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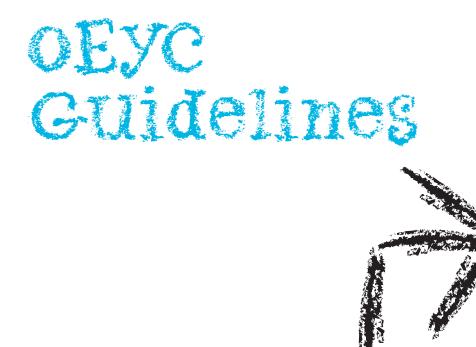
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Introduction

The purpose of the OEYC Special Needs and Inclusion Competency Guidelines is to assist organizations to proactively, naturally and seamlessly welcome and integrate every child and family without exception.

Effective practice is inclusive and breaks down barriers that families living with special needs encounter. To this end, the OEYC Special Needs and Inclusion Competency Guidelines was developed as a guide to help organizations reflect on and shape philosophies, practices and performance related to serving families living with special needs.

WHAT DO WE MEAN BY "SPECIAL NEEDS"?

The Ontario Municipal Social Services Association (OMSSA) defines individuals with special needs as "individuals who, due to emotional, familial, physical, behavioural, developmental, cognitive, communicative or emotional factors, are at risk of not maximizing their potential. Special needs encompasses children who require support and assistance with daily living, whether formally diagnosed or not, and whether a diagnosis is short term or long term in nature". Please note that the terms "special needs" and "extra support needs" have the same meaning for the purposes of this document.

Children and families come to us with a wide range of needs which require flexibility and accommodation to ensure successful participation.

In this document we refer to individuals with special needs, their parents/guardians, siblings, and extended family members as "the special needs community."

WHAT DO WE MEAN BY "INCLUSION"?

In this document, the term "inclusion" refers to beliefs, attitudes, behaviours and practices on the part of individuals, organizations and communities that foster a sense of belonging and affirm each child and family's right to fully participate, contribute and benefit from programs.

LEGAL OBLIGATIONS, GOVERNMENT POLICY AND ETHICS

Quality, inclusive and accessible, community-based programs make a significant contribution to meeting the developmental, social and learning needs of children with special needs. These programs also play a pivotal role in family support as well as the early identification process. Equally important are the unique and rich contributions families living with special needs bring to the programs in which they fully participate. Families and OEYCs, through their combined focus on child development, effective parenting and social support, are in a unique position to provide significant benefits to all children, parents and caregivers.

Families who face barriers to our programs often struggle, on a daily basis, to cope with issues they find overwhelming. Prioritizing inclusive practices as our programs and services evolve and resources become further stretched, means adapting what we do and how we do it, as opposed to doing more. Re-framing how we look at inclusion helps us to recognize that over the long-term, inclusive practices strengthen our organizations, and offer benefits to all children, families and staff.

The Ontario Human Rights Code, The Accessibility for Ontarians with Disabilities Act (AODA) and the City of Toronto's Access and Equity Policy require organizations to be non-discriminatory. Exclusion is never appropriate, whether it is on the basis of race, faith, sexual orientation, gender, gender expression, or disability.

Links to legislation and guiding principles:

Ontario Human Rights Code Click here

Accessibility for Ontarians with Disabilities Act (AODA) Click here

City of Toronto Vision Statement on Access, Equity and Diversity

Click here

The United Nations Convention on the Rights of the Child – Article 23, 1.

"States Parties recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self reliance and facilitate the child's active participation in the community."

Click here

The Canadian Charter of Human Rights and Freedoms – 15, (1)

"Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination based on race, national or ethnic origin, colour, religion, sex, age, or mental or physical disability."

Click here

Canadian Human Rights Act – Employers and service providers are required to accommodate special needs, including those of people with disabilities, short of undue hardship.

Click here

SpeciaLink

The National Centre for Child Care Inclusion outlines six elements that must be present if inclusion is to be a reality in children's programs:

- Zero reject no child is excluded on the basis of level or type of disability
- **Natural proportions** programs include children with disabilities in approximate proportion to their presence in the population
- **Full participation** activities and routines are modified and adapted to include all children
- Same range of program options parents of children with disabilities have the same options that other parents have (program hours, activities, child care for workshops, etc.)
- Maximum feasible parent participation parents are actively encouraged to participate in the program
- Pro-action for community inclusion staff and parents promote inclusion in the whole community Click here

References

Toronto Network of Early Years Centres, 2004. Cultural Competency Guidelines for Service Provision and Administration of OEYC Programs.

The City of Toronto, 2007. Inclusion: Policy Development Guidelines for Early Learning and Care Programs.

Click here

SpeciaLink, The National Centre for Child Care Inclusion, 2005. SpeciaLink Child Care Inclusion Practices Profile and Principles Scale.

Scoring

The Special Needs Competency Guidelines have an easy scoring system to help you clearly identify where your programs and practices meet, do not meet, or exceed the 19 guidelines in the three areas.

- When a criterion is not met 1 point is assigned. Two points are given when a criterion is partially met, or met previously and no longer met. When 1 or 2 points are scored, an Action Plan, including a timeframe then needs to be outlined for meeting the criterion.
- When a criterion is met completely, 3 points are earned. An Action Plan, including a timeframe should be outlined for exceeding the guideline.
 When a criterion is met as well as exceeded in some areas according to the definition in the "exceeds" column, 4 points are earned.
- Five points are earned for exceeding the criterion in all areas, according to the definition given. There are 95 potential points. Organizations and their staff do not win or lose at this activity. Honest reflection will be important in helping organizations and programs identify their areas of strength and struggle, so that families "win" by ultimately receiving the most responsive, most inclusive service.

For more information, please reference for the OEYC Special Needs and Inclusion Competency Guidelines Score Sheet on page 28.

Who scores the OEYC Special Needs and Inclusion Competency Guidelines?

It is recommended that OEYC staff teams of three or more, which may include a frontline staff member, board member, senior management staff member, and/or a program participant, meet to go through the guidelines and score the progress of the Ontario Early Years Centre on the criteria as a group. Senior management review of the scorecard and action plan is required, and it should be signed prior to being submitted to your Ministry of Children and Youth Services (MCYS) program supervisor.

Action Plan

Once a Score Sheet has been completed, an Action Plan must be developed in order to help Early Years staff and organizations to plan and implement what actions will be taken to achieve the next stage of criteria.

For more information, please reference the OEYC Special Needs and Inclusion Competency Guidelines Goal and Action Sheet on page 29.

Who is responsible for the implementation of the Action Plan?

Ontario Early Years Centres are strongly encouraged to identify a lead contact person to take a lead role to ensure that effective practices in special needs and inclusion are supported and implemented.

This person should be responsible for co-coordinating, following-up, and implementing practices identified as action items on the OEYC Special Needs and Inclusion Competency Goal and Action Plan Sheet. This document should be submitted annually to the MCYS.

Administration

Introduction to administration

This section of the OEYC Special Needs and Inclusion Competency Guidelines addresses policy, planning and evaluation issues. It recognizes that program and service practices reflect underlying organizational philosophies, values, and intentions. It asks the questions:

- What are the values of this organization, its board and management?
- What does this organization do to ensure the accessibility of its planning and evaluation processes?
- How does this organization recognize the authority of the special needs communities to define inclusion and access?

Administration guidelines

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
1 . The OEYC vision statement commits to the inclusion of individuals with special needs.	There is no evidence of inclusion in the vision statement.	There is some reference to inclusion in the vision statement but the statement is too broad and does not specifically reference individuals with special needs.	The OEYC vision statement commits to the inclusion of individuals with special needs.	Meets criteria 3 and the vision statement is available in both official languages.	Meets criteria 3 and 4 and the vision statement is translated into two languages other than English or French.

EFFECTIVE PRACTICE EXAMPLES:

- (See Vision Statement sample appendix)
- The vision statement is posted on the OEYC's website.
- The vision statement is posted in large type and in Braille.
- The vision statement is posted at standing and sitting eye-level heights.
- The organization conducts an annual review of the predominant languages that are spoken in the community and updates translations as needed (e.g., City of Toronto Ward Reports **Click here**, Early Development Instrument reports **Click here**).

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
2. OEYC is inclusive of individuals with special needs and has an action plan with a time frame for achievement.	No evidence of inclusion in the plan.	There is some reference to inclusion but the plan does not specify individuals with special needs and does not outline specific steps in action plan.	OEYC is inclusive of individuals with special needs and has an action plan with a time frame for achievement.	Meets criteria 3, plus staff time and resources are committed to actualizing the plan.	Meets criteria 3 and 4 and staff time allocations include time for staff to share materials and resources with colleagues to support the execution of the action plan.

- The OEYC has put in place a mentor to support, encourage and coach staff in their inclusion and early ID work.
- The Action Plan includes clear performance measures with time frames that can be reported upon on a regular basis.
- All staff and board members give input into the development and implementation of the Action Plan.
- All staff and board members are briefed annually about the ongoing implementation process.
- The OEYC conducts regular focus groups / consultation sessions with the special needs community to get their input on the action plan and to improve services.
- A yearly budget is identified for the implementation of the plan. The budget specifies how the funds will be spent (e.g., staff training, purchasing toys, equipment, learning materials, making renovations). Budgeted items are linked to specific aspects of the action plan. If extra staff time is needed to support mentoring relationships, sharing of resources or information from workshops, a budget attached to these activities is needed and demonstrates the OEYC's commitment to the action plan.
- The OEYC remains up to date on current trends and changes that affect the special needs community (e.g., new visual equipment made available for the blind /low vision community).
- Time is allotted in staff meeting agendas for the purpose of sharing current information with coworkers.
- An Action Plan is created from the OEYC Special Needs and Inclusion Competency Guidelines Score Sheet.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
3 The OEYC has a comprehensive inclusion policy and procedures are posted.	No evidence of a comprehensive policy.	The OEYC has an inclusion policy that is incomplete or uses outdated language.	The OEYC has a comprehensive inclusion policy and procedures are posted.	Meets criteria 3 and policy is reviewed every two years with participation from the special needs community and support agencies to make recommendations.	Meets criteria 3 and policy is reviewed annually with participation from the special needs community and support agencies to make recommendations.

- The Inclusion Policy is displayed in the program room in English as well as in the predominant languages spoken in the community.
- A record is maintained of participants who speak the predominant languages in the community and are willing to translate materials for participants requiring assistance.
- The OEYC's outgoing voice mail message includes a statement that all children will be welcomed and included in the program.
- The OEYC's information brochure or registration form includes a Diversity and Inclusion statement that all children and their families will be welcomed and included in the program. Families with previous experience of negative and/or unwelcoming behaviour and attitudes may prefer a more specific statement that individuals with specials needs are welcome.
- The statement could be displayed so that it is visible to anyone who is considering attending the program (e.g., posted outside the program entry way, in a window).
- The Inclusion Policy is made accessible through a variety of ways (e.g., viewable on the agency's website, on the agency's Facebook page, large type in print format).
- For further reference, please see the Diversity and Inclusion Statement in the Sample Policies section of OEYC Guidelines.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
4. Supports are in place to ensure that individuals with special needs and/ or their family members actively participate in the planning and evaluation of services.	No supports for participation are evident.	The supports that are in place do not respond to the individual participation requirements of individuals with special needs and their family members.	Supports are in place to ensure that individuals with special needs and/or their family members actively participate in the planning and evaluation of services.	Meets criteria 3 and individuals with special needs and/or their family members have the support to take a leadership role in planning and evaluation of services.	Criteria 3 and 4 are met and financial support is budgeted annually to ensure that individuals with special needs and/or their family members actively participate in the planning and evaluation of services.

- Families are asked about the specific supports they need in order to actively participate in the planning and evaluation of services.
- Funds are available for parking, cab or transit fares.
- Onsite child minding is offered or funds are provided for child care at home.
- Times for evaluation meetings are convenient for families (e.g., evenings, early mornings, weekends).
- A variety of tools to evaluate services are used (e.g., surveys, telephone questionnaires, face to face discussions).
- Mentoring and coaching are available to support parents in using their skills and experience in a leadership capacity.
- Participants are invited to bring interpreters and/or support persons to any planning meetings.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
5. Planning and evaluation of services to promote inclusion involves specialized organizations and/ or professional representation.	There is no representation from sector.	Organization and staff are aware of some of the specialized services in the area but there is no representation in the planning.	Planning and evaluation of services to promote inclusion involve specialized organizations and professional representation.	Meets criteria 3 and professionals represent two specialized service areas.	Meets criteria 3 and 4 and professionals represent three or more specialized service areas.

- Specialized Service areas include: Developmental Services, Children's Mental Health, Child Protection, Autism, Infant Hearing Services, and Blind/Low Vision Services.
- Other agencies are invited to community outreach events and planning events.
- Other agencies are invited to workshops and events regarding inclusion of individuals with special needs.
- The OEYC participates in community outreach events or information sessions regarding specialized services.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
6. The OEYC has procedures that address incidents, complaints and concerns regarding inclusion which are documented, summarized and sent to appropriate bodies annually.	Procedure not in place.	There is a procedure in place but there is not a process for communicating the procedure to families and caregivers about concerns, issues, or feedback regarding inclusion.	The OEYC has procedures that address incidents, complaints and concerns regarding inclusion which are documented, summarized and sent to appropriate bodies annually.	Meets criteria 3 and the summary is utilized for service planning.	Meets criteria 3 and 4 and there is a procedure in place to actively seek out participant feedback regarding inclusion.

A notice is posted at all sites that indicates who participants can speak with if they have any concerns/issues or any feedback regarding services.

- All complaints/concerns are documented by the receiver on a form developed for this purpose, which includes procedures for processing the complaint and responding to the complainant within a specific time frame.
- Discussion at your Team Meeting about the complaint/concern is documented.
- "Complaints Received" is a standing agenda item for "appropriate bodies" (e.g., steering committee, board of directors).
- A procedure is in place to inform the individual who made the complaint/concern of any follow-up action outlining how concerns were addressed and the steps that were taken to resolve the issue.
- (See sample Feedback Forms, Complaint Forms appendix.)
- There is ongoing dialogue with individuals who have expressed concerns/complaints to ensure that solutions implemented continue to be suitable and meet their needs.
- Parents and caregivers have input into the development and resolution of complaints/concerns.
- When "suggestion boxes" are used to collect feedback, the OEYC uses an appropriate forum to respond to suggestions (e.g., web site, bulletin board, log book).

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
7. Individuals with special needs and/or their family members participate in the planning and evaluation of services.	No involvement.	The organization has had previous success in recruiting individuals with special needs and/or their family members in planning and evaluation, but currently there isn't anyone participating.	Individuals with special needs and/or their family members participate in the planning and evaluation of services.	Meets criteria 3 and members from the special needs community lead workshops for other participants in the agency.	Meets criteria 3 and 4 and mentoring relationships exist (staff : participant / participant : participant) to maintain continuity of participant roles as community educators/ advocates.

- Evaluations are done annually and formal discussions are held to consider and reflect on recommendations.
- Parents and Caregivers are supported to complete evaluations/surveys. Hard copies of surveys are provided to those who prefer pen and paper. Links to online surveys can be accessed on the organization's website or sent by email. Assistance with supervision of children can be offered to parents/caregivers who wish to use the organization's computer to complete surveys. Translation of the survey is provided when needed.
- Parent to parent mentorship/support is established through Participant Advisory Committees, peer support groups and other participant leadership roles.
- There is promotion of the view that families/caregivers have strengths the organization needs by asking for and utilizing their insights and skills.
- Parents and Caregivers are encouraged to participate in experiences that will empower them and motivate them to be involved (e.g., parent panels, workshops, and deputations to foster an understanding of the value of parent/caregivers voices).

Human Resources

Introduction to Human Resources

This section addresses organizational policies and practices specifically relating to HR issues. It is based on the premise that the cultivation of a diverse board, staff and volunteer team that is reflective of the community is in itself an inclusive practice that supports accessibility. It asks the questions:

- What are this organization's employment practices?
- Is this an accessible workplace?
- How does this employer accommodate the special needs of employees with respect to balancing their roles and responsibilities as staff, parents, family members?
- Does staff recruitment, training and evaluation reflect inclusive values and practices? Are inclusive values and practices embedded in all training?
- Are voices from the special needs communities heard in information sharing sessions, program advisory meetings, and staff training sessions?

Human Resources guidelines

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
8. A plan exists to utilize the skills, knowledge and insights of parents/ caregivers in OEYC information sessions and/or professional development.	No plan exists.	While no written plan exists, staff actively utilizes the skills, knowledge and insights of parents/ caregivers in OEYC information sessions and/or professional development.	A plan exists to utilize the skills, knowledge and insights of parents/ caregivers in OEYC information sessions and/or professional development.	A plan exists and parents/caregivers deliver 10% of OEYC information sessions annually.	Criteria 3 and 4 are met. The OEYC also documents, shares and celebrates the contributions of parents/ caregivers to the organization's effectiveness.

EFFECTIVE PRACTICE EXAMPLES:

- When interacting with parents/caregivers, staff engage them with an awareness of their potential as resources to the OEYC. A culture is cultivated that views parents/caregivers as resources and as possessing expertise of value to staff and other parents/caregivers. Staff directly approaches parents/caregivers with requests to share their skills, knowledge and insights
- The OEYC newsletter, website and all other communications are used to make parents/caregivers aware that the OEYC needs their skills, knowledge and insights as resources. Parents/caregivers regularly contribute to the OEYC's newsletters or website.
- Goals for parent/caregiver contributions are set and staff in charge of planning staff training and community workshops will track these contributions to determine achievement.
- Contributions of parents/caregivers are documented in the OEYC's annual report, newsletters, website, etc.
- Contributions are recognized through celebratory events and/or certificates of appreciation. Corporate partners are asked to donate spa, restaurant, and/or wellness certificates, etc., to recognize contributions.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
9. The performance appraisal system addresses staff competence around issues of inclusion at all levels of the OEYC.	The performance appraisal system does not address staff competence around issues of inclusion.	The performance appraisal system address special needs competency for program staff only.	The performance appraisal system addresses staff competence around issues of inclusion at all levels of the OEYC.	Meets criteria 3 at all levels of the organization.	Criteria 3 and 4 are met. The OEYC also formally recognizes excellence in special needs competency.

- The OEYC works with employees to develop achievable learning goals that specifically advance the values of the organization and its inclusiveness.
- The OEYC works with employees to identify evidence of achieving learning goals related to inclusion (e.g., a portfolio, program plan, manual, workshop, and set of picture symbols for the program).
- Criteria 3 goals are met across all levels of the organization (e.g., maintenance, administration, management, board of directors, program).
- The OEYC works with employees to develop them as inclusion mentors as part of the employee's performance plan.
- The OEYC recognizes outstanding inclusion work through awards, special mentions, etc.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
10. OEYC designates funding for professional development that incorporates inclusive principles and practices for all OEYC staff and volunteers.	OEYC has no designated funding for professional development that incorporates inclusive principles and practices for all OEYC staff and volunteers.	The agency pays for professional development that incorporates inclusive principles and practices but there is no designated funding within the annual budget.	OEYC designates funding for professional development that incorporates inclusive principles and practices for all OEYC staff and volunteers.	Meets criteria 3 and a best-practices approach to inclusion/special needs is imbedded in all professional development.	Criteria 3 and 4 are met and implemented across all levels of the organization.

- Funding is available for annual Accessible Ontario for Persons with Disabilities Act (AODA) and Ontario Human Rights Code training. Additional funding is available to support training for early identification, environmental design and set-up, working with families, and training to increase staff knowledge about specific conditions (e.g., Autism Spectrum Disorder, Fetal Alcohol Spectrum Disorder).
- All professional development is based on and reinforces inclusive principles, practices and current research, regardless of the topic. For example, training on literacy will be based on the assumption that literacy activities are offered to all children and families and that children who have special needs may require adaptations or accommodations.
- Training on housing will reflect the understanding that individuals with special needs do face crises in housing and have diverse housing requirements.
- Cleaning and maintenance staff will be trained in sensitivity toward individuals they encounter with extra support needs. Human Resource staff will be trained in providing staff conflict resolution support that reflects knowledge, skills and sensitivity to individuals living with disability issues.
- Current information and best practices in the area of special needs is a standing agenda item at staff meetings. Staff are encouraged to share an article, watch a DVD, or present information from a workshop attended.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
11 Human Resource policies allow flexibility to staff caring for family members who require extra supports.	Human Resource policies are not flexible for a staff member whose family members require extra supports.	While no Human Resource policy addresses this, flexibility for staff is negotiated on a case-by-case basis.	Human Resource policies allow flexibility to staff caring for family members who require extra supports.	Meets criteria 3 and the organization demonstrates a willingness and commitment to negotiate arrangements based on individual staff needs.	Criteria 3 and 4 are met and the organization commits to an employee-retention plan that recognizes the additional stresses experienced by employees living with disability issues.

- Flexible staff work hours are considered and there is allowance for some flexibility regarding work to be carried out from home.
- The OEYC considers relocation of staff to a closer program if necessary (e.g., move staff from a satellite to the main site if it is closer to home for them).
- The OEYC arranges for a team member to step in as back up in the event an urgent call is received by a staff person who has a child with special needs from the child's school, child care, etc.
- Optional counseling is made available for staff.
- Ongoing wellness support for the staff is provided. For example, the symptoms of stress are recognized and support is offered to assist in performance maintenance.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
12. Human Resource policy provides accommodation for staff who require extra supports.	Human Resource policy does not provide accommodation for staff who require extra supports.	While no Human Resource policy addresses this, accommodations for staff is provided on a case-by-case basis.	Human Resource policy provides accommodation for staff who require extra supports.	Meets criteria 3 and the OEYC allocates a budget to provide accommodations for staff.	Criteria 3 and 4 are met and the OEYC references the policy in job postings.

- Accommodations are tailored to individual needs and may include nutrition breaks for diabetics, medication or washroom breaks as medically needed, accommodation for extra medical appointments, workplace restrictions on allergens (such as latex), scheduling accommodations to address medically established fatigue, providing equipment such as adapted workstations, chairs, modified lighting and visual markers.
- The OEYC keeps a list that is updated regularly of accommodations required by its workforce. Budget is allocated to support the accommodations as needed.
- Job postings state that the OEYC is committed to accommodations for qualified candidates as required.

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
13 . The DEYC is a physically accessible workplace.	The OEYC is not a physically accessible workplace.	The OEYC has a plan to address physical accessibility for employees within 12 months.	The OEYC is a physically accessible workplace.	Meets criteria 3 and all newly renovated areas of the workplace incorporate universal access.	Criteria 3 and 4 are met and all areas of the workplace are universally accessible.

- The workspace, washroom, building entrance and equipment are adapted to provide access to employees using wheelchairs, walkers, standing braces, and to employees with physical challenges.
- There is a checklist for each area of the OEYC that identifies materials, items and places that need to be physically accessible. The checklist is reviewed annually to identify changes and upgrades pending and completed.
- The OEYC physical environment is "reviewed" by a staff member from another agency (preferably one with a special needs background).
- As improvements and upgrades are planned and completed, the principles of universal design underlie every upgrade. For example, when new taps or hand dryers are installed, the type with a motion sensor would be chosen. When a washroom renovation is planned, all doors and stalls are wide, toilets are flushed by motion sensor, all sinks and diaper changing surfaces are wheelchair accessible.
- Universal access and design principles are part of a concept of design right from the beginning and embody characteristics that make a physical environment accessible to all people. Hallways are wide enough for wheelchairs, bathrooms are accessible and kitchen countertops are reachable. At its best, universal design is so well done that adaptations are invisible (e.g., there is no ramp because the threshold of the building is at ground level). The field of universal design is opening up rapidly, as a large proportion of our adult population ages and expect to remain active and independent. As universal design applies to equipment and materials, items such as door handles, kitchen utensils (such as "Good Grips"), pens and pencils, forks and spoons and hairbrushes are designed so that people with motoric issues, etc., can use everyday items and fully participate in routines and activities. (Adapted from SpeciaLink Inclusion Practices and Profile and Principles Scale, 2005 final workshop edition.)

Links to www.connectability.ca:

Article on Creating a Positive Environment: http://connectability.ca/2010/10/29/creating-a-positive-environment/

Article on Classroom Layout Tips: http://connectability.ca/2010/10/29/classroom-layout-tips/

Audio-Visual Workshop on Safe Adapted Environments: http://connectability.ca/2010/09/25/safe-adapted-environments/

Program

Introduction to Program

The Program section of this document addresses service and program delivery. It recognizes that space, learning opportunities, the habits, behaviour and attitudes of staff and program participants impact the actual experiences of families and children in our programs. It asks the questions:

- Is serving children with special needs the responsibility of the entire staff team or just the specialist?
- How are opportunities for the success of every child built into programs?
- How is the larger group involved in the inclusion of families living with special needs?
- Does program planning reflect the needs of typical children only, or all children?

Program guidelines

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
14. All early opportunities allow for accommodations and adaptations to meet the extra needs of participants.	Few early learning opportunities allow for accommodations and adaptations to meet the extra needs of participants.	Accommodations within some early learning opportunities are made, but tend to single out / isolate participants; accommodations are made at the convenience of the program (e.g., when it's not "too busy").	All early learning opportunities allow for accommodations and adaptations to meet the extra needs of participants.	Meets criteria 3 and facilitates involvement of parents/caregivers in the adaptation of programs and services.	Learning opportunities and materials are structured with the expectation that every child in the program will use the materials differently and require varying levels of support.

EFFECTIVE PRACTICE EXAMPLES:

- Principles of ELECT (Early Learning for Every Child Today) form the basis of practices and beliefs about play and curriculum planning in the OEYC.
- Extra support needs are anticipated before they present themselves and assumptions are not made. Staff recognize that while some special needs may appear to be similar in the way they present, not all adaptations and accommodations will be the same.
- A range of toys and materials are available or adapted to meet a wide range of needs, (e.g., chunky paint brushes that are easy to grip, paint brushes with long handles for children who may be reluctant to touch or feel paint or glue, several different types of scissors, puzzles with chunky handles).

Links to www.connectability.ca:

Self-directed Workshop – Toy Shop 2 (on adapting play materials): http://connectability.ca/2010/09/24/toy-shop-2/

Audio-Visual Workshop – Adapting Play Materials: http://connectability.ca/2010/09/24/adapted-play-materials/

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NOTES:

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
15 All OEYC actively respond to the needs of participants and make accommodations and program adaptations as required.	OEYC staff are aware of and acknowledge the special needs of participants, but no adaptation evident.	There is only one staff person responsible for working with participants with special needs and accommodations are not consistently offered by all staff.	All OEYC staff actively respond to the needs of participants and make accommodations and program adaptations as required.	Meets criteria 3 and has a process for engaging parents and caregivers around accommodations and adaptations.	Staff engage in an ongoing reflective process about their own feelings and behaviours and interactions relating to accommodations and adaptations for participants.

EFFECTIVE PRACTICE EXAMPLES:

- The OEYC staff convey sincerity and openness in offering assistance to participants.
- Staff are sensitivity to boundary issues and comfort levels of each individual participant.
- Interactions with participants are initiated in a number of ways (e.g., ask "How can I help you?").
- Staff express a desire to learn about the individual needs of participants and actively seek the insight of participant.
- Staff consider the participant an "expert" about their own accommodation needs. This applies equally to children whose behaviour gives us clues as to what they might need or want.
- Staff avoid making generalizations and recognize that the needs of one individual with special needs will not be the same as another.
- All staff members debrief and share observations with one another regarding interactions and how they may be perceived.

Links to www.connectability.ca:

Audio-visual workshop on Informed Consent and privacy: http://connectability.ca/2010/09/24/informed-consent/

Article on building relationships with families: http://connectability.ca/2011/10/26/talking-to-the-family-about-your-concerns/

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
16 Existence of materials (including written and symbolic materials, books, parenting resources, posters, forms, displays, toys, videos) that represent people of diverse abilities.	Resources reflect typical abilities only.	There are materials that show diverse abilities but they are outdated or stereotypical.	Existence of a range of materials (including written and symbolic materials, books, parenting resources, posters, forms, displays, toys, videos) that reflect people of diverse abilities.	Meets criteria 3 and the OEYC allocates a percentage of its program budget to the purchase of materials reflecting people of diverse abilities.	Meets criteria 3 and 4 and families are involved in the process of selecting and updating resources.

- A checklist is used to ensure all materials are current and free from bias.
- Parents and caregivers are invited to read, review, and give suggestions about materials for the program.
- Suggestion boxes and other feedback tools are available for participants to make requests and provide suggestions regarding the purchase of new materials.
- Visuals and materials depicting people with diverse abilities are displayed and available across program areas instead of being grouped together in one display.

Links to www.connectability.ca:

Article on Creating a Positive Environment: http://connectability.ca/2010/10/29/creating-a-positive-environment/

Article on Classroom Layout Tips: http://connectability.ca/2010/10/29/classroom-layout-tips/

Self-directed workshop on Sensory Integration: http://connectability.ca/2011/02/02/sensory-stimulation/

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
17 The OEYC site / satellite is physically accessible.	The site is not physically accessible.	Some parts of the OEYC site/satellite are physically accessible. (e.g., there is a ramp at the entrance but stairs leading into the program room).	The OEYC site / satellite is physically accessible.	Meets criteria 3 and all learning activity areas are physically accessible.	Meets criteria 3 and 4 and other barriers to full participation are addressed.

- The program rooms, washrooms, building entrance and equipment are adapted to provide access to participants with physical challenges and those using wheelchairs, strollers, walkers or standing braces.
- There is a checklist for each area of the OEYC that identifies materials, items and places that need to be physically accessible. The checklist is reviewed on an annual basis to determine what has been or needs to be changed or upgraded.
- The OEYC physical environment is "reviewed" and rated by a staff member from another agency, preferably one with a special needs background (e.g., play areas are spacious enough for a wheel chair to enter, turn, and approach, program activities reflect a high level of understanding of sensory integration issues, such as lighting, noise, smells, and address the issues of both the under and over responder).

Links to www.connectability.ca:

Article on Creating a Positive Environment: <u>http://connectability.ca/2010/10/29/creating-a-positive-environment/</u>

Article on Classroom Layout Tips: http://connectability.ca/2010/10/29/classroom-layout-tips/

Self-directed workshop on Sensory Integration: http://connectability.ca/2011/02/02/sensory-stimulation/

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
18. Collaboration and demonstrated linkages and referrals to specialized organizations and programs.	No collaboration or demonstrated linkages.	Linkages reflect informal networking of program staff but are not a reflection of deliberate, active organizational collaboration.	Collaboration and demonstrated linkages and referrals to special needs agencies.	Meets criteria 3, and sustains ongoing collaboration with special needs agencies to ensure successful linkages.	Meets criteria 3, and 4, and parents are encouraged to share individual support plans. Staff partner with parents/ caregivers in their implementation.

- The OEYC offers or actively refers families to "Let's Get Started" programs or those with a similar mission and purpose.
- Communication checklists, such as Talking Matters (www. tpsls.ca), Nipissing Screens (www.ndds.ca), Best Start On Track Guide (www.beststart.org/OnTrack_English) are used to support parents and caregivers in determining referral and support needs. OEYC staff partner with families to refer for assessments as needed and requested by the parent or caregiver.
- Resource binders containing current information about specialized services, supports and agencies are available and are maintained with up to date information.
- Specialized service professionals (e.g., Occupational Therapists, Speech Language Pathologists, Special Needs Resource professionals) visit the program to provide resources to families in various formats, such as workshops, meet and greet and one to one (as appropriate). Privacy, confidentiality and consent requirements are met at all times.
- The OEYC offers space for families to meet with specialized service professionals.

Link to Toronto Early Childhood and Family Resource System –Pathway and Resource listing: http://healthykidstoronto.ca/index.html

Links to www.connectability.ca:

Audio-visual workshop on Informed Consent: http://connectability.ca/2010/09/24/informed-consent/

Guideline	1 Does not meet criteria	2 Approaches criteria	3 Meets criteria	4 Exceeds criteria in some areas	5 Exceeds criteria in all areas
19. The OEYC program accepts and integrates every child (birth to six years) and their family.	The OEYC occasionally turns away, or implements conditions to the attendance of children and adults due to their behaviour or their disabilities.	The OEYC welcomes all children but struggles to fully integrate some children in a meaningful way.	The OEYC program accepts and integrates every child (birth to six years) and their family.	Meets criteria 3 and the OEYC has inclusion ambassadors – participants who model welcoming and inclusive behaviours.	Criteria 3 and 4 are met and the OEYC actively involves all children and their families in meeting the program's inclusion responsibilities.

- Learning materials such as musical instruments, dress up clothes and art utensils are offered to every child and/ or their parent/caregiver. Often, modifications are easily made to learning materials and program activities to encourage children to participate to their full ability. Examples of easily made or modified play materials can be found on the connectability.ca web site. <u>http://connectability.ca/2010/07/24/supported-inclusion/</u>
- Visual schedules and songs are used to help children understand routines and anticipate transitions.
- OEYC staff are aware of children's sensitivities and incorporate strategies to help decrease stimuli within the program (e.g., avoid flashing lights for light sensitivities, avoid loud noises, such as handclapping when there are auditory sensitivities).
- Program staff partner with parents and caregivers to learn and discover each child's areas of strength, which then form the basis for the child's participation.
- When a child exhibits challenging behaviours, staff look for ways to allow the child to use the behaviour as a strength. For example, when children run in the program, a game or activity incorporating safe running is developed. When children engage in gross motor play that is disruptive, staff develop alternative, more appropriate activities that allow the child a similar level of gross motor stimulation.
- Staff, together with families, explore the possibility that challenging behaviours are symptoms of distress and implement activities known to calm the nervous system (e.g., swinging, rocking, swaddling/deep pressure, lower lighting).
- When children engage in behaviours that bring negative attention or disapproval from participants, staff model a supportive attitude and simply say the child is still learning the skill (e.g., sharing toys, taking turns, sharing space).
- Staff support connections between families by introducing parents of children with special needs to others in the program. They are able to identify participants who are likely to be good allies.
- Staff give positive reinforcement to program participants whose attitudes, actions and words reflect inclusive values.
- Consistency and predictability within the program help children learn routines and transitional processes.

Links to www.connectability.ca:

For tips on using teaching tools for the development of language, social, motor, sensory, and cognitive skills, go to www.connectability.ca to view these resources: Communication Posters; Everyday Opportunities to Practice Turn Taking; Activities That Encourage Sharing and Co-operating; Teaching Your Child About Emotions; Encouraging Positive Behaviour; Using Visuals; Using Visual Sequences to Teach Self-Care Skills; Flip-Flop Over the Top Sequence; Toilet Training Sequence; Preparing Children For Transitions; Building Early Literacy Skills Parts 1 and 2.

Score sheets

OEYC Special Needs Inclusion and Competency Guidelines Score Sheet

ency nan	ne			Riding			Date
	DOES NOT MEET CRITERIA	APPROACHES CRITERIA	MEETS CRITERIA	EXCEEDS CRITERIA IN SOME AREAS	EXCEEDS CRITERIA IN ALL AREAS		
ltem #	1	2	3	4	5		
1							
2							
3							
4							
5							
6							ADMINISTRATION
7							TOTAL
Total							
ltem #	1	2	3	4	5		
1]	
2							
3							
4							
5							
6]	H.R.
7							TOTAL
Total							
Item #	1	2	3	4	5		
1							
2							
3							
4							
5							PROGRAM
6							TOTAL
Total							

OEYC Special Needs and Inclusion Competency Guidelines Goal and Action Sheet

Year

Centre

Agency

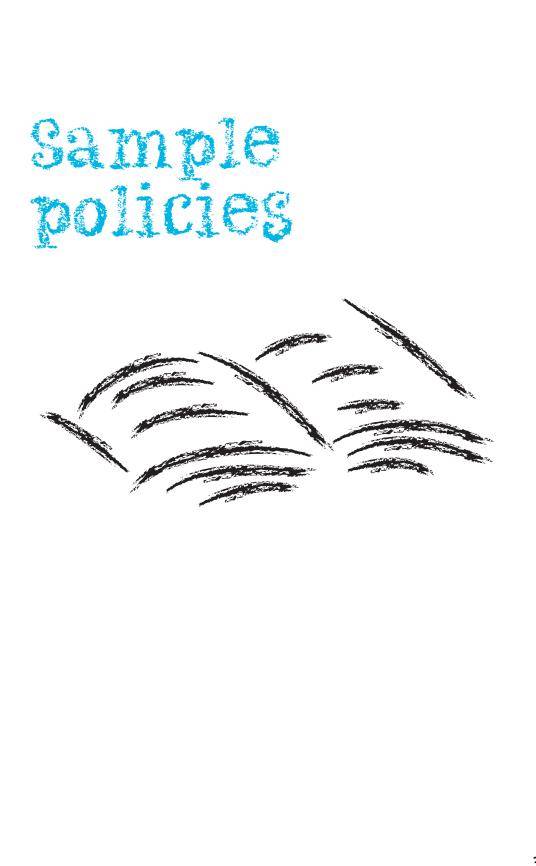
OEYC Program Manager

Names and Titles of who participated in completing this assessment.

Guideline Section	Guideline #	Criteria/Goal plan/Follow-up Implementation of Effective Practice (Detail plan for all areas not meeting criteria / timeframe)	Who is Responsible?
Administration			
Human Resources			
Program			

Additional comments

Signature Executive Director



Sample policies

Accessibility client feedback form

[your organization] welcomes feedback on how we provide services to clients with disabilities. Our goal is to ensure we meet the needs and expectations of our clients and their families with disabilities in a manner that promotes and respects dignity, independence, integration and equal opportunity. Comments on our services regarding how well those expectations are being met are welcomed and appreciated. Feedback can be provided in person, via e-mail ([your organization's email contact]), or in writing utilizing the form below. All feedback will be forwarded to the agency's Human Resources Coordinator; clients can expect a response to their feedback within 5 business days.

Date: ______
Comment/Suggestions: ______
Program/Service Being Commented On: ______
Your name: ______
Your contact information: ______

For Office Use Only

STAFF RECEIVING CLIENT FEEDBACK:

STAFF COMMENT TO CLIENT, IF ANY:

STAFF (HR COORDINATOR) RESPONDING TO THIS FEEDBACK:

DATE OF RESPONSE:

METHOD OF RESPONSE:

Accessibility policy – sample

PURPOSE

[your organization] is committed to developing policies, practices, and procedures that provide accessible quality services to its clients. Services will be provided to clients with disabilities in a manner that promotes and respects dignity, independence, integration and equal opportunity.

[your organization] is dedicated to ensuring all programs and services are accessible to its clients in accordance with Ontario Regulation 429.07 Accessibility Standards for Customer Services.

SCOPE

This policy applies to all employees and Board members of *[your organization]* as well as volunteers, student interns, and users of *[your organization]* services and facilities including members.

Failure to comply with any policies and procedures will result in disciplinary action in accordance with the agency's Human Resources Manual.

POLICY

General Statement of Principles:

[your organization] is committed to ensuring that the Policy and related practices and procedures are consistent with the following four core principles:

- i. Dignity
- ii. Equality of Opportunity
- iii. Integration
- iv. Independence

COMMUNICATION

[your organization] is committed to communicating with clients with disabilities in different or alternative ways that take into consideration their disability.

- Staff will be trained on how to interact and communicate with clients with disabilities in a manner that is respectful of a client's dignity and independence.
- Alternative methods of communication will be provided as requested. Staff will be trained to communicate with clients over the telephone in clear and plain language and to speak clearly and slowly.

USE OF ASSISTIVE DEVICES

Assistive devices, guide animals and/or support persons may be used by clients to assist in accessing services at the Club.

- [your organization] may require a person with a disability to be accompanied by a Support Person where it is necessary to protect the health or safety of the person with a disability or the health or safety of others on the premises.
- All service animals must have proof of inoculations/ vaccinations as required under the Day Nurseries Act [or other legislation / regulation]
- The use of assistive devices must be in compliance with the regulations outlined in the Day Nurseries Act and the City of Toronto's Children's Services' Operating Criteria or other regional requirements.
- Staff and volunteers will be properly trained in how to interact with clients with disabilities who are accompanied by a service animal, a support person and/or are using an assistive device.

NOTICE OF TEMPORARY DISRUPTIONS

[your organization] will notify clients if there is a planned or unexpected disruption of a facility or service persons with a disability use to access our services. The notice will be posted on our website, at the entrance of the applicable premises as well as being provided verbally, electronically or in person as applicable. The notice will include the following information:

- That a facility or service is unavailable.
- The anticipated duration of the disruption.
- The reason for the disruption.
- Alternative facilities or services, if available.

FEEDBACK PROCEDURE

The Accessibility for Ontarians with Disabilities Act, 2005 requires [your organization] to implement a feedback method that allows clients to provide feedback on perceived barriers, including how to ask for assistance.

[your organization] will accept feedback in a variety of ways including in person, by telephone, in writing, electronically or otherwise. All feedback received from clients of in respect to accessibility will be forwarded to the Coordinator of Human Resources for response. The agency's regular complaint management procedures will be utilized to develop a response to the client's feedback. Our feedback protocol requires [your organization] to respond to all client inquiries within five business days.

TRAINING AND RECORDS

[your organization] will provide training and ongoing training as required under the Accessibility for Ontarians with Disabilities Act, 2005 to all persons to whom this policy applies as well as to those persons charged with developing this policy and related procedures and practices.

CONTENT OF TRAINING

Training will include:

- i. A review of the purpose of the Act and requirements of the Standard.
- ii. A review of the Policy.
- iii. How to interact and communicate with persons with various types of disabilities.
- iv. How to interact with persons with a disability who use an Assistive Device or require the assistance of a Service Animal or Support Person.
- v. How to use equipment or devices made available on our premises to assist persons with a disability to obtain, use or benefit from our goods and services.
- vi. What to do if a person with a disability is having difficulty accessing our premises and/or services.

Timing of Training

Training will be provided to all persons to whom this Policy applies as soon as practicable after he or she is assigned the applicable duties.

Documenting Training

Records of the training provided, including the training protocol, the dates on which the training is provided and the number of individuals to whom the training is provided shall be maintained in accordance the requirements of the Act.

The above policies and procedures will apply to all services that are delivered by the *[your organization]* including services delivered in person, by telephone, electronically, visually, orally or by written materials.

All Accessibility Policies of *[your organization]* are available to our clients. Alternative formats will be made available upon request.

Accessibility policy – staff acknowledgement form

[your organization] is committed to developing policies, practices, and procedures that provide accessible quality services to its clients. Services will be provided to clients with disabilities in a manner that promotes and respects dignity, independence, integration, and equal opportunity.

I acknowledge that I understand this policy after reading it in its entirety and after attending the agency's Accessibility for Ontarians with Disabilities Act (AODA) training program.

I have had the opportunity to ask my manager questions pertaining to this policy. I understand the importance of the policy and the use of the outlined complaint procedure.

I understand if I violate [*your organization*] Accessibility policy, I will be subject to corrective action up to and including termination of employment.

Staff Name: (please	se print)
Staff Signature:	_ Date:
I have discussed the Accessibility policy with this employee_	
Authorizing Signature:	_ Date:
Position:	

ANNUAL REVIEW OF ACCESSIBILITY POLICY

Staff signature	Date	Reviewed by

Compliant handling guidelines

Purpose: To effectively and uniformly manage customer service complaints to ensure exceptional, equitable and accessible customer service and to identify areas in need of improvement.

Application:_(indicate that the policy applies to all your organizations operations or which programs the policy applies to)

Definition: A complaint is a customer's expression of dissatisfaction with service received from a program or service where the customer believes that the organization has not provided a service to their satisfaction and there is an expectation of a response or resolution. A complaint can be about service delivery in one or more of the following:

- Organizational policy, process, procedure
- Employee conduct (customer feels employees were unfair, not courteous or lacked knowledge)
- Access to service
- Timeliness of service
- Outcome (customer feels a positive outcome was not achieved)
- Quality of service
- Standard of service

The complaint guidelines do not apply to the following:

- Anonymous complaints
- Allegations of fraud
- Complaints by employees
- Appeals
- Serious Occurrence reporting
- General enquiries, feedback, compliments, suggestions and service requests

GUIDING PRINCIPLES FOR THE COMPLAINTS PROCESS:

Accessibility._Complainants will be able to start the complaints process at any point during service delivery by phone, letter, fax, e-mail or in person and the process will conform to the "Access for Ontarians with Disabilities Act" **(AODA)** requirements.

Visibility_Information about how and where to complain will be well publicized on the Children's Services website and through other established means of public communication, such as brochures or pamphlets.

Responsiveness._Complaints will be acknowledged in writing, by phone or in person as per divisional response standards and complainants will be advised of the expected time frame for resolution of the complaint and further advised of any delays in resolving the complaint.

Confidentiality. Complaints will be dealt with in a confidential manner in accordance with the organization's confidentiality policy.

Customer Focus. Employees will communicate to the public that complaints are taken seriously and will be dealt with in a manner that meets and exceeds customer expectations, recognizing that existing resources, regulatory and policy constraints will guide service standards.

Documentation._complaints and their outcomes will be logged to track complaint trends and identify service areas that need improvement.

Monitoring/Evaluating. Data collected regarding complaint trends will be maintained and monitored to assist in setting of priorities and plans for service improvement.

Training/Communication._Complaint guidelines will be posted on the organization's website and all employees will be made aware of the complaint procedures during orientation and through ongoing training as needed.

COMPLAINT HANDLING PROCEDURE

Customer Initiates Contact/Complaint. A verbal (made in person or by phone) or written complaint (filed by hand delivery, mail, fax or e-mail) will be received by an employee. A form will be available to help complainants make a written complaint.

Response Standards. Employees are expected to return voice mail messages within one business day and to reply to e-mails within two business days. Complaints will be prioritized by the complaint owner based on the severity, seriousness and complexity of the complaint. While response time targets for investigation and resolution of complaints will vary, in most cases, complainants can expect to be notified of the outcome of the complaint within ten business days. Complainants will be notified if there will be a delay in resolving the complaint.

Informal Resolution. Employees are expected to provide high quality service and to make every effort to resolve customer complaints or concerns informally to the satisfaction of the customer where possible. The majority of complaints are likely to be resolved before formal action is needed if employees demonstrate common courtesy, respect and sensitivity when dealing with the public.

Where a complaint is successfully resolved informally, logging of the complaint is not required. However, regular procedures that exist within a unit for documenting interactions with customers will apply.

FORMAL ACTION

Assess. When a complaint is received, the employee who received the complaint will if necessary connect the complainant with the appropriate unit or section where it will be determined if there have been any previous complaints from this complainant or other complaints already received to avoid duplication of effort. All relevant information will be gathered and appropriate action identified. Where an employee is not able to successfully resolve the complaint informally, the complainant will be advised that the complaint is being referred to the employee's immediate Supervisor/ Manager. The Supervisor/Manager then becomes the complaint owner and will be responsible for acknowledging the complaint by phone, email or in person as per response standards and for investigating, logging and resolving the complaint.

Investigate/Monitor. A tracking form will be used by the Supervisor/Manager (complaint owner) to log all formal complaints and action taken from the time the complaint was received to the time the complaint is resolved. The complainant will be provided with a unique tracking number, contact information for the complaint owner and informed of the steps that will be taken to resolve the complaint, including the estimated response time for resolution of the complaint. The complaint owner will consult with all relevant staff, review all relevant information, investigate and identify appropriate action to resolve the complaint and will update the tracking form as needed. If the complainant is not satisfied with the outcome, the complaint owner will escalate the complaint to their immediate Manager or to a Senior Manager or to the Executive Director. The Manager is responsible for informing Senior Management of the complaint and to prepare them to take additional action to resolve the complaint, as necessary. The original Supervisor/Manager (complaint owner) will continue to monitor the situation and will keep the complainant informed of steps being taken to resolve the complaint until complaint closure.

Resolve/Notify. Following an investigation, the complainant will be notified of the outcome. If the original complaint was received in writing, the complainant will be sent a letter with the final decision, unless the complainant requests a different means of response. If the original complaint was received verbally, the complainant will be contacted by phone unless the complainant requests a written response or where the Supervisor/Manager deems that a written response is warranted. Where the proposed resolution is acceptable to the complainant, the complaint is closed and all

relevant information and the outcome is recorded on the tracking form by the Supervisor/Manager (complaint owner). Any relevant documents, including a copy of any letters sent to the complainant, will be attached to the tracking form. An internal review of complaints may not always result in resolution and a complainant may decide to escalate the issue to the level of an *external review*, such as the organization's board of directors, funders or the Human Rights Commission or litigation.

Approved by:	Date approved:
Effective Date:	_ Date Last Updated:

OTHER REFERENCES: SERIOUS OCCURRENCE REPORTING PROCEDURES, AODA, HUMAN RIGHTS POLICY.

Compliant mechanism

POLICY

[Your organization] is committed to providing the best supports and services possible to the community. In an effort to remain responsive, we encourage individuals in service, families, members, volunteers, staff, and the community at large to share concerns, questions and ideas.

Anyone who expresses concerns or complaints or provides information regarding a complaint under this policy may do so without fear of retaliation or reprisal.

COMMUNICATION

During the intake process, individuals and families are advised of their right to provide feedback to [*Your organization*] regarding service provision. A complaint form will be made available to anyone upon request or as appropriate.

It should be noted that feedback on the quality of service and recommendations for improvements are not limited to the planning process and are encouraged at any time. Complaints may be made verbally, in writing or through the 'We Want to Hear From You' form as identified below. At any time, an individual in service making a complaint is welcome to include a friend or advisor for support during the process.

Guiding principles

- Complaints are dealt with promptly and resolved as quickly as possible.
- Complaints as confidential and protect the complainant's privacy.
- The review of complaints is fair, impartial and respectful to all parties involved.
- Complainants are advised of their options to escalate their complaint if they are dissatisfied with treatment or outcome.
- Complainants are provided clear and understandable reasons for how decisions on the complaint were made.
- Updates are provided to complainants during review processes.
- Complaints are used to assist in improving services, policies and procedures.

PROCESS

To avoid the potential for perceived or real conflict of interest, no one who is directly connected with the complaint will be involved in investigating any Level II or Level III complaint.

The following process should be used to find a solution to address a complaint about the Association.

- Level I Try and resolve the issue with the appropriate worker or Supervisor and/or Manager as soon as possible. At this stage, complaints may be made verbally or in writing.
- Level II If the issue is not resolved satisfactorily, contact the Executive Director [insert name and contact info] by phone, email or letter. This information is also posted on the organization's website [provide web address here]

Within 5 working days of a complaint being received, the Executive Director will contact the person making the complaint to try and reach a solution to the issue. Prior to that contact, the Executive Director will have contacted the appropriate staff to determine the steps already taken to address the concerns.

- Level III If the issue remains unresolved, use the 'We Want to Hear From You' form (also found on the organization's web-site) to contact the Chief Executive Officer and President. Within 10 working days of a complaint being received, the CEO and/or President will contact the person making the complaint to try and reach a solution to the issue. Prior to that contact, the CEO and/or President will have contacted the appropriate Executive Director to determine the steps already taken to address the concerns.
- **Level IV** Anyone who is dissatisfied with the results of the above complaint resolution process may contact the organization's funders at: [insert info here]

DOCUMENTATION AND NOTICE

Written complaints receive a written notice of decision unless otherwise requested by the complainant. Verbal complaints receive written or verbal notice of the decision at the manager's discretion or as requested by the complainant. A log of Level II and Level III complaints will be maintained by the respective RED and/or CEO and reviewed periodically to identify any trends that may indicate a more systemic service issue that should be addressed.

Diversity and inclusion statement

[Your organization] aspires to create and maintain an environment that respects diverse traditions, heritages, experiences, ideas and perspectives where we live, learn, work and play. We value and respect the rich diversity of our city including our stakeholders – the people and families that we support, staff, members, volunteers and community partners. We believe that supporting and engaging diverse populations regardless of age, gender identity, sexual orientation, physical or intellectual ability, ethnicity, religion and Aboriginal heritage is integral to the services we provide. Our vision for society is one where everyone belongs and we help each other reach for our dreams. In order to meet this vision, *[Your organization]* is committed to supporting diverse populations, attracting and retaining a diverse workforce, building and strengthening partnerships and fostering an environment free of discrimination and harassment in accordance with the *Ontario Human Rights Code*. In doing so, we ensure that diverse communities are actively and meaningfully contributing to our organization.

Abbreviated diversity and inclusion statement

[Your organization] recognizes that valuing and respecting diversity and inclusion is a conscious and deliberate effort. Our commitment is to continue to identify and eliminate barriers to inclusion through training, policy development and community engagement. We will work to ensure that the values expressed in this statement live and breathe throughout [Your organization] and that diversity is reflected and included within all levels of the organization.

DEFINITIONS

Diversity is a multidimensional concept. It includes physical and cognitive characteristics that distinguish one person from another. These dimensions include, but are not limited to: gender, race, ethnicity, physical or intellectual ability, age, culture, ancestry, place of origin, citizenship, religious beliefs, family and marital status, learning styles, sexual orientation, gender identity, socio-economic status, social perspectives, values and beliefs.

Inclusion speaks to the extent to which individuals and groups value, respect and embrace differences in knowledge, preferences and perspectives. An inclusive environment fosters respect for individuals, values them for who they are and generates a level of supportive energy and commitment so that individuals have the opportunity to contribute, thrive and meet their full potential. [Your organization] aspires to create and maintain an environment that respects diverse traditions, heritages, experiences, ideas and perspectives. We are committed to supporting diverse populations, attracting and retaining a diverse workforce, building and strengthening partnerships and fostering an environment free of discrimination and harassment. We believe that supporting and engaging diverse populations regardless of age, gender identity, sexual orientation, physical or intellectual ability, ethnicity, religion and Aboriginal heritage is integral to the services we provide to people with intellectual disabilities.

Sample vision statement

Our Ontario Early Years Centre values the development, celebrates the strengths, and respects the uniqueness that each child, parent and caregiver brings to the Centre. We provide welcoming, safe and accessible environments. We are committed to provide all children, parents and caregivers with opportunities to learn, enjoy and participate in their Centre and Satellites, including individuals with special needs.

WE BELIEVE THAT:

- All children and families benefit from being included in all aspects of Ontario Early Years Centres and their Satellite programming.
- All children have the right to quality, play-based, and language rich environments.
- All families have the right to access clinical services and community supports.
- All families have the right to access supports to enable full participation in the Ontario Early Years Centres Programs
- All communities benefit from welcoming and valuing individuals with special needs.
- All Ontario Early Years Centres and their Satellites are instrumental in the development of social networks for all families, especially families living with individuals with special needs



A Place For Parents And Their Children.

For more information about Ontario Early Year Centres go to: www.ontarioearlyyears.ca