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Missouri Schools for the Severely Disabled

Keeping Kids with Disabilities Safe

Provided by the Centers for Disease Control and Prevention

We all want to keep our children safe and secure and help them to be happy and healthy. Preventing injuries and harm is not very different for children with disabilities compared to children without disabilities. However, finding the right information and learning about the kinds of risks children might face at different ages is often not easy for parents of children with disabilities. Each child is different, and the general recommendations that are available to keep children safe should be tailored to fit your child's skills and abilities.

There are steps that parents and caregivers can take to keep children with disabilities safe. To keep all children safe, parents and caregivers need to:

- Know and learn about what things are unique concerns or a danger for their child.
- Plan ways to protect their child and share the plan with others.
- Remember that their child's needs for protection will change over time.

What Can We Do?

Parents or caregivers can talk to their child's doctor or healthcare professional about how to keep him or her safe. Your child's teacher or child care provider might also have some good ideas. Once you have ideas about keeping your child safe, make a safety plan and share it with your child and other adults who might be able to help if needed. Here are some things to think about when making a safety plan for your child:

Moving Around and Handling Things

Does your child have challenges with moving around and handling things around him/her?

Sometimes children are faced with unsafe situations, especially in new places. Children who have limited ability to move, see, hear, or make decisions, and children who do not feel or understand pain might not realize that something is unsafe, or might have trouble getting away.

Take a look around the place where your child will be to make sure every area your child can reach is safe for your child. Check your child's clothing and toys; are they suitable for his or her abilities, not just age and size? For example, clothing and toys that are meant for older children might have strings that are not safe for a child who cannot easily untangle himself/herself, or toys might have small parts that are not safe for children who are still mouthing toys.

Safety Equipment

Do you have the right kind of safety equipment?

Safety equipment is often developed for age and size, and less for ability. For example, a major cause of child death is motor vehicle crashes. Keeping your child safe in the car is important. When choosing the right car seat, you might need to consider whether your child has difficulties sitting up or sitting still in the seat, in addition to your child's age, height and weight. If you have a child with disabilities, talk to your healthcare professional about the best type of car seat or booster seat and the proper seat position for your child. You can also ask a certified child passenger safety technician who is trained in special needs.

Other examples of special safety equipment include:

- Life jackets may need to be specially fitted for your child.
- Smoke alarms that signal with a light and vibration may be better in a home where there is a child who cannot hear.
- Hand rails and safety bars can be put into homes to help a child who has difficulty moving around or a child who is at risk for falling.

Speak to your healthcare professional about the right equipment for your child and have this equipment ready and available before you may need it.



Parent Focus

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Archie Derboven,
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Information concerning other available resources, programs, etc., is not to be construed as an endorsement by Missouri Schools for the Severely Disabled for any specific product, organization, or philosophy.

Talking and Understanding

Does your child have problems with talking or understanding?

Children who have problems communicating might have limited ability to learn about safety and danger. For example, children who cannot hear might miss spoken instructions. Children who have trouble understanding or remembering might not learn about safety as easily as other children. Children who have a hard time communicating might not be able to ask questions about safety. Adults might think that children with disabilities are aware of dangers when they actually are not.

Parents and caregivers may need to find different ways to teach their children about safety, such as:

- Showing them what to do
- Using pretend play to rehearse
- Practicing on a regular basis

Parents and caregivers may need to find different ways to let their children communicate that they are in danger. For example, teaching your child to use a whistle, bell or alarm can alert others to danger. Tell adults who take care of your child about the ways to communicate with your child if there is any danger.

It's also useful to contact your local fire department and explain any special circumstances you have, so that they don't have to rely on the child or others to explain his/her special needs in case of an emergency.

Making Decisions

Does your child have problems with making decisions?

Children might have a limited ability to make decisions either because of developmental delays or limits in their thinking skills, or in their ability to stop themselves from doing things that they want, but should not do. For example, children with attention deficit/hyperactivity disorder (ADHD) or fetal alcohol spectrum disorders (FASDs) might be very impulsive and fail to think about the results of their actions. People often put more dangerous things higher up, so that little children cannot reach them. Your older child might be able to reach something that he or she is not ready to handle safely. Check your child's environment, particularly new places.

Some children might also have problems distinguishing when situations and people are safe or dangerous. They might not know what to do. Parents and caregivers can give children specific instructions on how to behave in certain situations that might become dangerous.

Moving and Exploring

Does your child have enough chances to move and explore?

Children with disabilities often need some extra protection. But just like all children, they also need to move and explore so that they can develop healthy bodies and minds. Some parents of children with special needs worry about their children needing extra protection. It is not possible to protect children from every bump and bruise. Exploring can help children learn what's safe and what might be difficult or dangerous. Being fit and healthy can help children stay safe, and an active lifestyle is important for long-term health.

Children with disabilities might find it hard to take part in sports and active play. For example, equipment may need to be adjusted, coaches may need extra information and support to help a child with a disability, or a communication problem may make it more difficult for some children to play as part of a team.

Talk to your child's teachers, potential coaches, care providers or health professional about ways to find the right balance between being safe and being active.

Other Concerns

Do you have other concerns?

Every child is different. This is not a complete list of questions and concerns, these are just examples. Your questions and concerns may be different. Speak with your healthcare provider, teacher or child care provider to learn more about keeping your child safe.

For more information about keeping your child safe, visit the CDC's website at <http://www.cdc.gov/safechild/>.

Parent Resources

Communicable Illnesses in the School Setting

When a child comes to school ill, everyone is at risk of contracting the illness. It is important that all parents and staff follow the Missouri Schools for Severely Disabled (MSSD) policy for illness. This policy is based on guidelines set forth by the Missouri Department of Health and Senior Services. By working together to keep communicable illness out of our school, parents and staff can help build a safer learning environment for MSSD students.

WHAT REQUIRES EXCLUSION FROM SCHOOL?

Fever

- 100.4° or higher.
- May return to school 24 hours after last episode of fever or with a note from a physician releasing the child back to school.

Diarrhea

- Two or more loose stools while at school or in the previous 24 hours that are not normal for the child.
- May return 24 hours after last episode of diarrhea or with a note from a physician releasing the child back to school.

Vomiting

- Two or more times while at school or in the previous 24 hours that is not normal for the child.
- May return 24 hours after last episode of vomiting or with a note from a physician releasing the child back to school.

Mouth Sores

- Only if there is a risk of transmitting (through aggression, drooling, spitting, etc.) infection to others.
- May return 24 hours after sores have healed or the risk of transmission has decreased, or with

a note from a physician releasing the child back to school.

Rash

- Only if the rash is diagnosed as communicable and is not able to remain covered during school and while on the school bus.
- Exclusion for other symptoms may apply.

Eye Drainage, Redness or Pain

- May return 24 hours after treatment is initiated or last episode of drainage, redness and/or pain, or with a note from a physician releasing the child back to school.

Wounds or Sores

- Only if the wound or sore is not able to be kept covered during school and while on the school bus.
- May return to school when able to keep the wound or sore covered at all times while at school and on the bus. A note from a physician is requested that includes any wound or sore care and infection information.

Other illness not listed may require exclusion from school.

If a child becomes ill at school, the school nurse will check the child as soon as possible. If the child needs to be picked up from school, the building administrator, nurse, teacher or other designee will contact the parent to have the child picked up.

If a child becomes ill at home, notify the school that the child will be absent and keep him or her home.

If a child is hospitalized for any reason, a note from a physician is required to release the child back to school.

The school nurse will be able to answer any questions that parents may have.



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Therapy Dog Visits Helen Davis School

By Jennifer Burns, Home School Coordinator

During the last quarter of the 2014-15 school year, Helen Davis School received a special visit from therapy dog, Bailey, and her handler, Dr. Melinda Kovacs, from the nationally recognized program, Pet Partners, Inc. The timing for this visit was perfect as staff and students began to wrap up a busy school year. Research studies have proven that pets can actually help reduce stress and anxiety in their interactions with people, so this opportunity allowed for everyone to decompress after a busy year. During Bailey's visit at Helen Davis School, it was easy to see the direct benefits to the students. Without even knowing, students were tackling IEP goals and benchmarks by "lifting their heads to make eye contact" with Bailey, "reaching out" to pet her, "crawling" towards her, or "communicating a greeting" or smile. One of the teachers reported a student saying the word "dog" as soon as Bailey entered the classroom, a word not yet heard from this student at school. This visit was also a great opportunity to teach students lessons on how to interact with animals using "nice hands." There were a few students who were unsure of Bailey at first meeting, but they quickly began to ease up after spending a little bit of time with her kind, calm nature. Bailey was welcoming to all students and allowed each to spend time with her in their own way. Bailey's handler, Melinda, is a political science professor at the local university and has volunteered with Pet Partners, Inc. for many years, making visits to local schools and nursing facilities in the community. Melinda hopes to return to Helen Davis School with Bailey for more pet therapy.



Students at Helen Davis School interact with therapy dog, Bailey.



Red Nose Day USA at Boonslick School

On May 21, 2015 staff at Boonslick participated in the inaugural Red Nose Day USA event. The program is dedicated to raising money in a fun way for children who are living in poverty. Student Martel Green, aka The Boonslick Charmer, acquired a red nose and sported it as he cruised about the building with school personnel. He was highly amused when they stopped by the building administrator's office for a visit and discovered that she, too, was wearing a red nose.

