

Additional Needs in Early Childhood Care and Education



Introduction

In 2010, the introduction of the Early Childhood Care and Education (ECCE) scheme saw the provision of a free year of care and education for all children between 3 years 2 months and 4 years 7 months, regardless of family income or ability to pay. It was a great achievement for families and the childcare sector, but the system required tailoring for those children with additional needs. With strong calls from Early Childhood Ireland and others in the sector, children with additional educational needs became eligible to avail of this scheme over two years, with the number of hours and funding per child equating to a single year. This scheme is hugely successful with over 60,000 children taking part, at a cost of €166m per year (House of the Oireachtas, 2012). The numbers have increased significantly with more children than ever attending pre-school but it is not clear how many of the children attending represent children with additional needs. The Census of Population (Central Statistics Office, 2006) showed 3 per cent of the population (aged 0-18 years) as having one 'long-lasting condition', while the most recent census of the population recorded 66,437 children with disabilities, which represents 5.8% of the total child population in Ireland (Central Statistics Office, 2011). On a more sector specific basis, the 2011 Pobal Annual Survey stated that a total of 4,679 children with disabilities were accessing early childhood services in Ireland, with 47% of services reporting to have at least one child with additional needs in attendance (Pobal, 2011).

Following Budget 2012, subvention rates to services across Government funded early childhood care and education programmes dropped by 3% and the adult: child ratio for those children in the ECCE scheme rose from 1:10 to 1:11. This small change in the ratios of one extra child per adult places further demands on the early childhood professional to deliver a high quality care and education programme for children. Furthermore, the change in ratios may seem insignificant until the demands on practitioners and the requirements to ensure that the needs of each child are met and the relationship with each child nurtured are considered. Combined, these developments highlight increased demands for places and consequently higher numbers of children with additional needs in the services, higher adult: child ratios and less income and financial discretion to bring in extra support for some children.

Despite the obvious need for quality early childhood services and recognising the possibilities they offer for engagement with families and early intervention, the sector is experiencing significant challenges as outlined previously. In order to understand the issues and challenges facing the sector, we assessed the current situation among early childhood providers in terms of providing a quality service to children with additional needs and their families. Secondly, we investigated the impact of recent developments and how they have impacted the sector.

Key Findings

Service descriptives

The average number of full time and part time staff was 4.4 and 3.7, respectively. The average number of full time and part time children was 22.0 and 29.5 respectively. The findings from this survey represent **396 services**, employing **2,433 staff** caring for **15,778 children**.

The key findings from the survey are presented in the figures and tables below.

Figure 1 Geographical spread of respondents

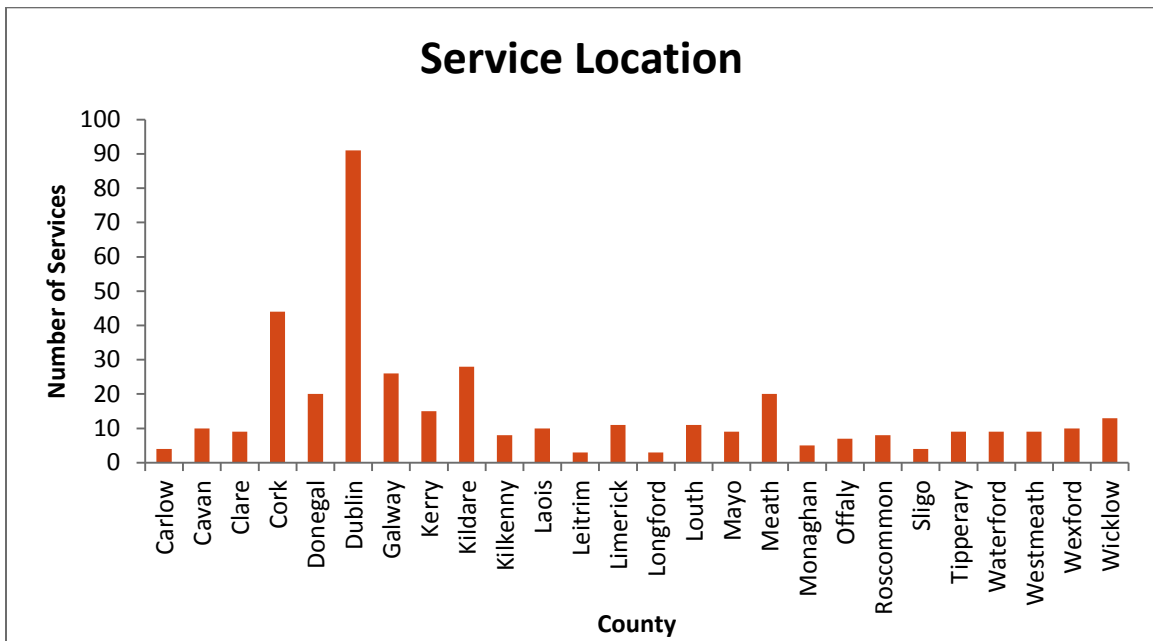
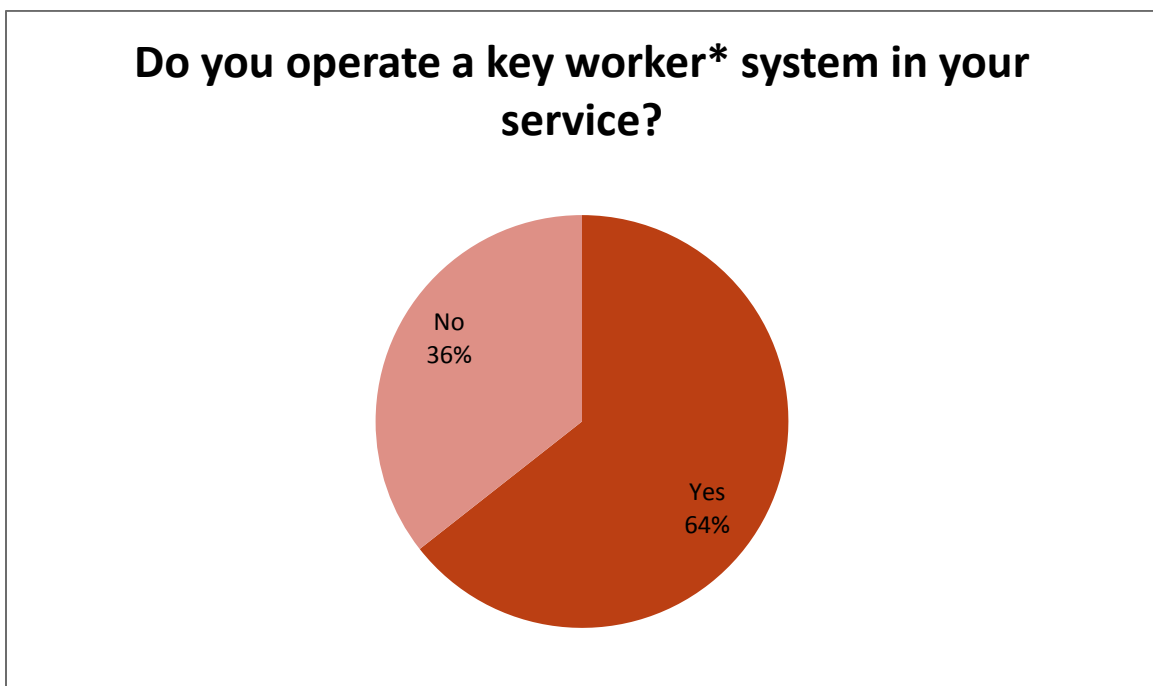


Figure 2 Presence of key worker system in services



*the duty of a key worker is to liaise with family, team members and other services, to facilitate information sharing.

Figure 2 Presence of policy to support children with additional needs in services

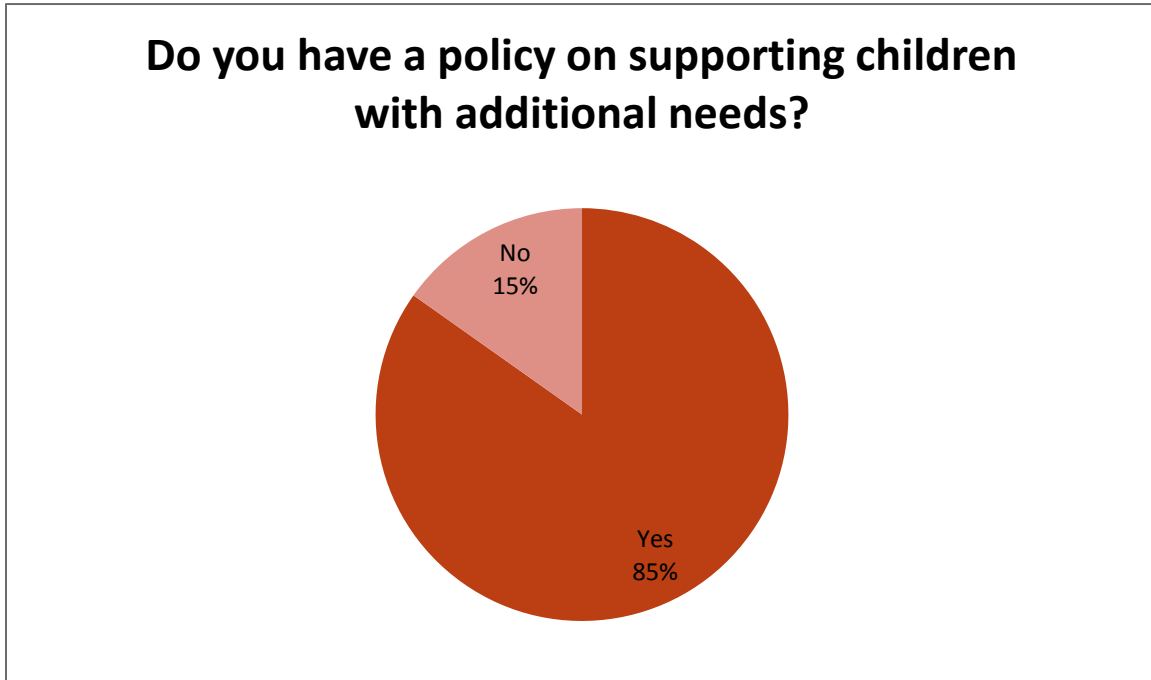
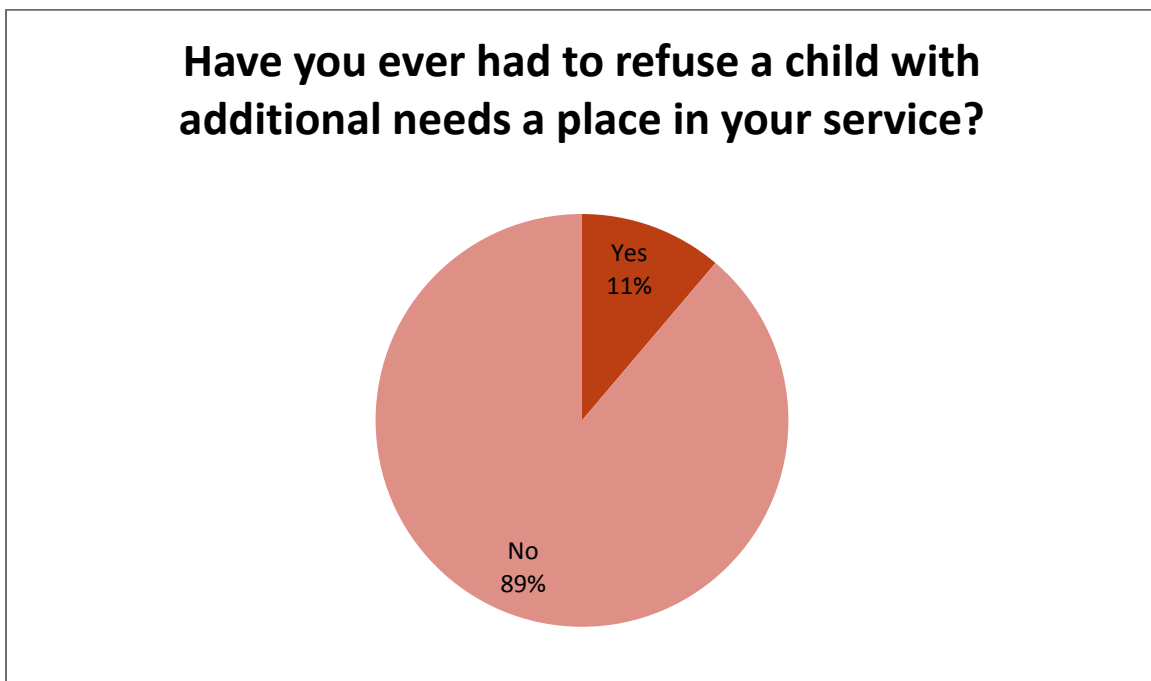


Figure 3 Refusing a child with additional needs a place



When asked to report the reasons why services have had to refuse a place to a child with additional needs, the most reported reason was that the service was unable to meet the needs of the child, mainly due to a lack of support (e.g. funding, specialised supports) and a lack of space.

Figure 4: Number of services with at least one child with additional needs

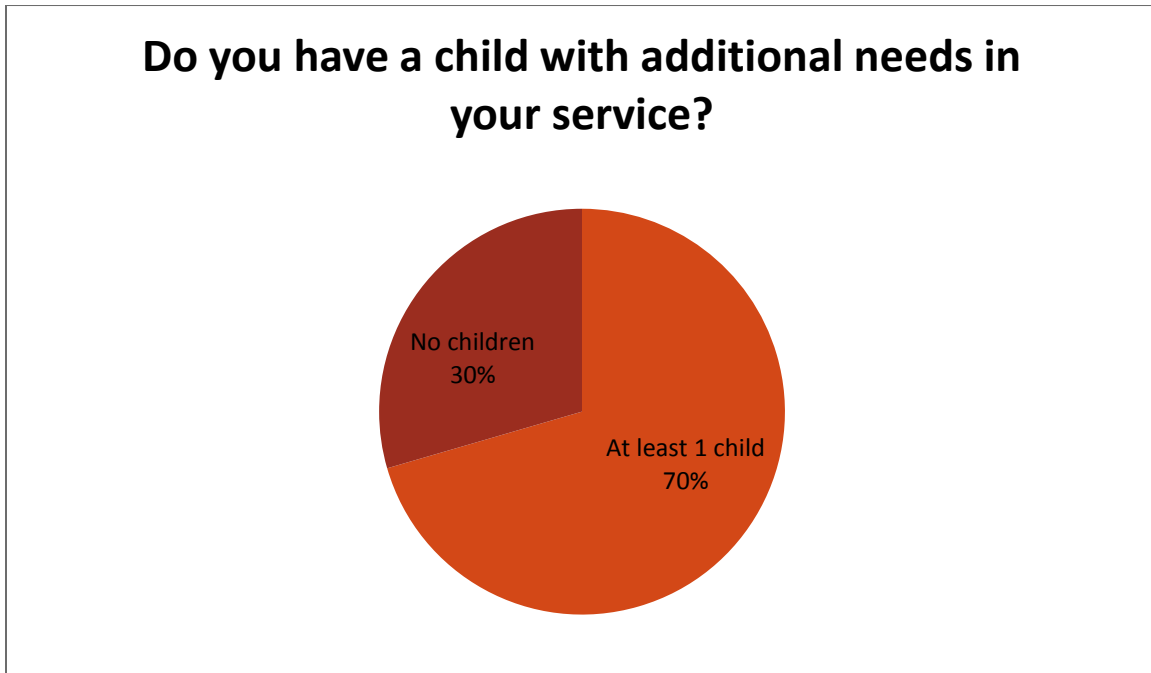


Figure 5 Breakdown of additional needs across services

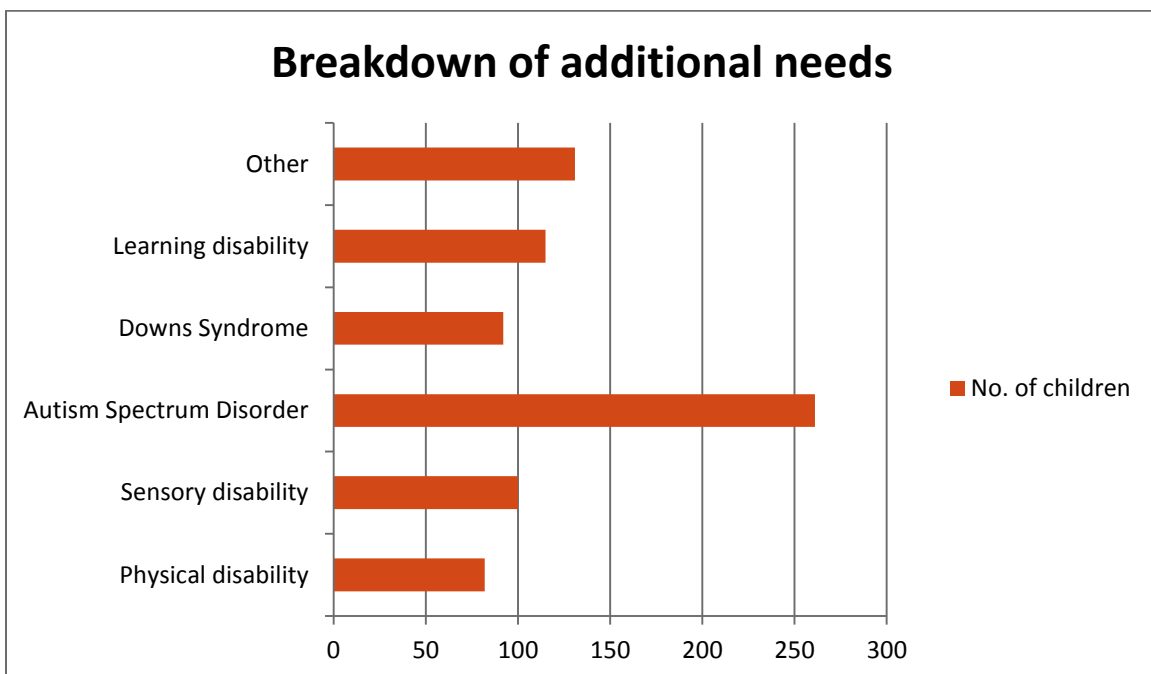


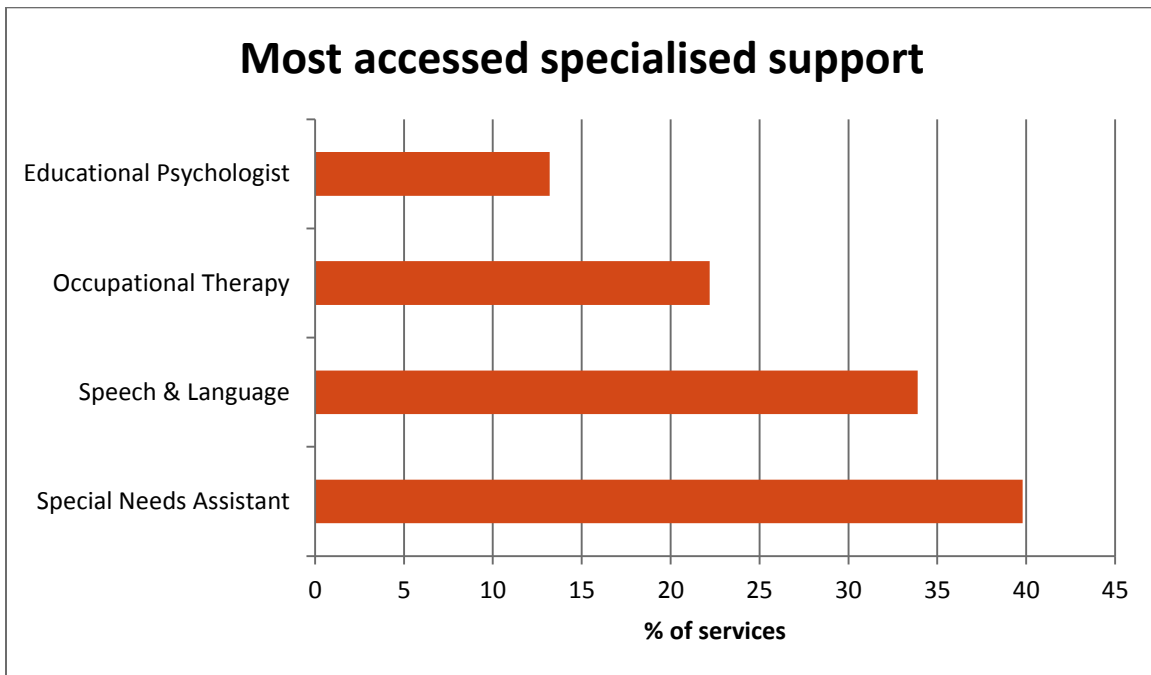
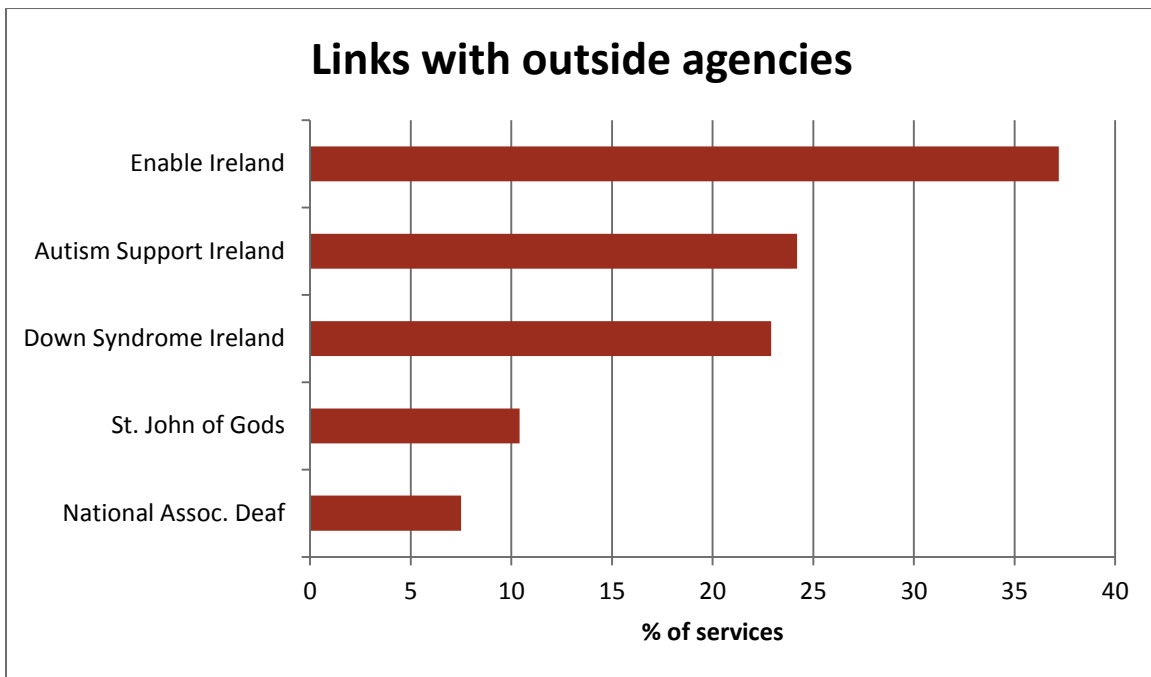
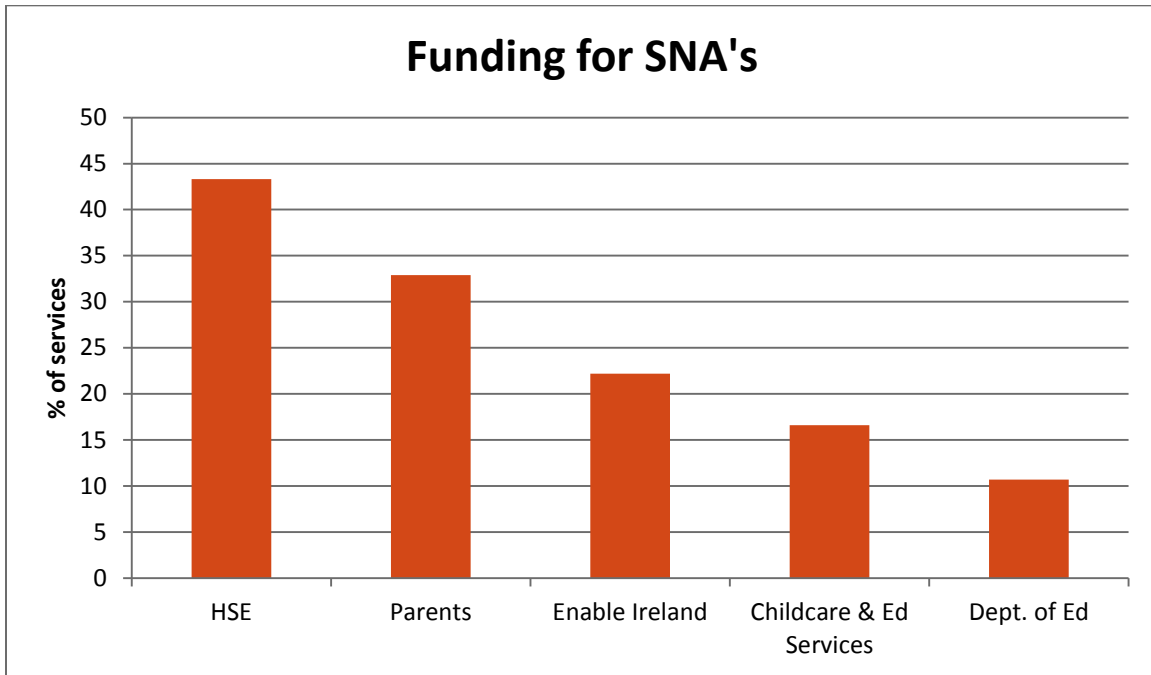
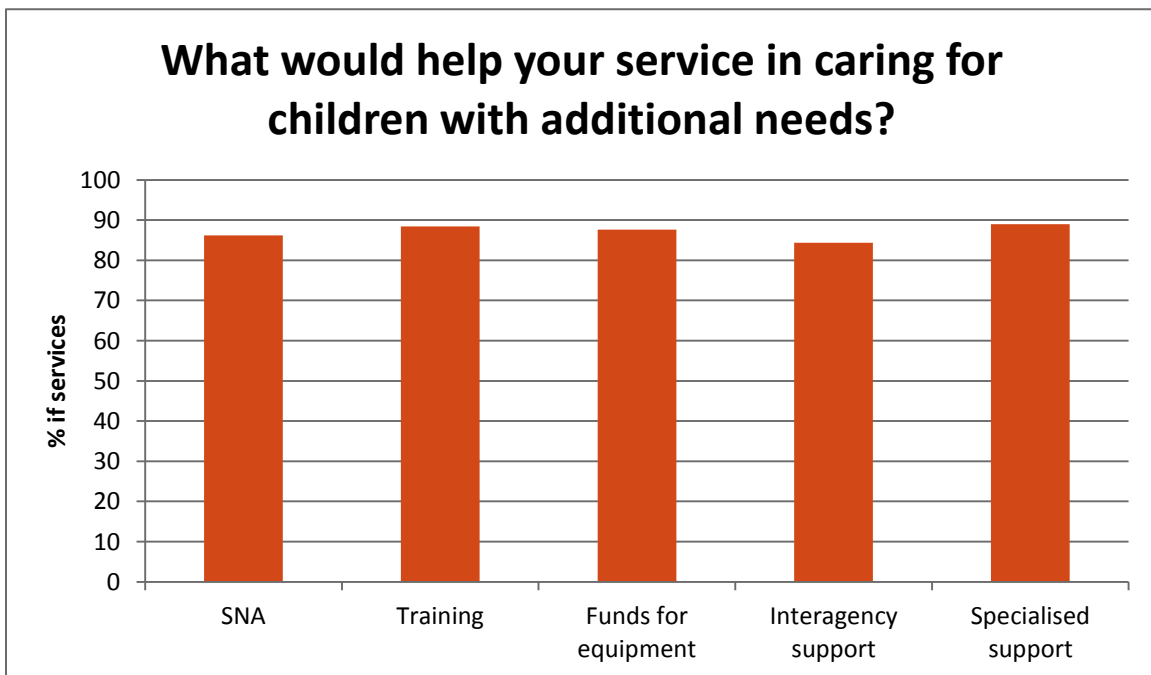
Figure 6 Access to specialised support**Figure 7** Links with outside agencies

Figure 8 Breakdown of funding streams for SNA's**Figure 9** Required additional support

Methodology

In December 2012, Early Childhood Ireland invited their members and non-members to take part in an online survey. Survey participants (n=396; 96.5% members; 59.0% private; 32.3% full day care; 91% part-time) were asked about their current situation in relation to caring for children with additional needs. Participants answered questions concerning key worker systems, additional needs policies, number of children with additional needs attending their service and the type of additional need children present with, their capacity to care for children with additional needs, the provision they receive in terms of funding and specialised support and the issues they face when caring for children with additional needs. The survey was sent out through the Early Childhood Ireland month E-Zine, the organisation's Facebook and Twitter pages and through their membership emailing list. Frequencies and descriptives were used to describe the survey responses. The results of the survey were analysed using SPSS v. 21.0, a specialised software package capable of analysing quantitative data.

Other Findings

When we asked services if they had anything else to tell us in relation to providing care and education for children with additional needs and their families, some of the responses were the following:

"By the time we have assessed children, get appointments for them to be assessed; they are nearly ready to leave for school. 1 day visit from Early intervention team would speed up the whole process" **Private Provider, Westmeath.**

"In order to support children with additional needs I think that there needs to be more contact with the HSE, the different therapists that come into contact with the child, it would be in the best interest of the child if the therapy was to take place in their early years setting as it is a familiar and secure place for them" **Community Provider, Wexford.**

"Doing the best I can do at the moment, just finding it so hard to keep going. I intend to do specials level 5 when finances have improved" **Private Provider, Kildare.**

"As a parent of a special needs child, I have found in the past that HSE staff have recommended my service as they know I have dealt with speech delay, mobility problems etc. I would not be able to assist the children in my care if I did not have a special needs child myself - the support network is just not available to settings" **Private Provider, Westmeath.**

"The specialist help is fluffy, soft help .The diagnosticians do not have a DETAILED PROGRAMME for the children .You really have to pin them down on this ..., they love multi-disciplinary meetings where my valuable time is wasted. I want specific details to use in the classroom. Trained SNAS are really valuable and parental engagement can be delicate" **Private Provider, Cork.**

"We have a policy where all children can access the service for a minimum of two sessions and when a child presents with a specific need that requires a special programme of care and education the manager works in partnership with the parent/carer and come to an agreed

programme and allocated days in order to benefit the child who is central to our work”

Community Provider, Cork.

“Early intervention for children and families is essential and also makes economic sense. There needs to be increased investment in early year’s services to provide services and staffing needed to meet the needs of the children. At present SNA’s are only available to primary schools even though early years services and childhood professionals are in a better position to provide early intervention, support and referral for assessments” **Community Provider, Kilkenny.**

Implications

Early Childhood Ireland has and continues to call for the provision of SNAs in pre-school. Research is adamant that the higher the qualifications and training of the adults, the higher the quality of provision. We believe that it is time we cared not just for the children with additional needs but for the adults who work with and for them.

Conclusion

There are a number of serious concerns relating to the quality of existing provision for children with additional needs. These concerns arise in relation to staff: child ratios, staff training and qualifications, specialised support and inter agency work as well as family partnership. Services are burdened with increased administration and bureaucracy, lower income, increased expectations from parents, higher requirements from Government, diminishing supports and resources for children with additional needs.

It is clear that providers of early care and education are facing challenging times when it comes to the provision of ECCE for young children with additional needs. However, despite the challenges faced by the sector, positive work has and continues to be undertaken. There is a strong commitment to inclusive practice and the significant developments made to date must be acknowledged. Practitioners have been resourceful when it comes to caring and educating the children in their care in a way that’s inclusive for everyone.