The requirements and recommendations in this standard complements existing organisational management and operational processes in order to achieve accessibility outcomes. The standard defines the requirements in an order that is consistent with best practice in organisational planning and process management, i.e.:

* Understanding the context of the organization, the needs and expectations of interested parties, including people with disabilities, the integration of a Design for All approach within established systems and processes (Clause 4);
* Leadership, policy and responsibilities in support of a Design for All approach and the achievement of accessibility outcomes (Clause 5);
* The planning of Design for All objectives and how to achieve them (Clause 6);
* Organizing the support and other resources, including people and information needed to realize a Design for All approach and the delivery of accessibility outcomes (Clause 7);
* Operational processes related to meeting users’ requirements, including persons with disabilities, and developing products and services across the entire end-to-end chain, in accordance with the Design for All approach (Clause 8);
* Processes to monitor, measure, analyse and evaluate the effectiveness and correctness of the Design for All approach and its accessibility outcomes (Clause 9);
* The continuous improvement of the Design for All approach (Clause 10).

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines on school age childcare reflect the need for services to have an inclusive ethos following a universal design approach which seeks to meet the needs of all children, including those with disabilities
* That materials and guidance on Equality, Diversity and Inclusion are developed to support school age childcare settings
* That a draft Equality, Diversity and Inclusion Policy template is developed for school age childcare services
* The guidelines on school age childcare indicate that evaluation exercises should determine how well services are meeting the goal of inclusion
* That the guidelines apply and adopt the European standard “Design for All” in development of new guidelines that ensures that they the processes and procedures are inclusive

## School age childcare services effectively communicate and collaborate with families of children with disabilities

### Findings and learning from the literature

* Effective communication and positive working relationships between parents and providers play a pivotal role in ensuring that children with disabilities are effectively included within school age childcare settings
* Parents would like providers to regularly communicate with them regarding their child’s progress and any behavioural issues which may arise so that they can work on solutions together
* Childcare providers and practitioners may need to make additional efforts to maintain communication with a family where a child is not as communicative as their peers, and should consider ways of creating effective communication channels between families, such as through the provision of orientation
* Some providers have reportedly dismissed children with disabilities from childcare programmes without sufficient and prior communication or problem-solving efforts with families
* Parents play an important role in ensuring the successful inclusion of their child in a care setting by sharing information with practitioners which enables them to understand the family context and to learn about the needs of each child
* Effective, ongoing and culturally-sensitive communication can build trust between families and providers, and in the case of children with emotional or behavioural issues, can enable both families and practitioners to deal with challenging behaviour in a more positive way
* Communication between childcare professionals and families, and vice versa, can sometimes be challenging. For instance, some providers experienced instances where parents were not forthcoming with information about a child’s behaviours and needs
* Effective collaboration between providers and families comprises the full involvement of families in the planning and delivery of their child's care, and childcare practitioners supporting families, including by referring families to relevant supports and resources in the community

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

Guideline 7 of the National Quality Guidelines places a particular focus on partnerships between providers and families. According to the Guidelines, a key component of such partnership is that management work closely with families, and value and encourage parental involvement. In addition, the National Quality Guidelines advise services to have a system in place to provide information to families on their child’s learning, development and well-being, and involvement in supporting the service within the community.

The Guidelines provide that an effective partnership with families should comprise the following elements:

* The service has an effective enrolment and orientation process for parents or guardians and families
* Parental involvement is central to the success of the service. Parental involvement is actively encouraged, and staff develop and maintain positive and responsive relationships with parents/guardians and families
* Parents or guardians contribute to, and are aware of and understand key policies, procedures and information about the service
* There is a policy to provide parents or guardians with information about their children. Staff ensure there are opportunities for formal and informal information sharing about children with their parents or guardians at the end of each day, as necessary and appropriate
* Parents or guardians are consulted about the level of homework support provided and are aware of the service’s homework support policy
* All staff familiarise themselves with the parents’ and families’ cultural and religious backgrounds and value and respect them

Guideline 2 also highlights the need for the development of systems which ensure that staff communicate regularly with parents or guardians and keep them informed of all matters concerning their child. In this regard, it is advised that staff should observe and record children’s experiences to inform programme planning. Similarly, Guideline 5 provides that staff should engage with parents or guardians and develop positive relationships with families, and that opportunities should be created to discuss interests and concerns.

The National Quality Guidelines also state that services should adopt a key person approach. The relevant key person within the service should build a unique relationship with each child for whom they are responsible, supporting transitions, and creating a link between the service, the child and their parents or guardians. According to the Guidelines:

* parents or guardians should be informed about the key person approach
* the key person, parents or guardians and children should work together to share information
* staff should engage in both formal and informal processes to share information on children’s learning and development with families

Guideline 7 outlines that childcare services should create an information board and/or on-line communication, which provides regular information on, for example, community events, policy updates, outings, parental information sessions and other information relevant to parents or families.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines for school age childcare providers detail ways of creating effective communication channels with families of children with disabilities
* That guidance is developed for parents, guardians and families about effectively communicating and collaborating with childcare providers and professionals

## School age childcare settings provide environments that are universally designed where children with disabilities can socialise and interact with peers without disabilities

### Findings and learning from the literature

* Children with disabilities need opportunities to interact with children without disabilities for a range of reasons, including to develop friendships, gain social skills and learn positive social behaviour
* Providers should make special efforts and design activities to promote interaction and friendships between children with disabilities and children without disabilities
* Childcare professionals may require training in how to promote positive interactions between children with and without disabilities
* There have been instances where parents of children without disabilities have expressed concerns about the inclusion of children with disabilities within school age childcare settings

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

Guideline 5 of the National Quality Guidelines centres on nurturing relationships and supporting interactions. The National Quality Guidelines state that staff should consistently promote and support positive and responsive relationships between children and their peers, and nurture peer relationships which support children’s overall growth and development. Linked to this, the Guidelines stipulate that staff should promote inclusive practices, and should plan and create opportunities to help children learn about equality, diversity, fairness and respect for others through their play, activities and interactions.

#### AIM programme

The main objective of the AIM programme is to provide the necessary supports to enable children with disabilities access mainstream early learning and care settings along with their peers without disabilities. The Inter-Departmental Group charged with agreeing a model that would support access to the Early Childhood Care and Education (ECCE) Programme for children with a disability could find no evidence in the published literature that children with disabilities in inclusive pre-school classrooms achieve lower outcomes than their peers in non-inclusive settings.[[9]](#footnote-9) The End of Year One Review of AIM also highlighted the benefits of peer-to-peer relationships for children with and without disabilities in inclusive ELC settings.

#### NCSE Policy Advice on Special Schools and Special Classes

The National Council for Special Education (NCSE) has been tasked with advising on the educational provision that should be in place for students in special schools and classes and making recommendations on the provision required to enable them achieve better outcome. As part of this policy advice, the NCSE is considering whether all students, irrespective of disability or need, are included in mainstream classes and the potential impact of such a change on the education of children with disabilities and their peers without disabilities. In its 2019 Progress Report, the NCSE’s initial analysis of the available research evidence indicated that the inclusion of all student within a mainstream class has either a positive impact or no impact on students without special educational needs.[[10]](#footnote-10) A final report is due to be published in 2020.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines for providers reflect the need for childcare professionals to actively promote and nurture peer relationships between children with disabilities and children without disabilities
* That ongoing training and support is available to childcare professionals to assist them in fostering positive peer relationships between children with disabilities and children without disabilities
* That childcare professionals effectively address any concerns raised by parents of children without disabilities about the inclusion of children with disabilities in their settings

## School age childcare services have adequate staff-child ratios to ensure the inclusion of children with disabilities

### Findings and learning from the literature

* Some children with disabilities may need individualised assistance and support to ensure their effective inclusion within school age childcare services, and additional staff members may therefore be required within certain settings
* Having adequate staff-child ratios is one of the variables for the successful inclusion of children with disabilities within school age childcare programmes
* Some parents feel that where one-on-one supervision is required and provided, children with disabilities can take advantage of multiple out-of-school programmes and opportunities, increasing their independence
* Factors requiring consideration in determining the appropriate staff-child ratios within school age childcare services include children’s age, mobility levels, developmental levels, behavioural challenges, communication abilities, and any other issues that might require additional support and services
* Some school age care providers believe that their staffing levels are not adequate to effectively care for children with disabilities and that they require additional financial resources or funding to pay for additional practitioners

### Existing infrastructure and relevant developments

#### Child Care Act 1991 (Early Years Services) (Registration of School Age Services) Regulations 2018

Regulation 9 of the **Child Care Act 1991 (Early Years Services) (Registration of School Age Services) Regulations 2018** provides that a registered provider of a school age service, other than a childminding service, shall ensure that there is a minimum ratio of one adult to twelve children at all times while the service is operating.

#### National Quality Guidelines for School Age Childcare Services

The National Quality Guidelines detail that school age childcare services must adhere to the minimum adult-child ratio specified in Regulations. The Guidelines also recognise that many services aspire to, or implement, a lower adult-child ratio. The Guidelines state that it is the responsibility of management to ensure appropriate staffing ratios are in place to guarantee safe supervision, supportive relationships and to support the programme of activities with the children.

#### AIM programme

Early learning and care providers can apply for additional capitation to fund an extra person in the classroom or to enable the reduction of the adult-child ratio under Level 7 of the AIM programme, where such a measure is critical to ensuring a child’s meaningful participation in the ECCE programme.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines reflect the need for services to reduce their staff-child ratio where necessary to ensure the meaningful participation and inclusion of children with disabilities in the school age childcare setting
* That funding for additional staffing support is made available to childcare services to enable a reduction of the staff-child ratio where necessary to ensure the meaningful participation of children with disabilities

## School age childcare settings are physically accessible and usable by children with disabilities

### Findings and learning from the literature

* School age childcare settings should be physically accessible and usable to all children, including those with disabilities
* The physical environment should allow maximum mobility, accessibility and usability in both indoor and outdoor spaces
* Ensuring that the physical environment is accessible and usable may entail the provision of features such as ramps, railings, wider doors and accessible bathrooms, but may also involve adaptations incurring no cost, such as arranging furniture in a way which ensures accessibility and usability and ensuring the environment is free of hazards
* Physical adaptations can become even more important for children with disabilities as they grow older
* Making appropriate physical adjustments to a service can incur a cost on school age childcare providers, which can sometimes be prohibitive
* School age childcare providers may need financial support to assist with the cost of making adjustments to the physical environment

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

Guideline 3 of the National Quality Guidelines states that the environment should be well maintained, accessible and adaptable. The Guidelines specifically state that the service should also take into account the following:

* The indoor and outdoor environments should be flexible and adaptable to support the interests, needs and abilities of all children
* Suitable number of accessible, separate toilet facilities should be provided
* The environment should be designed to respond to the different ages of children attending, providing space for younger and older children to engage in activities on their own or with friends or peers of similar or mixed ages as appropriate
* The design and layout should provide for ease of movement between the indoor and outdoor environments. Children should be consulted about the design and layout of the environment to ensure it meets their needs and interests

#### AIM programme

Funding is available to early learning and care services for capital grants towards minor building alterations under Level 5 of the AIM programme, where such alterations are necessary to support access and to facilitate a child’s participation in pre-school. According to the AIM Level 5 Capital Guidelines, eligible alterations can include:

* Minor alterations associated with access in or out of the pre-school setting
* Minor alterations associated with access to and from play areas
* Minor alterations associated with the reconfiguration of toilet and changing areas
* Minor alterations associated with the reconfiguration within the ECCE room to facilitate ease of access and quiet space

#### Universal Design Guidelines for Early Learning and Care Settings

These guidelines were published in June 2019 and set out the key Universal Design considerations and guidance for Early Learning and Care settings in Ireland.[[11]](#footnote-11) The guidelines apply to both new-build and retrofit projects, and provide a flexible Universal Design framework to ensure that settings are accessible, understandable and easy to use for all children, staff, families and visitors. However, while the focus of the UD Guidelines is ELC settings, much of the guidance is also relevant for school age childcare providers. Good design is good design, regardless of age size, ability or disability.

For instance, guidance on preparing the design brief from a universal design approach and reflecting on key design considerations are relevant not just to children attending ELC settings, but also to those attending school age childcare settings. Given that some ELC providers also provide care for school age children, the UD Guidelines also contain specific guidance on design features for children aged 6 to 14, as follows:

Considering the potential age range within the school-age group, careful design and flexible environments are required to support different developmental stages. Creating the right environment supports emerging independence, and the development of young people to their full potential. It provides security and opportunities for relaxation, along with activities, interactions and ongoing development in an appropriately designed environment. The location of the school-age service within a building is important. In certain circumstances an upper floor of the building will be considered suitable. Primary school children need space that appeals to their intellect, sense of fun and need for physical and mental exploration. It is helpful to provide a number of seating options to facilitate various social arrangements and this should be reinforced through a management approach which allows children and staff to adapt to the space.

Specific UD guidance for children aged 6 to 14 is as follows:

* The setting should be carefully located to provide more independence, space to relax, and opportunities to take part in activities or social engagement. This could be located on an upper floor
* The environment should offer choice and flexibility for school age children to influence layout
* Consider space for the storage of school bags and other personal items
* Provide storage for long term children’s projects
* Furniture and fittings should be suitable specifically for this age group
* Allow for storage space for children to work on long term projects
* Where possible, a separate entrance and dedicated access route to the school age room is preferred
* Create a distinct identity for the school age setting to distinguish it from the early years setting
* Provide access to a kitchen for cooking or baking purposes or a facility to prepare a snack or drink
* Provide dedicated, suitable size, toilets
* Provide a dedicated outdoor space that reflects the competency of older children and the higher-level of risk associated with play. Factor in skateboards, scooters and bicycles
* Consider how older children who use wheelchair or mobility aids can be enabled to physically challenge themselves[[12]](#footnote-12)

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That supplementary guidelines to the Universal Design Guidelines for Early Learning and Care Settingsbe developed, with a specific focus on Universal Design for School Age Childcare settings
* That funding be made available to school age childcare services to undertake minor building works where necessary to ensure the meaningful participation of children with disabilities

## School age childcare services adapt their activities and structure, and provide supports, to ensure the equal participation of children with disabilities

### Findings and learning from the literature

#### Services adapt their activities to ensure the equal participation of children with disabilities

* School age childcare settings should offer a range of activities that are appropriate to children of different ages, abilities, developmental levels and interests
* Services may need to modify or adjust their activities in order to ensure the full inclusion of children with disabilities
* Providers should make special efforts to provide age-appropriate activities to children with disabilities, and older children with disabilities should not be inappropriately placed in settings designed for younger children
* Children with disabilities may require access to assistive technology or specialised equipment in order to participate effectively in activities
* Children with disabilities are sometimes excluded from outdoor activities or activities in the community due to a number of factors, including lack of accessibility or lack of adequate staff for individualised supervision
* Services should develop activities and strategies which promote the social and emotional development of children with disabilities, including children with emotional and behavioural issues

#### Services adapt their structure and scheduling to ensure the equal participation of children with disabilities

* While older children tend to need less structure in activities and are more comfortable with flexible schedules, some children, such as children with autism, may still require structured activities and planned routines
* Some children with disabilities may need more time to complete an activity than their peers, and therefore services may need to make appropriate adjustments in scheduling

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

Guideline 6 of the National Quality Guidelines states that school age childcare services should provide a well-balanced, inclusive programme of activities for play, rest and recreational opportunities to support children’s health, well-being, learning and development, and to meet children’s individual and collective needs and interests. In this regard, all stakeholders, including children, should be actively involved in and consulted on planning experiences and activities that provide a balance between unstructured and structured time, where children are free to select activities of their choice and to play alone or with other children.

The National Quality Guidelines advise staff to work collaboratively with children and young people in developing a programme that is rich in experiences and opportunities that support the holistic development of all children, including wellbeing, communication and language skills, and their physical, social, emotional and cognitive development. The activities, opportunities and experiences offered should also cater for children of all ages and abilities. Furthermore, the National Quality Guidelines state that the programme of activities should comprise the following:

* There should be a daily and weekly routine, which is flexible and meets the needs of all children attending the school age service (Guideline 5 similarly states that staff should accommodate unexpected changes that may occur throughout the day, and adjust activities and the schedule to reflect the children’s and young people’s emerging needs)
* The programme of activities should be based upon the services’ ethos of inclusion, accommodating and reflecting the diverse nature of the families and children attending
* The programme of activities should take into consideration the individual interests and abilities of the children and the information gathered from parents
* The programme of activities should offer children opportunities to take risk and challenge them to explore new learning and develop new interests

Coupled with the foregoing, the National Quality Guidelines provide that a wide range of age-appropriate resources and materials should be made available, taking into consideration the mixed ages of children attending the service. This includes ensuring that:

* the equipment, furniture and resources in the environment are accessible and usable, well maintained and appropriate to the ages of the children attending
* the equipment and resources are accessible and usable by children of all abilities
* the resources and equipment reflect the diversity of children, including ability
* there are lots of natural and open-ended materials that allow children to engage in different types of play experiences
* there is a wide variety of additional resources and equipment to offer challenge and stimulate children’s exploration, thinking and curiosity

#### AIM programme

Funding is available to ELC settings to obtain special equipment and assistive technology for children with disabilities under Level 5 of the AIM programme. According to the AIM Level 5 Capital Guidelines, aids and appliances eligible for funding include:

* Portable ramps
* Specialised chairs
* Changing tables or nursing benches
* Hoists and slings
* Positioning supports
* Therapy-related items
* Gait trainers, standers and standing frames
* Play and learning materials
* Assistive technology and equipment for children who are deaf or hard of hearing or blind or visually impaired

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines require practitioners to consider the need for structured activities and schedules for children with disabilities, as required
* That guidelines reflect the need for childcare practitioners to consider whether activities, including outdoor activities and activities in the community, are accessible and usable by children with disabilities
* That funding is available to school age childcare services to purchase specialised equipment or assistive technology where necessary to ensure the meaningful participation and inclusion of children with disabilities

## School age childcare professionals have positive attitudes and the necessary skills to facilitate the effective inclusion of school age children with disabilities within mainstream childcare settings

### Findings and learning from the literature

* The extent to which children with disabilities are effectively included within school age childcare settings can depend on the attitudes and skills of practitioners

#### Childcare professionals have positive attitudes about the inclusion of children with disabilities in school age childcare programmes

* One characteristic of inclusive school age childcare programmes is that practitioners have positive attitudes about the inclusion of children with disabilities
* Some school age childcare services can be reluctant to include children with disabilities within their settings due to a lack of knowledge about the needs of children with disabilities, or concerns about the safety of other children, or the resources required to effectively care for such children
* The attitude of practitioners can impact the attitudes and perceptions of others, including children without disabilities and their families
* Attitudes towards inclusion improve when practitioners care for and work with children with disabilities
* Ensuring that practitioners are culturally competent and aware is important in terms of ensuring the inclusion of children with disabilities in services
* The provision of training, in particular disability awareness training, can improve the attitude of practitioners towards children with disabilities
* Such training should be ongoing, be developed in conjunction with children with disabilities and their families, and cover a range of topics including the needs of children with different disabilities and behaviour management

#### Childcare professionals have the necessary skills to facilitate the effective inclusion of children with disabilities within mainstream childcare settings

* Practitioners should have the necessary skills to facilitate the effective inclusion of children with disabilities within mainstream school age childcare settings
* Ongoing training and support for practitioners that goes beyond raising awareness and knowledge levels to imparting skills is required for inclusive childcare settings
* Childcare practitioners should be open to learning, training and change in order to increase the inclusion of children with disabilities
* Training in specific skills may be needed, including:
* sign language
* behaviour management
* administering medication
* developing individualised care plans
* promoting positive risk-taking
* promoting positive interactions between children with and without a disability
* best practice for working with children with specific disabilities
* modifying activities and the physical environment to ensure inclusion
* School age childcare providers may need technical assistance and support to provide training and improve the knowledge and skills of staff

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

Guideline 2 of the National Quality Guidelines requires that management ensure, on recruitment and selection, that all staff have appropriate values, attitudes and dispositions for working in the area of school age childcare. As per the Guidelines, services should seek to recruit suitably qualified staff that are able to offer diversity within the staff team, informed by their background, experiences and skills. In addition, staff should be equipped with the necessary skills, knowledge and qualifications to carry out their role and responsibilities.

Guideline 5 states that staff should promote inclusive practices, and that services should ensure that positive attitudes towards equality, diversity and inclusion are developed and encouraged. In this regard, the Guidelines encourage staff to challenge inappropriate practices and attitudes, and further advise both management and staff to encourage respect for individual children’s differences, and enable children to develop an understanding of themselves as being significant, respected and having a sense of belonging. Moreover, the Guidelines are clear that providers should be committed to providing accessible services to children with disabilities.

The Guidelines contain specific guidance on responding to children’s behaviour, including that:

* Staff are proactive in responding to positive and pro-social behaviours and model these behaviours in their interactions with children
* Staff ensure prevention strategies are in place to minimise conflicts and promote and develop social and emotional skills
* Staff encourage and facilitate children to resolve any interpersonal conflicts that may arise, to help them learn and practise appropriate problem solving strategies
* Staff plan individual intervention plans for children with persistent challenging behaviour by supporting developmentally appropriate skills, such as active listening, cooperation, conflict resolution and opportunities for children to act as peer supports and mentors
* Staff are supported in managing children’s behaviour through support, supervision and training where appropriate

One of the components of Guideline 4 is that the service has a clear policy and procedure in place for the administration of medication.

#### AIM programme

A number of training and skills development programmes are available under AIM. The City and County Childcare Committees deliver a national training programme on the Diversity, Equality and Inclusion Charter and the Diversity, Equality and Inclusion Guidelines for Early Childhood Care and Education. This non-mandatory training is available to all ELC managers and practitioners, and typically covers a range of topics, such as supporting the inclusion of children with disabilities in ELC settings. In addition, AIM Level 3 seeks to develop a qualified and confident workforce through a multi-annual training programme for pre-school practitioners, including Lámh training and Learning Language and Loving It and Teacher Talk – The Hanen Programme for Early Childhood Educators.

Furthermore, a dedicated higher education programme has been developed to provide training for childcare practitioners so that they can take on the role of Inclusion Co-ordinator within their settings. Inclusion Co-ordinators provide expert support and leadership in relation to access and inclusion within pre-school settings. The LINC (Leadership for INClusion in the Early Years) programme is a one year, Level 6 Special Purpose Award (Higher Education). A consortium led by Mary Immaculate College, Limerick, together with Froebel and Early Childhood Ireland, and funded by the Department of Education, developed the programme. It was developed with reference to best practice in leading the inclusion of children with additional needs in early years settings and prepares learners to adopt a leadership role so they can support other staff to plan for, implement and review inclusive practice.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines reflect the need for all childcare professionals to have a positive attitude about the inclusion of children with disabilities in their settings
* That all childcare professionals receive disability and cultural awareness training
* That training on the skills required to facilitate the effective inclusion of children with disabilities within mainstream school age childcare settings is available to childcare practitioners e.g. sign language etc.

## School age childcare managers are committed to the inclusion of children with disabilities within their settings and have effective staff management practices

### Findings and learning from the literature

* Inclusive services benefit from a manager who is committed to inclusion and who is proactive, visible, and well-qualified by either an educational background or professional experience to facilitate inclusion
* Managers who are committed to inclusion serve as role models and agents of change in their settings
* Managers can demonstrate their commitment to inclusion by, for instance, adhering to and building awareness of their inclusive ethos, recognising the expertise of family members, and recruiting staff committed to inclusion
* Effective managers recognise the essential role of staff in achieving inclusion and provide opportunities for training and development in order to build inclusion competence
* Managers of inclusive services tend to be closely involved in the day-to-day work of the centre, have a good knowledge of the children and their families, and appreciate the challenges that staff can face in their roles
* Creating a supportive work environment where staff can discuss the benefits and challenges of their work is important in building an inclusive service

### Existing infrastructure

#### National Quality Guidelines for School Age Childcare Services

Guideline 1 of the National Quality Guidelines for School Age Childcare Services provides as follows:

the success of the service is dependent upon having an effective, responsible and responsive management structure in place that ensures compliance with all applicable legislation, regulations and contractual requirements including in relation to health and safety, child protection and welfare, financial management, administration and human resource requirements.

The Guidelines state that a clear management structure should be in place that operates within the ethos of the service, and that a manager should have the necessary qualifications, skills and competencies to fulfil their role. They also advise that managers ensure, when recruiting and selecting new members of staff, that such individuals have appropriate values, attitudes and dispositions for working in the area of school age childcare. Guideline 7 further provides that managers should work closely with parents and guardians and should value and encourage parental involvement in the care of their children.

Moreover, the Guidelines emphasise the need for staff support, noting that all staff should be supported to create safe, caring, interesting and fun environments for children. They also advise that regular staff meetings should take place, and these should be recorded to ensure effective communication and to promote team development.

Guideline 2 focuses on the issue of professional development for school age childcare staff. It notes that services should have an effective system in place for identifying and supporting staff development needs, and that individual development plans should be in place to support staff with self-evaluation and reflection, ongoing professional development and continuous improvement. Similarly, the Guidelines state that staff themselves should be committed to accessing ongoing training, information and development opportunities.

#### AIM programme

ELC managers can avail of the training programme provided by the City and County Childcare Committees on the Diversity, Equality and Inclusion Charter and the Diversity, Equality and Inclusion Guidelines for Early Childhood Care and Education, and the qualification for recognition as Inclusion Co-ordinators.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines reflect the need for school age childcare managers to be committed to inclusion
* That training on inclusion is available to childcare managers
* That guidelines advise managers to provide opportunities for staff training and development in order to build their inclusion competence
* That supports are made available to management to provide opportunities and training for staff on inclusion

## Technical and professional assistance and information is available and provided to school age childcare services (such as expert advice and support on use of Assistive and mainstream technologies for alternative communication and mobility)

### Findings and learning from the literature

* Technical assistance, such as expert advice and support, should be available to school age childcare services in order to assist them in overcoming any barriers or challenges associated with the inclusion of children with disabilities within their settings
* It may be necessary for technical and professional assistance to be provided on-site in order to effectively guide staff in their settings
* Comprehensive information on the inclusion of children with disabilities within school age childcare services, and any supports to assist with same, must be available to providers

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

The National Quality Guidelines provide that staff and management should be involved with local and/or national professional networks or peer support groups, their City and County Childcare Committee and National Voluntary Childcare Organisations.

#### AIM programme

Under Level 4 of the AIM programme, ELC providers can access Better Start National Early Years Quality Development Service supports. Better Start offers a national service where specialists in early years care and education for children with disabilities can provide expert advice, mentoring and support. The degree of support offered by Early Years Specialists depends on the needs of the child and the pre-school setting. In some cases, it involves visiting the pre-school and developing an Individual Access and Inclusion Plan for the child within their pre-school setting, in conjunction with the parent and the pre-school provider. It may also involve liaising with HSE health and social care professionals to obtain their input and expertise.

Level 2 of the AIM programme centres on the need for current, consistent and accessible information for parents and providers, including what supports are available and how they can be accessed. In order to meet this need, a single, comprehensive information resource was developed in the form of a dedicated, national AIM website: aim.gov.ie. The AIM website is currently being redesigned.

#### National Childcare Scheme website

The website of the National Childcare Scheme provides information on the NCS, how to apply for support and the services which are participating in the scheme. It also has a tool which calculates the subsidy available to families in respect of school age childcare. Separately, there is programme information available for school age childcare providers.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That expert, onsite technical and professional support is available to school age childcare providers to assist with the inclusion of children with disabilities
* That a centralised source of information on the inclusion of children with disabilities within school age childcare services, and any available supports, is created

## Children with disabilities receive continuity of care across care settings with effective inter-agency partnership and cooperation across such settings

### Findings and learning from the literature

* Continuity of care across all relevant care settings, such as childcare, healthcare and education, is necessary to facilitate the effective inclusion of children with disabilities within school age childcare services
* Effective continuity of care requires partnership with and collaboration among care and education providers

#### Effective cooperation between childcare providers and schools

* Effective, ongoing communication and coordination between school age childcare providers and schools is important for inclusion
* Teachers or para-professionals working closely with children with disabilities can provide useful insights into effective strategies for including children with disabilities in care settings, and learning and behaviour management strategies
* Effective communication and coordination between schools and childcare services can provide opportunities to reinforce the developmental and learning goals that have been established for children with disabilities in school, while the childcare setting can provide unique opportunities for building additional skills, such as social skills
* School age childcare services would like an identified resource within a school to contact about supporting a child with a disability
* Difficulties between a school and a childcare setting can result not only from lack of communication, but also from low understanding of technical terminology used in forms, such as Individualised Education Plans for children with disabilities
* Some parents attribute their child’s successful inclusion in childcare to the fact that the para-professional working with their child during the school day also cared for their child in the school age childcare service

#### Effective cooperation between childcare providers and health professionals, including therapists

* Childcare staff and providers need to work effectively with healthcare providers to ensure the inclusion of children with disabilities in their settings
* Some school age childcare staff would like to learn more about the strategies and techniques employed by therapists
* Effective partnership between staff and mental health professionals can play an important role in ensuring that some children with disabilities, such as some children with emotional and behavioural issues, receive appropriate support for their needs and can maintain their placement in the childcare setting
* Assistance and interventions (which can take a variety forms) from mental health professionals are typically sought by providers where children exhibit challenging behaviour or difficult emotional states that persist over time and interfere with their social relationships or learning

### Existing infrastructure and relevant developments

#### National Quality Guidelines for School Age Childcare Services

The National Quality Guidelines state that school age childcare services and schools should work together, as far as possible, to provide children with smooth transitions between both settings. According to the Guidelines, such transitions can be supported by sharing relevant information and clarifying responsibilities between the service, parents/guardians and school. The Guidelines also advise that school age childcare services build and foster effective relationships with schools that the children attend, and with schools in the area that do not currently have any children attending the service.

The Guidelines suggest that services can work in partnership with schools in the local area and collaborate in various ways, for example by:

* Informing them of the service, its ethos, aims, objectives and programme of activities
* Sharing information/reports on activities and events going on in the service
* Meeting and establishing relationships with school staff
* Inviting school personnel to family or community celebrations held by the service
* Attending school activities
* Exchanging newsletters
* Obtaining the school’s holiday schedule as soon as it is available
* Agreeing a joint strategy for the prevention of bullying
* Discussing the homework support policy of the service in collaboration with the schools and parents

The National Quality Guidelines also explain that, as part of the key person approach, the key person should support children as they navigate transitions between settings e.g. from early childhood to primary school, and from school to school aged childcare settings, and to post-primary school.

Regarding partnership with healthcare professionals, Guideline 7 recommends that services create opportunities for key people from the community to visit the setting, including a public health nurse. Relatedly, Guideline 4 instructs that information material should be available to children and young people on mental health and wellbeing, sources of support etc., and staff should be aware of the material available.

#### AIM programme

Therapy services considered critical for a child’s participation in the ECCE programme are available under Level 6 of AIM. Therapy supports are provided by the HSE, or an agency providing services on behalf of the HSE. The model of service delivery for AIM Level 6 supports is a stepped care approach, ranging from universal strategies to more specific, targeted individual interventions. Health providers can seek to address the child’s needs through universal strategies, such as provision of information, advice packs, leaflets and practical guidelines, training of parents or ELC leaders to understand the child’s needs and to respond appropriately, professional advice and support, access for staff to group therapeutic programmes or workshops and drop in consultation clinics. Where universal strategies are not working and it is clear that the placement is failing for the child, it is likely that an individual assessment of the presenting needs will be required in order to provide individual, tailor-made interventions. Children seeking to access therapeutic supports under the AIM model do not require a formal diagnosis.

Furthermore, a pilot project is currently underway whereby children with complex medical needs are receiving nursing support in the ELC setting.

#### School Inclusion Model

As part of the School Inclusion Model, which is currently being piloted in the HSE Community Healthcare Organisation 7 Region of South-West Dublin, Kildare and West Wicklow, tailored therapeutic supports, including speech and language and occupational therapy supports, are provided within ‘educational settings’, complementing existing HSE funded provision of essential therapy services.

#### NCSE Comprehensive Review of the Special Needs Assistant Scheme

The Special Needs Assistant (SNA) scheme is designed to provide schools with additional support staff who can assist children with special educational needs who also have additional and significant care needs. According to **Circular 0030/2014**, such support is provided in order to facilitate the attendance of those pupils at school and also to minimise disruption to class or teaching time for the pupils concerned, or for their peers, and with a view to developing their independent living skills. The SNA scheme has been a key factor in ensuring the successful inclusion of children with special educational needs into mainstream education, and also with providing care support to pupils who are enrolled in special schools and special classes.[[13]](#footnote-13)

One of the findings of the NCSE’s **Comprehensive Review of the Special Needs Assistant Scheme** was that the SNA scheme is less appropriate and effective in post-primary schools where many older students wish to develop greater independence.[[14]](#footnote-14) The review highlighted that older children do not wish to be seen to be different to their peers and, while they may need additional support, they do not wish to be associated with having SNA support.

### Recommendations

The NDA advises that the Department consider the following recommendations:

* That guidelines reflect the need for continuity of care of children with disabilities across all care settings, including healthcare, and the need for creating avenues for partnership among and between care and education providers, including school age childcare providers and healthcare professionals
* That guidelines consider the need for childcare professionals to gain a better understanding of the supports provided and strategies utilised by healthcare professionals to children with disabilities
* That nursing, therapeutic and/or mental health supports are available to school age childcare services where necessary to ensure the meaningful participation and inclusion of a child with a disability

# Advice

The NDA understands that the Department of Children, Equality, Disability, Integration and Youth is currently developing plans for the rollout, and training in the use, of the **National Quality Guidelines for School Age Childcare Services**. This is a welcome initiative given the emphasis afforded to inclusion and inclusive practices. The NDA recommends that the Department promotes implementation of the National Quality Guidelines, and, in particular, the delivery of inclusive experiences for school age children with a disability. The NDA advises that this task could be aided by the development of a supplement to the National Quality Guidelines, with an explicit focus on the inclusion of children with a disability.

The NDA also welcomes plans by the Department of Children, Equality, Disability, Integration and Youth to consider the extension of AIM to school age childcare services as part of the three-year evaluation of the AIM programme. Such a review will constitute a rich source of information on the inclusion of young children with disabilities in mainstream early childhood care and education, and the potential expansion of the model.

Nevertheless, children with disabilities of different ages, including older children with disabilities, may presently require access to mainstream school age childcare. The NDA therefore advises that the Department of Children, Equality, Disability, Integration and Youth examines the evidence on the inclusion of this cohort of children with disabilities in mainstream school age childcare, and addresses any research gaps in this area, including by way of consultation with older children with disabilities.

Furthermore, the NDA advises that the Department of Children, Equality, Disability, Integration and Youth, in conjunction with the Department of Education, commence work to agree a model, including a funding component, that would support access to the school age childcare component of the **National Childcare Scheme** for children with a disability. Consultation, including consultation with children with disabilities and their families, should inform the Department’s work.

The NDA advises that the Department’s work should take into consideration the aforementioned recommendations, which are repeated below. These recommendations are not intended to be exhaustive, but to provide an overview of the types of measures that may be necessary to build a model which supports the inclusion of children with disabilities in school age childcare:

1. **School age childcare services have an inclusive ethos**
* That guidelines on school age childcare reflect the need for services to have an inclusive ethos following a universal design approach which seeks to meet the needs of all children, including those with disabilities
* That materials and guidance on Equality, Diversity and Inclusion are developed to support school age childcare settings
* That a draft Equality, Diversity and Inclusion Policy template is developed for school age childcare services
* The guidelines on school age childcare indicate that evaluation exercises should determine how well services are meeting the goal of inclusion
* That the guidelines apply and adopt the European standard “Design for All” in development of new guidelines that ensures that they the processes and procedures are inclusive
1. **School age childcare services effectively communicate and collaborate with families of children with disabilities**
* That guidelines for school age childcare providers detail ways of creating effective communication channels with families of children with disabilities
* That guidance is developed for parents, guardians and families about effectively communicating and collaborating with childcare providers and professionals
1. **School age childcare settings provide environments that are universally designed where children with disabilities can socialise and interact with peers without disabilities**
* That guidelines for providers reflect the need for childcare professionals to actively promote and nurture peer relationships between children with disabilities and children without disabilities
* That ongoing training and support is available to childcare professionals to assist them in fostering positive peer relationships between children with disabilities and children without disabilities
* That childcare professionals effectively address any concerns raised by parents of children without disabilities about the inclusion of children with disabilities in their settings
1. **School age childcare services have adequate staff-child ratios to ensure the inclusion of children with disabilities**
* That guidelines reflect the need for services to reduce their staff-child ratio where necessary to ensure the meaningful participation and inclusion of children with disabilities in the school age childcare setting
* That funding for additional staffing support is made available to childcare services to enable a reduction of the staff-child ratio where necessary to ensure the meaningful participation of children with disabilities
1. **School age childcare settings are physically accessible and usable by children with disabilities**
* That supplementary guidelines to the Universal Design Guidelines for Early Learning and Care Settingsbe developed, with a specific focus on Universal Design for School Age Childcare settings
* That funding be made available to school age childcare services to undertake minor building works where necessary to ensure the meaningful participation of children with disabilities
1. **School age childcare services adapt their activities and structure, and provide supports, to ensure the equal participation of children with disabilities**
* That guidelines require practitioners to consider the need for structured activities and schedules for children with disabilities, as required
* That guidelines reflect the need for childcare practitioners to consider whether activities, including outdoor activities and activities in the community, are accessible to children with disabilities
* That funding is available to school age childcare services to purchase specialised equipment or assistive technology where necessary to ensure the meaningful participation and inclusion of children with disabilities
1. **School age childcare professionals have positive attitudes and the necessary skills to facilitate the effective inclusion of school age children with disabilities within mainstream childcare settings**
* That guidelines reflect the need for all childcare professionals to have a positive attitude about the inclusion of children with disabilities in their settings
* That all childcare professionals receive disability and cultural awareness training
* That training on the skills required to facilitate the effective inclusion of children with disabilities within mainstream school age childcare settings is available to childcare practitioners e.g. sign language etc.
1. **School age childcare managers are committed to the inclusion of children with disabilities within their settings and have effective staff management practices**
* That guidelines reflect the need for school age childcare managers to be committed to inclusion
* That training on inclusion is available to childcare managers
* That guidelines advise managers to provide opportunities for staff training and development in order to build their inclusion competence
* That supports are made available to management to provide opportunities and training for staff on inclusion
1. **Technical and professional assistance and information is available and provided to school age childcare services**
* That expert, onsite technical and professional support is available to school age childcare providers to assist with the inclusion of children with disabilities
* That a centralised source of information on the inclusion of children with disabilities within school age childcare services, and any available supports, is created
1. **Children with disabilities receive continuity of care across care settings with effective inter-agency partnership and cooperation across such settings**
* That guidelines reflect the need for continuity of care of children with disabilities across all care settings, including healthcare, and the need for creating avenues for partnership among and between care and education providers, including school age childcare providers and healthcare professionals
* That guidelines consider the need for childcare professionals to gain a better understanding of the supports provided and strategies utilised by healthcare professionals to children with disabilities
* That nursing, therapeutic and/or mental health supports are available to school age childcare services where necessary to ensure the meaningful participation and inclusion of a child with a disability

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# Appendix A: School Age Childcare for Children with a Disability in Ireland

## What is school age childcare?

School age childcare generally refers to the care of children, by childcare providers, while they are not in the school setting. This can include care before school, after school and during school holidays. School age childcare is commonly referred to as ‘afterschool care’ or ‘out-of-school care’, particularly in other jurisdictions. The definition of school age childcare differs in Irish policies and legislation. For instance, while the **Action Plan on School Age Childcare** applies to school-going children aged 4–12 years, the **Child Care Act 1991** (as amended) pertains to school-going children under the age of 15.

### Action Plan on School Age Childcare

Launched in 2017, the **Action Plan on School Age Childcare** defines the term ‘School Age Childcare’ as follows:

‘Childcare which encompasses a wide range of non-scholastic, safe, structured programme offerings for school-going children aged 4–12 years, whether provided by childminders or in formal settings. The service operates outside of normal school hours, i.e. before school, after school and during school holidays, excluding the weekends. The same children attend the service on a regular basis and access to the service is clearly defined by agreement with parents and guardians. The main purpose of the service is to promote children’s holistic development and to care for children where their parents are unavailable.’

The **Action Plan on School Age Childcare** outlines a range of private and community school age childcare services currently available in Ireland, including:

* Childminding
* Breakfast and homework clubs
* After-school clubs
* After-school service provided as part of an early years or crèche service
* After-school service based in a school premises
* A standalone after-school service

### Child Care Act 1991

The **Child Care Act 1991**, as amended by the **Childcare Support Act 2018**, defines a school age service as follows[[15]](#footnote-15):

School age service’ means any early years service, play group, day nursery, crèche, day-care or other similar service which—

1. caters for children under the age of 15 years enrolled in a school providing primary or post-primary education,
2. provides a range of activities that are developmental, educational and recreational in manner, which take place outside of school hours, the primary purpose of which is to care for children where their parents are unavailable, and
3. the basis for access to which is made publicly known to the parents and guardians of the children referred to in paragraph (a) of this definition

but excludes those services—

1. solely providing activities relating to—
2. the Arts
3. youth work
4. competitive or recreational sport
5. tuition, or
6. religious teaching

(ii) for whom statutory provision for inspection exists, prior to the commencement of this section.

### National Quality Guidelines for School Age Childcare Services

The 2020 **National Quality Guidelines for School Age Childcare Services** defines school age childcare as follows:

Any centre-based service for school going children aged 4-14 years (inclusive), which operates during one or more of the following periods:

* Before school
* After school
* During school holidays

The National Quality Guidelines note that school age childcare services may be delivered in a variety of settings including:

* Standalone services for school going children
* Part of service provision offered by sessional or part time pre-school providers (e.g. where there is a pre-school morning session, and school age afternoon provision)
* Part of service provision offered by a full day care or crèche provider
* Aligned to a school

The National Quality Guidelines distinguish homework-specific clubs, the main purpose of which is homework completion and supporting children’s formal learning, from ‘homework support’ provided as part of a school age childcare service, which is not a core activity of the service. In keeping with the definition of ‘school-age services’ in the **Child Care Act 1991**, homework-specific clubs do not come within the remit of the National Quality Guidelines.

## Childcare Support Act 2018

The **Childcare Support Act 2018** provided for the establishment of a statutory **Affordable Childcare Scheme** (known as the **National Childcare Scheme**) under which financial support is available to families in respect of childcare, including school age childcare. The Act limits participation in the **National Childcare Scheme** to childcare providers that are registered with Tusla, the Child and Family Agency. A number of Statutory Instruments have been introduced to underpin the operation of the **National Childcare Scheme**.[[16]](#footnote-16)

### Existing public supports and programmes for school age childcare

A 2011 study by Ursula Barry on the provision of out-of-school care in Ireland found that public funding for out-of-school care for school age children was extremely limited and primarily oriented towards the development of care facilities in designated geographical areas of disadvantage.[[17]](#footnote-17)

Some school age childcare services are provided through the Department of Education’s School Completion Programme, which are predominantly linked to DEIS schools.[[18]](#footnote-18) The School Completion Programme is a targeted programme of support for primary and post-primary children and young people who have been identified as potentially at risk of early school leaving or who are out of school and have not successfully transferred to an alternative learning site (i.e. YouthReach, Community Training Centre etc.) or employment.

Established under the **Childcare Support Act 2018**, the **National Childcare Scheme** will replace all existing targeted childcare support programmes, as well as a universal childcare subsidy, by 2021. This includes existing childcare support programmes which subsidise the cost of school age childcare for certain eligible families. Access to these subsidised school age childcare programmes has been based on strict eligibility criteria, including receipt of certain social protection benefits, or participation in training and education schemes.

The **National Childcare Scheme** will replace a number of programmes, including the following:

* **Community Childcare Subvention** (covers school age childcare and pre-school care): This childcare programme is targeted to support parents on a low income to avail of reduced child care costs at participating community child care services
* **Community Childcare Subvention Plus** (covers school age childcare and pre-school care): This programme provides support for parents on a low income to avail of reduced child care costs at participating privately owned child care services and at community not-for-profit child care services
* **Training and Employment Childcare Scheme** consists of three different childcare supports designed to support parents on eligible training courses and eligible categories of parents returning to work, by providing subsidised childcare places, specifically:
* **After-School Childcare Programme**: The After-School Child Care Programme provides afterschool care for primary school children for certain categories of working parents and parents on department employment programmes, not including Community Employment schemes
* **Community Employment Childcare Programme**: The Community Employment Childcare Programme provides childcare for children of parents who are participating in Community Employment schemes
* **Childcare Education and Training Support Programme**: The Childcare Education and Training Support Programme formerly catered for FAS and VEC training course participants. It provides childcare on behalf of the local education and training boards and secondary schools

### National Childcare Scheme

Introduced in 2019, the **National Childcare Scheme** (NCS) is a new scheme that provides a statutory entitlement to financial support for childcare, including school age childcare services registered with Tusla.[[19]](#footnote-19) As outlined, the NCS will replace both the Community Childcare Subvention programmes and the Training and Employment Childcare programmes with a single, streamlined scheme. The **Early Childhood Care and Education** (ECCE) programme provides early childhood care and education for pre-school children and continues to operate alongside the NCS.

There are two components to the NCS, namely a Universal Subsidy and an Income Assessed Subsidy:

* **Universal Subsidies** are available to all families with children under 3 years old. They are also available to families with children over 3 years who have not yet qualified for the free preschool programme (ECCE)
* **Income Assessed Subsidies** are available to families with children aged between 24 weeks and 15 years. This subsidy is means tested and the rate of the subsidy depends on a range of criteria including a family’s income, the child’s age and educational stage, and the number of children in a family

In its present form, the NCS does not offer a model of supports to ensure that children with disabilities can be supported to meaningfully engage in school age childcare. The NDA advises that inclusive school age childcare services, achieved through the provision of effective universal and targeted supports, are key to overcoming the barriers that children with disabilities experience to meaningful participation and inclusion in such settings.

## Inclusion in mainstream school age childcare

Over the past 15 years, a number of policy documents have been published on school age childcare, some of which have highlighted the importance of inclusive services. There are also some important domestic and international legal standards which have implications for school age childcare services, including Ireland’s ratification of the **UN Convention on the Rights of Persons with Disabilities**.

### Policy background

#### Report of a Working Group of the National Childcare Co-ordinating Committee

In 2005, a Working Group of the National Childcare Co-ordinating Committee, a Committee chaired by the Department of Justice, Equality and Law Reform, published a report on **Developing School Age Childcare**.[[20]](#footnote-20) The remit of this Working Group was to:

* Review existing provision for school age childcare in Ireland and in other jurisdictions
* Develop guidelines for quality standards for school age childcare
* Make proposals for the development of school age childcare services, on an all year round basis, taking into account the diverse forms of such childcare
* Report to the National Childcare Co-ordinating Committee on these issues

In its recommendations, the Working Group were of the view that school age childcare services should be underpinned by sound principles which support inclusion and participation. The Working Group recommended that school age childcare practitioners enshrine diversity in the programmes of activities and attitudes they are developing in their facilities, to encompass those with special needs. The Working Group also made recommendations about the physical design of school age childcare facilities, advising that such settings be accessible to children with disabilities.

#### Inter-Departmental Group Report on Future Investment in Early Years and School Age Care and Education

In July 2015, an Inter-Departmental Group (IDG) established by the former Minister for Children and Youth Affairs published its report on **Future Investment in Early Years and School Age Care and Education**.[[21]](#footnote-21) The purpose of the IDG was to identify and assess policies and future options for increasing the quality, supply and affordability of early years and school age childcare and education services in Ireland. As part of its work, the IDG explored national and international after-school models. The Report of the Inter-Departmental Group on Future Investment in Childcare 2015 recommended that all existing targeted childcare programmes be merged into one single, targeted childcare programme with eligibility for a childcare subsidy under the new programme determined by income only.

One of the key messages from the consultation process to inform the development of the report was the need for inclusive provision. Parents emphasised the need for services that are fully accessible to children with additional needs, and for providers that are well equipped to provide the best possible service. The consultation report identifies children with disabilities as the number one priority group in this regard.

In the context of inclusion, the IDG underlined that supporting children’s outcomes in after-school care is about having the right kind of care options and services which are good for children, available when and where children need them and delivered to a quality standard. According to the IDG, this meant identifying the right models, including for those families and children who have particular needs, and putting in place the various levers for good governance, quality and regulation which support effective implementation of the model of support.

To support children’s outcomes, one of the primary objectives specified by the IDG included identifying inclusive models of care that deliver good outcomes for all children. The report explored the need for inclusion in the ELC context in some depth, noting that many children with special needs are not getting the supports they require at pre-school age to enable their participation in mainstream ELC settings. The report recommended the introduction of a workable model of supports for pre-school children with special needs. However, this report did not examine the need for inclusive school age childcare provision in the same depth.

#### Action Plan on School Age Childcare

In March 2017, the then Department of Children and Youth Affairs and Department of Education and Skills jointly published an **Action Plan on School Age Childcare**. The Action Plan covers formal or centre-based care and informal care/childminders, and deals with three main themes:

* Access
* Quality
* Affordability

The stated purpose of the Action Plan is to identify immediate or fundamental requirements in the area of school age childcare, and to have these needs addressed in a relatively short time frame, thereby enabling further development in the medium term once this basic infrastructure is in place. The Action Plan states that school age childcare services must be inclusive and cater for children with disabilities, and should seek to meet the needs of all social groups. In this regard, the Action Plan states that consideration should be given to a range of supports which are appropriate to the needs of school age children attending after-school or out-of-school services.

The Action Plan also contained the following commitment, due to be completed by December 2018: ‘DCYA will commission research on best practice in the provision of inclusive SAC [school age childcare] services, to include children with disabilities and those experiencing social disadvantage’. This research is yet to be commissioned.

#### First 5: A Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028

**First 5** is a cross-departmental strategy to support babies, young children and their families in order to provide an effective early childhood system. It seeks to develop a system of integrated, cross-sectoral and high-quality supports and services that help all babies and young children in Ireland to have positive early experiences.

Objective 8 of the Strategy stipulates that young children should have access to safe, high-quality, developmentally-appropriate, integrated ELC and school age childcare, which reflects diversity of need. One of the Strategic Actions identified to meet Objective 8 is to ensure that ELC and school age childcare provision promotes participation, strengthens social inclusion and embraces diversity through the integration of additional supports and services for children and families with additional needs.

Initial actions identified under Strategic Action 8.3 include the following:

* Undertake an end-of-year-three evaluation of AIM and, subject to evaluation findings and other relevant developments, consider enhancements to and extension of AIM to, for example, all school age childcare services
* Introduce mechanisms through the Affordable Childcare Scheme (with periodic reviews), to ensure that children with specific vulnerabilities have access to high-quality school age childcare

#### National Quality Guidelines for School Age Childcare Services

In September 2020, the Department of Children, Equality, Disability, Integration and Youth published the **National Quality Guidelines for School Age Childcare Services**, together with a report on the public consultation that took place to inform the development of regulations and standards for school age childcare.

One of the themes which emerged from the consultations was the need to support children with additional needs to participate in school age childcare. Responses from all four strands of the consultation process indicated support for regulations and quality standards promoting inclusive practice. In this regard, a number of respondents recommended that the Access and Inclusion Model (AIM) for early learning and care settings be extended to the school age childcare sector. Some respondents also suggested that if a child attending school age childcare has been allocated a Special Needs Assistant, then this entitlement be extended to the school age childcare setting.

The National Quality Guidelines describe the features of good quality practice in childcare services for school age children, including both after-school and holiday childcare services. The stated purpose of the Guidelines is to assist and guide school age childcare service providers and staff to reach beyond and aspire to achieving more than the minimum standards set out in regulations. The seven principles underpinning the Guidelines are as follows:

1. Equality, diversity and non-discrimination are championed by staff and children
2. Children have a right to express their voice, to participation and to play and rest
3. Services adopt a holistic approach to child development, recognise the diversity of needs of children and build on children’s strengths and abilities
4. Parents are full and valued partners in school age childcare services and active participation of all parents is encouraged and supported
5. School age childcare services offer a home-from-home environment that is child and young person-friendly
6. School age childcare services need to support the representation and participation of school age children from a diversity of backgrounds
7. Adults in school age childcare services play a crucial, facilitative role

The National Quality Guidelines state that establishing and maintaining the processes and structures that ensure the inclusion and participation in school age childcare services of children from a diversity of backgrounds, including children with disabilities, is critical.

### Domestic and international legal standards

#### Equal Status Acts 2000-2018

The **Equal Status Acts 2000-2018** prohibit school age childcare providers from discriminating against children with a disability in the provision of their services. Additionally, the legislation requires school age childcare to provide reasonable accommodations to children with a disability. Reasonable accommodations are practical changes that enable children with disabilities to access and use all kinds of services, including school age childcare services, on an equal basis with others.

There are limits to the obligation to provide reasonable accommodations, and school age childcare providers are not required to provide accommodations where such measures would give rise to a cost, other than a nominal cost, to the provider of the service in question. In deciding what a nominal cost is, the legislation states that the relevant provider should take account of the following:

* The financial and other costs entailed
* The size and resources of the organisation
* The possibility of obtaining grants from the state

#### UN Convention on the Rights of the Child

Ireland ratified the **UN Convention on the Rights of the Child** (UNCRC) in 1992. Article 18.3 of the UNCRC specifically providers for a right to benefit from childcare services:

States Parties shall take all appropriate measures to ensure that children of working parents have the right to benefit from child-care services and facilities for which they are eligible.

Article 23 of the UNCRC is a provision dedicated specifically to children with disabilities and emphasises their right to a ‘full and decent life in conditions which ensure dignity, promote self-reliance and facilitate the child’s active participation in the community’. It imposes obligations on States to provide special care and assistance to enable the child to achieve the ‘fullest possible social integration and individual development, including his or her spiritual or cultural development’.

In its General Comment No.7, the UN Committee on the Rights of the Child calls on States to ensure that all young children are guaranteed access to appropriate and effective services, including programmes of care specifically designed to promote their wellbeing.[[22]](#footnote-22) In this regard, the UN Committee states that particular attention should be paid to vulnerable groups of young children, including those experiencing poverty and those at risk of discrimination.

#### UN Convention on the Rights of Persons with Disabilities

Ireland ratified the **UN Convention on the Rights of Persons with Disabilities** (UNCRPD) in 2018. While children with disabilities are entitled to the full range of protections outlined in the UNCRPD, Article 7 deals specifically with children with disabilities. Article 7.1 requires States Parties to take all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children. The UNCRPD also stipulates that the duty of reasonable accommodation is a cross-cutting obligation which applies to all articles of the Convention.[[23]](#footnote-23)

The UN Committee on the Rights of Persons with Disabilities has raised the issue of childcare for children with disabilities in its Concluding Observations, including its 2017 Concluding Observations on the United Kingdom.[[24]](#footnote-24) Here, the UN Committee expressed concern at the lack of a general statutory duty upon public authorities to ensure adequate childcare for children with disabilities, and recommended that the UK implemented a policy ensuring sufficient and appropriate childcare as a statutory duty across the State party.

### Inclusion in mainstream early learning and care

Unlike mainstream school age childcare services participating in the National Childcare Scheme, a model of supports has been introduced for children with disabilities to participate in mainstream early years education and care. The State introduced a universal, free pre-school year in 2010, known as the **Early Childhood Care and Education** (ECCE) programme. From September 2018, the ECCE programme was expanded to two universal, free pre-school years for all children between 2 and 5 and half years of age.

There was no programme of supports in place for children with disabilities at the commencement of the ECCE programme, as highlighted by the Ombudsman for Children in a 2013 statement.[[25]](#footnote-25) A Working Group examined the issue of supports for children with disabilities in 2010 and 2011, but it did not publish a final report. In 2011, the NDA published a report setting out what a programme of supports for children with disabilities to participate in the ECCE programme could look like.[[26]](#footnote-26)

In November 2015, an Inter-Departmental Group published a report entitled **‘Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability’**.[[27]](#footnote-27) This report set out a model of supports to enable children with disabilities to access and participate in early childhood settings. The model, named the Access and Inclusion Model, or AIM, was rolled out from September 2016. Neither AIM, nor ECCE, have a statutory basis and both schemes are run on an administrative basis.

The AIM model was designed to build early years practitioners’ knowledge, skills and capacity to facilitate the inclusion of children with disabilities in early years settings, as well as to provide funding supports for particular settings in which a child with a disability is attending. AIM supports are based on a profile of need, not a diagnosis of a particular disability. The seven levels of support are as follows:

* Level 1: An Inclusive Culture
* Level 2: Information for Parents and Providers
* Level 3: A Qualified and Confident Workforce
* Level 4: Expert Educational Advice and Support
* Level 5: Equipment, Appliances and Minor Alterations Capital Grant
* Level 6: Therapeutic Intervention
* Level 7: Additional Assistance in the Pre-School Room

Levels 1–3 are universal supports designed to promote and support an inclusive culture within pre-school settings by means of a variety of educational and capacity-building initiatives. Levels 4–7 are targeted supports designed to meet the needs of an individual child. By July 2020, over 12,690 children had benefited from over 28,480 targeted AIM supports in over 3,410 early learning and care settings.

An independent **End of Year One Review of the Access and Inclusion Model** found that the AIM programme had assisted large numbers of children with disabilities to access ECCE provision, who might otherwise have been excluded.[[28]](#footnote-28) Some of the reported positive impacts of AIM included:

* Heightened awareness of disability and inclusion
* A change to the prevailing culture and attitudes in the preschool sector
* A more inclusive culture amongst staff and services, including a greater awareness and acceptance of children with disabilities and additional needs
* Increasing confidence to support children with disabilities and additional needs
* Enhanced well-being amongst pre-school practitioners, who were less stressed and more reassured due to additional support and advice
* Personal development and the development of skills of children with disabilities, such as the development of social skills and concentration within the setting
* Better access to additional supports, resources and equipment (meaning the service was more responsive to the needs of the child)
* Better adult-to-child ratio and in some cases individualised supports
* Enhanced wellbeing of both the parent or carer and the child as a result of the reassurance about previously held concerns about the child’s involvement in pre-school
* Building positive relationships and understanding between those who support children in pre-school settings from variety of departments, agencies and organisations

The review also identified some areas for improvement and further development, notably concerning communication, as well as coverage and scope of the programme. A Three Year Review of the AIM programme is due to be commissioned shortly.

# Appendix B: Review of Literature

The literature review revealed that there is a relative dearth of research on inclusive school age childcare and children with disabilities, and that the majority of published studies are quite old. Nevertheless, earlier research was included in the literature review where the NDA considered that the findings still have relevance. The NDA therefore recognises that the evidence base discussed in this appendix is quite limited and based predominantly on small-scale studies. The NDA advises that the Department could consider ways of improving this evidence base and would be happy to advise the Department on considerations in that regard.

As outlined, the literature review focused on three distinct elements:

* The barriers to accessing school age childcare for children with disabilities
* The benefits of inclusive school age childcare services
* The features of an inclusive school age childcare system for children with disabilities

The review did not examine costings or funding models for inclusive school age childcare.

## The barriers to accessing school age childcare for children with a disability

Research illustrates that parents encounter challenges accessing appropriate childcare for school age children with disabilities. Dale Fink’s (1988) study explored the experiences of 66 parents of school age children with mild to profound disabilities aged between five and sixteen seeking and using childcare in the United States.[[29]](#footnote-29) It found that 25% of parents of five-to-seven year old children with disabilities had been denied admission or had been discouraged from applying to a childcare programme since their child entered school. Of children 12 to 16 years old, nearly half had been refused childcare during their years in school.

Fink’s research found that children with behavioural issues were more likely to be refused admission or be dismissed from programmes they previously attended. Also, older children with disabilities were substantially more likely to be refused admission to a childcare programme than younger children. Parents participating in the study cited the inability to find appropriate childcare for school age children with disabilities as a major barrier to employment. Similarly, a school age childcare needs assessment, carried out by Marti Worshtil (1990) in Prince George’s County in Maryland amongst 853 children attending special schools or schools with special education centres, found that more than half of parents with children with disabilities provided afterschool care for their children themselves, as opposed to one-fifth parents of children without disabilities.[[30]](#footnote-30)

Research carried out by Kagan et al. (1999) in the United Kingdom explored the experiences of forty working families (representing a variety of family structures and work situations) with a child with a disability, ranging in age from 6 months to 29 years, with respect to formal and informal sources of childcare.[[31]](#footnote-31) Their study found that where formal childcare supports are lacking, assistance from family and friends can assume even greater importance. However, the informal support networks of parents of children with disabilities were more likely to be smaller and confined to close family members, which can lead to less availability of informal care and may pre-dispose parents to higher levels of distress. A national survey of parents caring for children with profound disabilities undertaken by Bryony Beresford (1995) in Britain revealed that levels of informal support were higher when children were younger, possibly owing in part to the increased difficulties encountered in caring for older children, allied to the fact that grandparents are also ageing.[[32]](#footnote-32)

Additionally, research undertaken by Hamida Jinnah-Ghelani (2008) in the United States with 37 parents found that some childcare providers simply refuse to accept school age children with disabilities in their settings.[[33]](#footnote-33) According to parents, the inability of some children with disabilities to perform self-care tasks such as toileting or eating sometimes causes childcare providers to deny acceptance. The research also revealed that even if parents were successful in enrolling their children in school age childcare, they could not be confident that the placement would last as care was sometimes terminated when difficulties arose. Freedman et al. (1995) conducted a series of focus groups with parents of children with developmental disabilities who indicated that locating and maintaining childcare for children with behavioural issues in the United States is particularly difficult.[[34]](#footnote-34)

Jinnah-Ghelani’s (2008) study found that care options for school age children with disabilities tend to be unstable, and families repeatedly make their way through the care cycle. At any phase in the cycle, if the care situation ends, either the family starts from the top of the care cycle, searching for another care option, or they may decide to care for the child themselves. A family may fall into different phases of the care cycle at different times in their child's development. She noted that care options may be identified for a younger child, but these may be lost as the child “ages out” of the setting or activity.

Another point is that while the need for childcare typically reduces as children grow older, there are some children with disabilities who may continue to need care. Worshtil (1990) found that many children with disabilities require care well past the age of 14 years, a point echoed by Kagan et al. (1999) in their study. A review of literature on best practices for child and adolescent out-of-school care, conducted by Mulvihill et al. (2004), noted that school age children without disabilities, particularly older children, are often involved in several after-school activities, such as sports, school-related extra-curricular involvement, and community service, meaning school age childcare is no longer required.[[35]](#footnote-35) By the time children reach adolescence, they are no longer interested in being in a care setting, and their families are often relieved to no longer have the burden of paying for childcare. However, some children with disabilities may continue to need care.

Interestingly, a **Growing Up in Ireland** report examining the out-of-school activities of nine-year of-children found that out-of-school activities did not appear to differ between children with a chronic illness or disability and other children (McCoy et al., 2012).[[36]](#footnote-36) However, those with learning disabilities were less likely to take part in cultural activities, such as after-school lessons/groups; 13% of children with learning disabilities participated in cultural activities compared to 22% of children without such disabilities.

A related issue is that access to childcare is restricted by lack of availability of appropriate services for school age and older children. A needs assessment of inclusive school age childcare by Jinnah-Ghelani (2008) revealed that the childcare system is generally geared to meet the needs of younger children. A study by Jinnah-Ghelani and Stoneman (2009) on parents’ perspectives (29 parents attending five focus groups, and eight telephone interviews in the United States) of features needed to appropriately accommodate school age children with disabilities in childcare and other out-of-school settings notes that as children with disabilities grow older, the manifestation of their disability and their needs keep changing.[[37]](#footnote-37) Therefore, the support they need for full participation in inclusive settings will be qualitatively different from those needed by younger children. Childcare providers are not equipped to cater for these needs.

Jinnah-Ghelani’s study (2008) revealed that even when services do provide care for a child with a disability, parents can sometimes terminate such care. Most of the parents availing of out-of-school care were not positive about the quality of their children's experiences in the setting and some had decided to withdraw their child. Additionally, many parents who maintained their school age children in childcare were anxious and concerned about their choice.

While many of the barriers children with disabilities can experience in accessing school age childcare are particular to those with disabilities, some of the challenges are similar to those faced by all families. For instance, Kagan et al. (1999) highlight the lack of childcare options in rural areas, Fink (1988) discusses the lack of childcare options during the summer months, and Jinnah-Ghelani (2008) refers to lack of transportation in certain areas. However while all children can be affected by general barriers to school age childcare, Jinnah-Ghelani notes that children with disabilities may be disproportionately affected.

For instance, Jinnah-Ghelani remarks that although all families can experience challenges in developing opportunities for their children during the summer holidays due to lack of childcare options, summers are more likely to mean isolation and loneliness for some children with disabilities. Additionally, while public transport may be limited for everyone living in a certain area, children with disabilities may face added difficulties due to lack of accessible transportation. If private transport is required, there may be a need for an adapted vehicle, such as a wheelchair-accessible car, which can entail additional expense for families.

Another issue reported by Mulvihill et al. (2004) is that some afterschool providers are unwilling to provide care on a part-time basis or they give first priority to families who enroll their child for the entire week. While this can be a barrier for all families, it can be particularly problematic for families with children with disabilities that may need care only one or two days a week, as a respite, as a socialisation experience for their child, or because their child regularly attends other therapeutic activities or programmes.

## The benefits of inclusive school age childcare

Research highlights a number of benefits to inclusive school age childcare for:

* Children with disabilities
* Children without disabilities
* Families of children with and without disabilities
* School age childcare practitioners

### For children with disabilities

Mulvihill et al. (2004) noted that inclusive school age childcare settings offer children with disabilities the ability to experience a new environment where the effects of exclusion or separation, such as labelling and negative attitudes, are limited. They can also offer a greater variety of experiences than special care settings, such as opportunities to go on field trips or to exposure to more varied programmes.

Mulvihill et al. also underline that inclusive settings provide children with disabilities with role models to foster the learning of adaptive skills, such as feeding, dressing, and toileting, through imitation. Further, children with disabilities gain practice in social interactions and develop friendships with peers without disabilities that can help them prepare to live inclusive lives in their community. Parents participating in Jinnah-Ghelani and Stoneman’s research (2009) made similar points, in particular the opportunity that inclusive childcare settings provide to children with disabilities in terms of role models. Their study also finds that one of the benefits of inclusion is that children with disabilities show developmental gains, especially in areas of communication, social and motor skills.

A 2003 study by Barker et al., which assessed the impact of out-of-school care by examining the views of children, families and childcare professionals in England, had comparable findings.[[38]](#footnote-38) Here, the researchers engaged with six out-of-school services considered examples of good practice, four of whom had children with special educational needs attending (catering for children between the ages of four and fourteen). Findings from the study indicated that out-of-school care can help to widen the social circles of children with special educational needs, and offer them more time to play in a well-resourced environment. Respondents also gave evidence to demonstrate how inclusive settings can improve the self-confidence and social skills of children with special educational needs. Whilst these impacts were similar for children without special educational needs, the impact was considered particularly significant for children with special educational needs.

### For children without disabilities

Mulvihill et al. (2004) found that the benefits of inclusive school age childcare also extend to children without disabilities. Inclusion offers the opportunity for children without disabilities to develop an understanding of children with different disabilities, to develop an appreciation for others of different abilities and to learn altruistic behaviors such as kindness, patience, and respect. For those without disabilities, experiences and interactions with children with disabilities can build social skills, self-esteem, and principles of responsibility for others.

### For families

The Mulvihill et al. study (2004) revealed that families benefit from the inclusive care of children with disabilities. Families with children with disabilities learn about typical development through exposure to a wider variety of families and children. Additionally, they have the opportunity to develop meaningful relationships with families that include children without disabilities, which can reduce any feelings of isolation. As noted in Fink’s research (1988), school age childcare can also improve employment opportunities for families of children with disabilities.

Families with children without disabilities have the opportunity to learn that families with children with disabilities experience some of the same challenges and pleasures of parenting, including pride in their children's accomplishments and commitment to their successful future.

### For school age childcare practitioners

As part of her study, Jinnah-Ghelani (2008) carried out research with 41 school age childcare providers and examined the benefits of inclusion from the provider’s perspective. Practitioners mentioned that working with children with disabilities can be deeply rewarding for all involved, and that they cherish the unconditional, open and honest love that they receive from them. Several practitioners also stated their belief that children with disabilities appreciate them more than children without disabilities do. Practitioners also highlighted the satisfaction in seeing improvements in school age children with disabilities. Events like saying their first words, making eye contact, or drawing a picture, which might be more commonplace for children without disabilities, can be extremely rewarding for professionals who have helped children with disabilities develop and progress even in small ways.

## The features of an inclusive school age childcare system for children with disabilities

Ten features of an inclusive school age childcare system identified in the literature review were as follows:

1. School age childcare services have an inclusive ethos
2. School age childcare services effectively communicate and collaborate with families of children with disabilities
3. School age childcare settings provide environments where children with disabilities can socialise and interact with peers without disabilities
4. School age childcare services have adequate staff-child ratios to ensure the inclusion of children with disabilities
5. School age childcare settings are physically accessible to children with disabilities
6. School age childcare services adapt their activities and structure, and provide supports, to ensure the equal participation of children with disabilities
7. School age childcare professionals have positive attitudes and the necessary skills to facilitate the effective inclusion of school age children with disabilities within mainstream childcare settings
8. School age childcare managers are committed to the inclusion of children with disabilities within their settings and have effective staff management practices
9. Technical and professional assistance and information is available and provided to school age childcare services
10. Children with disabilities receive continuity of care across care settings with effective inter-agency partnership and cooperation across such settings

### School age childcare services have an inclusive ethos

The creation of an inclusive ethos is one of the best practices identified by Mulvihill et al. (2004) in their study on inclusive school age childcare. They advised that inclusive school age childcare services should develop a written ethos that is an expression of the provider’s experiences of providing inclusive childcare and the choices they make to enhance these experiences. According to Mulvihill et al., this ethos should include beliefs about children's growth and development, goals about what children should learn, methods by which they should be taught, and how the programme should be planned and administered. They also recommended that policies and procedures should reflect the values and goals of quality care in inclusive settings, and should include a clear statement of the reasons for and commitment to inclusion.

Mulvihill et al. stated that key stakeholders should be involved in the development of the inclusive ethos, including families and children, as well as others likely to be affected by the programme. As outlined in the study, a written ethos can serve as a mechanism for decision-making if differences arise around the choices of instructional methods, behaviour management techniques, and environmental characteristics chosen for children with disabilities. Similarly, Mulvihill et al. advised that a thorough, written programme plan should underpin the inclusive ethos, and include the following information:

* staff development
* roles and responsibilities of staff
* programme modifications to environment and curriculum
* methods for monitoring and evaluating

Research by Brennan et al. (2003) investigated practices used by childcare practitioners to include children with emotional and behavioural issues in both ELC and school age childcare programmes.[[39]](#footnote-39) Their research, carried out in nine American childcare centres, underlined the importance of providers articulating a clear goal to meet the needs of all children, including those with emotional or behavioural issues; this goal informed the design and delivery of services, and was communicated to staff and family members associated with the centre. Although the centres varied in the programmes and services offered, every centre had the explicit goal of providing childcare that could meet the needs of all children, including those with emotional and behavioural issues.

A point reinforced by Brennan et al. is that managers did not simply develop goals; they were “intentional” about communicating their programme's inclusion policy to staff, family members and others who came into contact with the centre. The goal of inclusion provided a focus that informed the design and delivery of services, the allocation of resources, management policies, classroom practice, and methods of working with families.

To ensure that an inclusive ethos and programme is having real and tangible benefits for children with disabilities, Mulvihill et al. (2004) emphasise the importance of evaluation. Evaluation should determine how well services are meeting the goal of inclusion, where they should focus improvement efforts, and what accomplishments they should promote. They noted that a number of stakeholders could be involved in the evaluation including staff, teachers, families and the children themselves. Mulvihill et al. stated that, ideally, evaluation should be ongoing and should assess the following:

* if all children, with and without disabilities, are achieving established goals and outcomes
* if the environment is appropriate and supports growth and development
* families' opinions of the programme and satisfaction with the programme
* how effectively the programme is collaborating with other groups and individuals
* if the curriculum is involving all children and addressing their interests and needs
* staff's perceptions of the programme including how well their needs are being addressed

### School age childcare services effectively communicate and collaborate with families of children with disabilities

The literature emphasises the importance of communication and collaboration by school age childcare services with all individuals that promote a child’s development, particularly families. The literature is clear that effective communication between families and school age childcare services can improve the childcare provider’s ability to effectively care for a child with a disability.

Parents participating in Jinnah-Ghelani and Stoneman’s (2009) study described communication as crucial in promoting a positive inclusion experience for all involved. Parents noted that, as children grow older and more communicative, they can take some of the responsibilities of sharing information between home and the school or childcare setting. However, for some children with disabilities who may not be as communicative, childcare practitioners need to make additional efforts to maintain communication with the child’s family. Parents indicated that they would like providers to communicate with them regarding their child’s progress, and any behavioural issues so that they can work on solutions together. Some parents complimented providers for informing parents about issues, and for consulting and working with them to find solutions.

Other parents in the same study were less satisfied and expressed a desire for more communication from providers. Parents also commented that they want to feel welcome when they visit the childcare setting. Several parents complained that providers dismissed their children from programmes without sufficient communication or problem-solving efforts. Parents also stressed that they would like providers to value their input in caring for their children. Parents believed that they could help providers understand their child better by sharing their insights and wisdom about the caring of their child.

Brennan et al. (2003) noted that one of the features of inclusive childcare services for children with behavioural and emotional issues was good communication between providers and parents. Communication lines were intentionally kept open by staff, who attempted to establish “personal accessibility” and to forge working relationships with parents. Emphasising the need to avoid jargon, to be clear, to provide frequent updates on the child’s progress, and to respect confidentiality, childcare professionals worked to be in contact with every family every day if possible, and employed a wide variety of communication media.

Childcare practitioners taking part in the Brennan et al. (2003) study also described the importance of tapping into the expertise of parents. The need for individualised care meant that practitioners had to be open to understanding the family context and to learning about each child. This was an ongoing process as they analysed the problems that arose, selected solutions, and learned from responses. Practitioners recognised that the involvement of parents in exchanges of information about each child, and in the care of their child, was crucial for the child’s success. Children's needs were dynamic and required flexible responses. Being open to change and striving to continue to seek information and improve services to meet the needs of families was an important part of the success of the centres, with some parents observing a “positive evolution” of the programme and commenting on how they felt that the programme improved during their time at the centre.

Brennan et al. also noted that families gave childcare professionals tips and insights on how best to understand their children. These often operated both ways, with professionals who formed solid relationships with children often learning about their new interests, and reporting these to their parents. Childcare providers went to great lengths to keep families informed about new developments, new goals achieved, and the day-to-day happenings in their children’s lives. For children with emotional or behavioural issues, this often meant new strategies for overcoming such challenges. Families grew to trust practitioners to help their children reach their goals, and it was this trust that enabled practitioners to effectively include all children in their care, regardless of disability.

As parents experienced the commitment of childcare professionals to work with their child whatever the difficulties, they became more open about problems that they experienced and were able to seek and accept assistance from practitioners. Parents talked about how practitioners helped them to learn to deal with their child's behaviour in a more positive way. Conversely, Jinnah-Ghelani (2008) noted that one of the challenges identified by providers was that some parents were not forthcoming with information about a child’s behaviours and needs, forcing some providers to deal with safety issues.

However, while effective communication between providers and families of children with disabilities is desirable, it is not without its challenges. Jinnah-Ghelani noted that several parents participating in her study mentioned either that they were never asked by providers to assist in addressing challenges encountered by their children, or their suggestions were not followed. By contrast, providers expressed frustration with parents of children with disabilities who tried to do everything for their child and had the same expectation of providers. Providers described these expectations as being a source of tension with parents, particularly when providers tried to encourage more independence in the child.

Providers also expressed frustration about parents who were not adequately involved in their child’s life. Providers stated that when parents do not communicate information about situations at home, a child’s favourite toy or activity, or techniques for managing a child’s behaviour, it makes it far more difficult for providers to care for children. Furthermore, while acknowledging the importance of communication with families, some providers stated that they did not know the best way to create this dialogue. Jinnah-Ghelani (2008) opined that a systematic tool for communication, like a journal, encourages greater collaboration between different people working with a child with a disability.

Mulvihill et al. (2004) noted that communication with families should be ongoing and demonstrate respect for different cultures. The authors explained that childcare providers can collaborate with families in various ways, including through the provision of orientation to families. Orientation provides an opportunity to introduce families to the programme and its ethos, the services that are offered, and how they can be involved. According to Mulvihill et al., effective collaboration with families also comprises their full involvement in the planning of their child's care. They noted that families are critical partners in planning for the care of children, and are important participants in the development of systems of inclusive, quality childcare as they have expert, in-depth knowledge of their child's personality, strengths and needs. Brennan et al. (2003) also highlighted the importance of family involvement in service planning and delivery, which included some parents in their study directly participating in staff training.

Effective collaboration also means that childcare practitioners provide support to families. Families involved in the Brennan et al. research reported close connections with staff to the point of considering them extended family, and felt confident that their children could maintain their placements in the centres despite their emotional or behavioural issues, or acute episodes of difficult behaviour. Practitioners provided family support over and above childcare, and also facilitated connections between family members and individuals and organisations providing resources in the community.

Other types of staff support mentioned by parents contributing to Brennan et al. study ranged from introductions to health and social service providers, to assistance negotiating the everyday requirements of life. Similarly, Mulvihill et al. (2004) noted that families may need a number of different supports in order to meet their own and their child's needs, and that school age childcare providers can assist by referring families to relevant support services.

### School age childcare settings provide environments that are universally designed where children with disabilities can socialise and interact with peers without disabilities

Parents taking part in Jinnah-Ghelani and Stoneman’s (2009) study emphasised the need for inclusive childcare settings rather than special environments. Parents stated their belief that children with disabilities need opportunities to interact with children without disabilities in order to develop friendships and gain social skills. Parents also communicated that children with disabilities need role models in order to learn positive social behaviour. Parents noted that, as children approach their teenage years, their identity development takes place through social interactions with peers. Therefore, interaction and approval from peers becomes more important to them and helps them in the development of identity and intimacy. Thus, irrespective of the nature of their disability, parents asserted that all children need opportunities for social interaction with children without disabilities. Parents wanted practitioners to make special efforts to promote interaction between children with disabilities and children without disabilities.

Nevertheless, the research suggests that the effective inclusion of children with disabilities in school age childcare settings is not without difficulty. Staff participating in Brennan et al. study (2003) reported that they had trouble working with some parents of children without disabilities who wondered why children with emotional and behavioural issues were being included in the setting. Similarly, providers involved in Jinnah-Ghelani’s (2008) research reported that parents of children without disabilities sometimes expressed concerns about the inclusion of children with emotional or behavioural issues within childcare settings. Parents of other children often raised questions about why accommodations were made for a child with a disability, and expressed concerns about the safety of their children and whether their child would receive sufficient attention in a setting where there is a child with a disability.

### School age childcare services have adequate staff-child ratios to ensure the inclusion of children with disabilities

Henderson Hall and Niemeyer’s study (2000) on the inclusion of children with special needs in school age childcare programmes in the United States identifies sufficient staff-child ratios as one of the variables for successful inclusion.[[40]](#footnote-40) Similarly, Brennan et al. (2003) explained that as the needs of children with emotional and behavioural issues can be dynamic, additional staff members may be required to provide flexibility to respond to individual children, to prevent problems and to provide immediate assistance where necessary. Jinnah-Ghelani and Stoneman (2009) noted that as children grow older, they become increasingly independent and autonomous, reducing the staff to child ratio generally required to care for them in childcare settings. However, they also recognised that some children with disabilities may need increased supervision and support from staff even as they age, to ensure their safety and to promote positive development.

Parents participating in Jinnah-Ghelani and Stoneman’s study believed that the number of adult staff per child in childcare services is often not sufficient to ensure adequate supervision and care of children with disabilities. This can cause significant apprehension for parents, with many worried about the safety of their children. Parents commented that they felt more secure about their children’s safety when their child was around familiar adults, especially those who have specialised training and are responsible for fewer children, which allows the providers to provide more individualised care. Parents also felt that where one-on-one supervision was required and provided, children with disabilities could take advantage of multiple out-of-school programmes and opportunities, increasing their independence.

Mulvihill et al. (2004) stated that the number of staff required to meet the needs of children with disabilities, and to ensure other children receive adequate supervision, is dependent on a number of factors. They explained that there should be sufficient staffing to provide needed support for tasks, such as toileting, eating, changing clothes, or other situations where one-on-one attention is required. Factors they identify as requiring consideration in determining the appropriate adult-child ratios are children’s age, developmental levels, behavioural challenges, mobility levels, communication abilities, and any other issues that might require additional supports and services.

One of the greatest barriers to accommodating children with disabilities, as perceived by providers in Jinnah-Ghelani’s study (2008), related to the number and quality of staff. Providers believed that given their individualised needs, sometimes children with disabilities – especially children with behavioural and emotional issues – may require more attention and supervision than other children. Many school age care providers were of the view that they do not have enough staff to effectively care for children with disabilities. School age childcare providers also commented that paying for the additional practitioners needed to effectively include children with disabilities in their setting can be prohibitive.

While some children with disabilities have para-professionals to assist them at school, providers noted that this same level of one-on-one care cannot be made available in most school age childcare settings because of limited funding. The term ‘para-professional’ is generally used in the United States to refer to a person who assists a teacher to carry out their daily activities, including through the provision of individualised assistance to children with a disability, akin to the role of a Special Needs Assistant in Ireland.

### School age childcare settings are physically accessible and usable by children with disabilities

One of the recurring features highlighted in the literature on inclusive school age childcare is the need for an accessible environment. Parents in the Kagan et al. (1999) study reported few childcare providers and childminders were physically accessible to children with disabilities, which led to reticence to leaving them in someone else's care. Barker et al. (2003) noted that physical accessibility was a barrier in some out-of-school childcare settings, with two out of six centres participating in their research not accessible to children using wheelchairs.

Jinnah-Ghelani and Stoneman (2009) noted that parents of children with disabilities highlighted physical accessibility as an important first step in making childcare settings available to children with physical disabilities. They noted that features such as ramps, railings, wider doors, and accessible bathrooms may be required. Parents also underlined that physical adaptations become even more important for children as they grow older. They noted that while it is relatively easy to physically lift or move a younger child, as children grow older, it becomes more difficult, and perhaps inappropriate, for an adult to physically lift or move the child.

In addition to wheelchair accessibility, parents in Jinnah-Ghelani and Stoneman’s study (2009) also referred to the need for a physical setting which is inclusive of a diversity of needs. For example, parents commented that presence in a small room, or sometimes in a large room with many children, can cause children with autism to feel overwhelmed. Parents acknowledged that sometimes programmes are willing to offer a placement to a child with a disability, but logistical constraints such as lack of funding and resources prevent providers from making the necessary alterations to the physical environment. Smaller, low-budget programmes can find it particularly difficult to make physical accommodations due to prohibitive costs.

Another point raised in the literature is that while some physical adaptations can be time-consuming and expensive, others can be relatively straightforward. Mulvihill et al. (2004) noted that school age childcare providers should carefully consider the various physical and spatial elements of their service to determine how they can be adapted to include children with disabilities. Considerations should include room arrangement, furniture selection, and other aspects of the physical environment that could limit participation and create safety hazards. Similarly, Fink (1988) noted that care providers should ensure the physical environment is free of obstacles that can be hazardous for children with disabilities. His study also emphasised that the care environment should allow maximum mobility and accessibility in both indoor and outdoor spaces so that all children can fully participate in all activities.

Given that some ELC providers also offer school age childcare services,recently published **Universal Design Guidelines for Early Learning and Care settings** (Ring et al., 2019) deliver guidance on the creation of universally designed and accessible school age childcare environments. According to the Guidelines, careful design and flexible physical environments are required to support children at different developmental stages, considering the potential age range within the school-age group. The right physical environment should support emerging independence amongst this cohort of children, and the development of their full potential.

### School age childcare services adapt their activities and structure, and provide supports, to ensure the equal participation of children with disabilities

Another point raised in the literature is that the full inclusion of children with disabilities in school age childcare involves more than just physical presence in the setting, and can require an adaptation of activities and structure. Children with disabilities may also need access to assistive technology or specialised equipment to meaningfully participate in activities.

#### Services adapt their activities to ensure the equal participation of children with disabilities

To ensure greater inclusivity, Mulvihill et al. (2004) stated that out-of-school care settings must offer a range of activities that are appropriate for different ages, developmental levels and interests. Parents participating in Jinnah-Ghelani and Stoneman’s research (2009) emphasised that activities often need modification in order to ensure the effective participation of children with disabilities. They noted that although some children with disabilities may mature at a different rate to their peers, they still need stimulation by being involved and engaged in meaningful activities. Parents wanted providers in inclusive settings to adapt materials, games and activities, as needed, to include children with disabilities, while maintaining the challenge and fun for other children in the setting.

Mulvihill et al. (2004) highlighted the same point - the need to adapt activities, but also maintain the challenging and fun elements for children without disabilities. Their study suggested that this could be accomplished in various ways, depending on the needs of the individual child. For example, books or other printed materials may need to be enlarged or include more tactile materials to increase a child's understanding of the story or concepts being discussed.

Parents of older children with disabilities emphasised the importance of having programmes, materials and activities that are age-appropriate. Jinnah-Ghelani and Stoneman (2009) noted that problems related to age-inappropriate activities are of greatest concern for older children with disabilities. As children mature, the disparity between children with disabilities and their peers without disabilities can increase. Parents involved in their study commented that providers sometimes either fail to make, or are unable to make, the necessary accommodations for older children to be included in settings with their same-age peers. As a result, these providers sometimes inappropriately placed older children with disabilities in settings designed for younger children.

Another point discussed in the literature is that children with disabilities may need specialised equipment and assistive technology to effectively participate in activities. Providers participating in Jinnah-Ghelani’s (2008) research felt that the high cost of assistive technology can make it difficult to accommodate children with disabilities, especially in smaller services. Respondents in Barker et al. (2003) study underlined the importance of specialist equipment in facilitating the effective participation of children with special educational needs in out-of-school care.

The need for adapted outdoor activities was also a point raised in the literature review. Parents contributing to Jinnah-Ghelani and Stoneman’s study (2009) expressed concern that children with disabilities can be excluded from outdoor activities. Parents commented that lack of assistive technology, lack of adequate staff for individualised supervision, or simply lack of willingness to include all children in outdoor activities, can prevent the full participation of children with disabilities in outdoor pursuits. Additionally, children with physical disabilities can sometimes be excluded from activities such as field trips that require accessible transportation. Likewise, providers in Jinnah-Ghelani’s (2008) study raised concerns that some recreation activities typically take place in community settings, some of which may not accessible to children with disabilities.

Other studies highlighted the particular adaptations required to meet the needs of children with specific disabilities or additional needs. For instance, Brennan et al. (2003) found that childcare practitioners developed activities and strategies to promote the social and emotional development of children with emotional and behavioural issues and to convert negative emotions and difficult behaviour to positive feelings and actions.

Evidence from Brennan et al. also revealed that childcare professionals structured activities and developed environments that helped children make gains in self-regulation, attachment to adults, peer relationships, communication and self-esteem. Practitioners placed a strategic emphasis on approaching children as individuals and finding sensory channels to reach all children, helping them to feel safe and calm, and assisting them to focus on relationships and learning. Practice strategies developed for school age children with emotional and behavioural issues included the following:

* involving children in planning age appropriate curricula
* emphasising small group activities
* setting clear boundaries and expectations
* teaching empathy and responsibility through care of plants and animals

#### Services adapt their structure and scheduling to ensure the equal participation of children with disabilities

Jinnah-Ghelani and Stoneman (2009) noted that, as children grow older, they tend to need less structure in activities and are more comfortable with flexible schedules. However, as some children with disabilities grow older, such as children with autism, they may still need structured activities and planned routines. Parents participating in this study noted that ambiguity and lack of structure can make older children with autism uncomfortable and can result in behavioural challenges.

Another consideration highlighted by Mulvihill et al. (2004) is that childcare providers should take account of the fact that children with disabilities may need more time to complete an activity than their peers without disabilities, and therefore practitioners may need to make appropriate adjustments in scheduling. In addition school age childcare providers should recognise that it can take more time to explain to some children with disabilities how to complete some activities.

### School age childcare professionals have positive attitudes and the necessary skills to facilitate the effective inclusion of school age children with disabilities within mainstream childcare settings

A frequent point discussed in the literature is that inclusive school age childcare services require not only a sufficient number of staff, but also that childcare professionals have the requisite skills, training and attitudes to support inclusion. Barker et al. (2003) found childcare professionals with appropriate skills were considered to have a crucial role in realising the potential impact of the service on children with special educational needs. Mulvihill et al. (2004) noted that while all families face difficulties locating and maintaining satisfactory and appropriate school age childcare, for families with children with disabilities there are at least two additional, unique barriers:

* the attitudes of childcare providers regarding the inclusion of children with disabilities in their programmes
* the lack of specialised training and support to equip childcare professionals to provide inclusive childcare

#### Childcare professionals have positive attitudes about the inclusion of children with disabilities in school age childcare programmes

Fewell (1993) noted that one of the characteristics of effective, inclusive childcare services was that staff had positive attitudes about the inclusion of children with disabilities in childcare programmes.[[41]](#footnote-41) Fewell’s study examined the barriers that inhibit provision for children with special needs in childcare facilities (both ELC and school age childcare settings) and reviewed models and practices that are considered effective.

Similarly, Jinnah-Ghelani and Stoneman (2009) noted that one of the most important pre-requisites for an inclusive school age childcare setting is a positive attitude on the part of providers related to the inclusion of children with disabilities in their settings. Additionally, Brennan et al. (2003) revealed that personal values and attitudes were paramount and that staff in inclusive centres shared the view that the role of the service was to promote the success of all children, including those with a disability. Evidence from their study indicates that staff who were in day-to-day contact with families were intrinsically interested in working with children with emotional and behavioural issues, and they paid a great deal of attention to the development of the personal relationships with individual children.

Parents expressed concern that certain childcare providers can have a generalised stereotype that including a child with a disability in their service would inevitably disrupt the setting, placing a heavy demand on time and other resources of staff members (Jinnah-Ghelani and Stoneman, 2009). Parents believed that providing childcare practitioners with appropriate training is one of the best ways to cultivate a positive attitude toward children with disabilities. Parents also suggested that, in addition to training on general disability issues, providers need to know more about specific disabilities so that they can understand and provide for the needs of children with different disabilities within their services.

Research carried out by Jinnah-Ghelani (2008) amongst childcare providers found that they were apprehensive about including children with disabilities in settings because of a lack of knowledge or confidence in their ability to take care of the child. Providers expressed concerns about the safety of the child and other children in the setting, the possibility of the child hurting other children and liability if something happens to the child while they are receiving care in the service. This research also drew attention to the difficulties some practitioners have working with children with disabilities due to the slow rate of noticeable progress in some children. Providers expressed a strong need for more training on disability issues to be able to work effectively with children with disabilities in inclusive settings, in particular behaviour management.

Mulvihill et al. (2004) noted that researchers and practitioners agree that negative attitudes held by childcare providers can be a significant barrier to the availability of a sufficient number of school age childcare services willing and able to serve children with disabilities. Furthermore, the attitudes of practitioners can impact the attitudes of children with and without disabilities and their families, and influence perceptions of children with disabilities. In the absence of disability awareness training, their review found that inexperienced practitioners can organise inappropriate activities and treat children with disabilities as being less able to participate, even though full participation could be achieved through accommodations. This study also noted that in-service training of staff has been associated with greater willingness to care for children with disabilities and that disability awareness training is particularly important so that practitioners can model an acceptance of diversity.

Mulvihill et al. further stated that disability awareness should be ongoing since staff and child turnover in childcare programmes is likely to occur. Their study also noted that families are valuable resource partners, as are children themselves, in developing awareness of disabilities. They can help train staff and create a better understanding of disabilities, and assist in planning activities that foster inclusion. This study suggested that disability awareness training should include the following:

* information about various types of disabilities
* information concerning the legal rights of children with disabilities
* information on fostering positive interactions with children with disabilities
* information on the challenges people with disabilities can face in day-to-day life
* information on special equipment or assistive technology that might be required
* information on any safety issues that should be considered

Another point highlighted in the literature review is that attitudes towards inclusion change when staff work with children with disabilities. Brennan et al. (2003) found that exposure to children with emotional and behavioural issues being successfully cared for in inclusive childcare centres changed the attitudes of recently hired childcare staff (as well as parents of children without disabilities) and provided children with positive experiences of differences in others.

Another major finding of this study was that cultural competence was critical for staff in inclusive childcare services. Staff strove to develop a greater awareness of the ways in which the cultural backgrounds of families affected their daily work, and to become more competent in respecting and dealing with children with disabilities from different cultures. Examples of the relevance of culture discussed by practitioners included family beliefs about appropriate behaviour for children, parents' expectations of their children, attitudes about parenting roles and practices including discipline, and norms for communication. Childcare providers used their knowledge of families’ culture to shape classroom activities, and to facilitate their meetings with parents.

#### Childcare professionals have the necessary skills to facilitate the effective inclusion of children with disabilities within mainstream childcare settings

Ensuring that staff members have the necessary skills to facilitate the effective inclusion of children with disabilities within mainstream school age childcare settings is another point highlighted in the literature. Mulvihill et al. (2004) noted that ongoing staff training and support that goes beyond raising awareness and knowledge levels to actually imparting skills is required for inclusive settings. This study recommends that training to improve the skills of staff should include the following elements:

* Ensure that all staff are given the information they need prior to a child's arrival in a setting. Parental involvement and permission is important from the outset so that initial training can be provided
* Training in specific skills may be needed, such as sign language or behaviour management. Training should address developmentally appropriate practices for all children, as well as specific information about children with different disabilities
* Training should be ongoing. High staff and participant turnover make this a necessity. Regular reinforcement of knowledge and skills development is critical to successful application
* Various forms of training can be used to increase knowledge or skills

Parents stated that they would like school age childcare providers to have certain skills and training, including training in behavioural management and administering medications (Jinnah-Ghelani and Stoneman, 2009). Jinnah-Ghelani (2008) found that childcare providers themselves indicated a need for training and skills development across a number of areas including:

* Developing individualised care plans for children with disabilities
* Modifying activities to include all children, including those with disabilities, while also ensuring that other children are appropriately challenged
* Arranging the physical environment to support the inclusion of children with disabilities
* Achieving the right balance between the provision of support and assistance to children with disabilities, and the need to promote their independence [otherwise known as positive risk-taking]
* Promoting positive interactions between children with and without disabilities
* Working with children who have specific disabilities

On the latter point for instance, many parents participating in Michelle Haney’s (2012) research described the limited expertise of childcare professionals in understanding and addressing the behavioural and social needs of children with autism, and other environmental concerns such as too much stimulation for their child and crowded spaces their child found uncomfortable.[[42]](#footnote-42) Haney’s study explored experiences with and needs for afterschool care by 55 parents of children with autism in the United States.

Brennan et al. (2003) identified staff openness to learning and change as one of the key organisational factors that facilitated the inclusion of children with emotional or behavioural issues. They observed that a wide variety of training modalities were used in inclusive services, ranging from informal supervision and mentorship for new staff members, to more formal training programmes on inclusion. Research carried out by Sharp et al. (2012) amongst 421 out-of-school childcare pro­viders in New Jersey, USA found that higher levels of staff professional develop­ment and years of experience correlated with a positive experience with inclusion. Their study confirmed a statistically significant correlation between increasing hours of professional development and the perception of childcare management and staff that inclusion had a positive effect on children with special needs and on the programme.[[43]](#footnote-43)

### School age childcare managers are committed to the inclusion of children with disabilities within their settings and have effective staff management practices

The need for managers to champion inclusion in school age childcare settings also features prominently in the literature. Mulvihill et al. (2004) stated that inclusive childcare programmes benefit from a committed manager who is proactive, visible and well qualified by either an educational background or professional experience to facilitate inclusion. They found that childcare managers can lead the way in fostering inclusion by demonstrating, through their attitudes and actions, that inclusive childcare is a priority.

This research also revealed that another important task of the manager is to serve as a model and a change agent. If the manager models acceptance and warmth towards children with disabilities, others (such as childcare practitioners, families and children without a disability) are more likely to follow suit. Managers can also demonstrate how to involve families in programmes and activities. According to Mulvihill et al., effective managers will:

* facilitate the development of and adherence to an inclusive ethos
* choose a curriculum or programme that reflects the inclusive ethos
* identify appropriate instructional strategies and resources for staff
* support decision-making about changes in the environment
* develop expert staff
* create opportunities for continued growth
* recognise the expertise of family members

While stressing the importance of childcare managers who are committed to inclusion, Brennan et al. (2003) also noted that practitioners viewed themselves as advocates for the inclusion of children with disabilities in their care.

Another element of inclusive school age childcare identified by Brennan et al. was effective management practices. Their study highlighted that effective managers recognised the essential role of staff in enabling services to achieve inclusion. Management participating in their study were explicit about the ethos of the service when hiring new staff in order to attract staff who shared these essential values. Management also provided opportunities for ongoing professional growth and development so that practitioners could continue to build their competence for inclusion. Furthermore, management viewed training not only as a means of improving the knowledge or skills of staff, but also as an opportunity to learn more about other professional roles and develop new collaborative partnerships.

The majority of the managers in this study were hands-on, whose close involvement in the work of the centre provided them with intimate knowledge of children and their families. They appreciated the daily challenges of the work, and were able to step in during crises to provide a helping hand, direct supervision, or other necessary support. They also recognised the importance of creating a safe climate in which staff felt free to ask for help without fear of being perceived as failures. While practitioners described having fun at work, and the integrity and professionalism of their colleagues, they also talked about the need to be open about the challenges inherent in the work they did, and that it could be a “tough job.” Teamwork was essential to both meeting the needs of the children and to practitioners supporting each other.

### Technical and professional assistance and information is available and provided to school age childcare services (such as expert advice and support on use of Assistive and mainstream technologies for alternative communication and mobility)

Fewell (1993) noted that one of the features of an inclusive school age childcare system is that technical assistance, such as expert advice and support, is available to childcare professionals. Mulvihill et al. (2004) echoed this finding, underlining that childcare providers need a technical assistance system that provides telephone, electronic and onsite support, with easy access to training materials and resources. Likewise, Jinnah-Ghelani (2008) stated that onsite technical assistance should be available to childcare professionals in order to help them address any challenges encountered during the inclusion process. She suggested a range of stakeholders could provide expert advice support, including childcare resource specialists, school personnel, disability service providers or other community providers. Providers in her study emphasised the need for a resource person who could come onsite and guide them on the adaptations and modifications that may be needed for children with specific disabilities.

Additionally, Fewell (1993) highlighted lack of information for school age childcare providers on the inclusion of children with disabilities as a key barrier to inclusion. Relatedly, providers in Jinnah-Ghelani’s study (2008) cited the need for a centralised source of information on effectively supporting the inclusion of children with disabilities in school age childcare settings. Providers highlighted particular difficulties accessing information about the funding available for making adaptations for children with disabilities in childcare settings, and where to purchase necessary equipment and assistive technology.

### Children with disabilities receive continuity of care across care settings with effective inter-agency partnership and cooperation across such settings

Another point raised in the literature on inclusive school age childcare is the importance of ensuring continuity of care across various care settings, given that a range of professionals can be involved in supporting the care of a child with a disability, including teachers; speech, physical and occupational therapists; and medical professionals. Fewell (1993) noted that interagency cooperation, across settings such as health, education and social services, is essential to continuity of care, and ensuring that childcare services are responsive to families of children with disabilities. Fewell advised that agencies must relinquish past partnership models and practices, and embrace a new model of interagency cooperation.

#### Effective cooperation between childcare providers and schools

Jinnah-Ghelani’s (2008) research underscored the importance of effective partnerships between schools and school age childcare providers. Teachers or para-professionals working closely with children with disabilities can provide useful insights into learning and behaviour management strategies, and advice on how best to effectively include a child with a disability within an educational or care setting. This study found that when there is a lack of communication and coordination between the school and the childcare setting, it becomes more difficult for providers to support the developmental and learning goals that they have established for these children.

Providers stated that they would like a resource within the school that they could contact in order to learn more about how best to support the inclusion of a child with a disability. Jinnah-Ghelani noted that difficulties between a school and a school age childcare provider can occur, and can result not only from lack of communication, but also from low understanding of the technical terminology used in documents and plans, such as Individualised Education Plans (IEPs) for children with additional needs.

Haney’s study (2012) on afterschool care for children with autism also underlined the need for better communication and collaboration between special education teachers and afterschool care providers. Haney stated that communication with the school must take place before the child begins in the childcare facility to ensure that providers are aware of a child’s level of support needs. The study underlined that collaboration and communication between teachers and childcare providers should be ongoing, and can be mutually beneficial. For instance, school age childcare providers can help reinforce IEP goals established for a child with a disability in a different setting, and the childcare setting might provide unique opportunities for building additional skills, especially social skills in an inclusive setting.

One of the other findings of Haney’s study is that several parents felt that their child had a positive experience in an afterschool programme because the para-professional working with their child during the school day also cared for them in the afterschool programme.

#### Effective cooperation between childcare providers and health professionals, including therapists

Childcare providers participating in Jinnah-Ghelani’s (2008) study stated that they would like to learn more about the work of therapists in order to apply some of their strategies and techniques within their settings. However, this study noted that it is important that practitioner are willing to take the time needed to use these resources if they are made available. Her research revealed that not all practitioners take the time to learn from therapists, and sometimes childcare professionals view professionals coming into the childcare setting as an opportunity for them to accomplish other work or goals.

In addition, Brennan et al. (2003) emphasised the importance of childcare staff working with mental health professionals in order to ensure children with emotional and behavioural issues receive appropriate support for their mental health needs and maintain their childcare placements. Their study found that mental health professionals were typically asked for support when children exhibited challenging behaviour or difficult emotional states that persisted over time and interfered with their social relationships or learning. In some cases, consultation took the form of programme-level interventions, which resulted in childcare practitioners changing their schedules, activities or classroom environments to better support children’s learning and socioemotional development. At other times, the mental health professionals intervened directly by spending “floor time” observing and working with the child, nearly always in the context of the classroom.

Brennan et al. also found that mental health consultants took on a variety of other roles in the childcare setting, including meeting with family members, training and supporting childcare professionals, arranging formal assessments for children, and making referrals for mental health services.

1. More information on the National Disability Authority is available on our website, [www.nda.ie](http://www.nda.ie) and Universal Design at [www.universaldesign.ie](http://www.universaldesign.ie) [↑](#footnote-ref-1)
2. **Disability Act 2005**, section 26. [↑](#footnote-ref-2)
3. Department of Children and Youth Affairs and Department of Education and Skills (2017) **Action Plan on School Age Childcare**, Dublin: DCYA and DES. [↑](#footnote-ref-3)
4. The registration of school age services was introduced on 2 January 2019 with the **Child Care Act 1991 (Early Years Services) (Registration of School Age Services) Regulations 2018**.  [↑](#footnote-ref-4)
5. Department of Children, Equality, Disability, Integration and Youth (2020) **National Quality Guidelines for School-Age Childcare Services**, Dublin: DCEDIY. [↑](#footnote-ref-5)
6. Government of Ireland (2019) **First 5: A Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028**, Dublin: DCYA. [↑](#footnote-ref-6)
7. Design for All and Universal Design are synonymous and defined in Irish Legislation under the Disability Act 2005 [↑](#footnote-ref-7)
8. Further details available at: <http://universaldesign.ie/products-services/design-for-all-accessibility-following-a-design-for-all-approach-in-products-goods-and-services-extending-the-range-of-users/> [↑](#footnote-ref-8)
9. Department of Children and Youth Affairs (2015) **Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability – Report of the Inter-Departmental Group**, Dublin: DCYA. [↑](#footnote-ref-9)
10. National Council for Special Education (2019) **Policy Advice on Special Schools and Classes: Progress Report**, Trim: NCSE. [↑](#footnote-ref-10)
11. Emer Ring, Tom Grey, Lisha O’Sullivan, Máire Corbett, Jacinta Sheerin and Teresa Heeney, (2019) **Universal Design Guidelines for Early Learning and Care Settings: Literature Review**, Dublin: DCYA & CEUD. <https://aim.gov.ie/wp-content/uploads/2019/06/universal-design-guidelines-for-elc-settings-literature-review-2.pdf> [↑](#footnote-ref-11)
12. ###  More detailed guidance available on the AIM website at:

<https://aim.gov.ie/universal-design-guidelines-for-elc-settings/> [↑](#footnote-ref-12)
13. Department of Education and Skills, **Circular 0030/2014**. [↑](#footnote-ref-13)
14. National Council for Special Education (2018) **Comprehensive Review of the Special Needs Assistant Scheme**, Trim: NCSE. [↑](#footnote-ref-14)
15. Section 58A of the **Child Care Act 1991** as amended by section 22 of the **Childcare Support Act 2018**. [↑](#footnote-ref-15)
16. For instance, the **Childcare Support Act 2018 (Calculation of amount of financial support) Regulations 2019** (S.I. 378 of 2019). [↑](#footnote-ref-16)
17. Ursula Barry (2011) ‘The Provision of Out-of-School Care in Ireland’, **UCD School of Social Justice Working Papers Series**, 11(2), 1-23. [↑](#footnote-ref-17)
18. For more information see Tusla’s website at <https://www.tusla.ie/services/educational-welfare-services/scp/>. [↑](#footnote-ref-18)
19. More information on the National Childcare Scheme is available at the following link: <https://www.ncs.gov.ie/en/>. [↑](#footnote-ref-19)
20. Department of Justice, Equality and Law Reform (2005) **Developing School Age Childcare: Report of a Working Group of the National Childcare Co-ordinating Committee**, Dublin: DJELR. [↑](#footnote-ref-20)
21. Department of Children and Youth Affairs (2015) Inter-departmental Group (IDG) Report on **Future Investment in Early Years** and **School Age Care and Education,** Dublin: DCYA. [↑](#footnote-ref-21)
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23. **UN Convention on the Rights of Persons with Disabilities**, Article 5. [↑](#footnote-ref-23)
24. UN Committee on the Rights of Persons with Disabilities (2017) **Concluding observations on the initial report of the United Kingdom of Great Britain and Northern Ireland**, Geneva: Office of the United Nations High Commissioner for Human Rights. [↑](#footnote-ref-24)
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