



Grace Church Special Needs

SOARly Needed R&R Volunteer Guide

Considerations in Caring for Individuals with Special Needs

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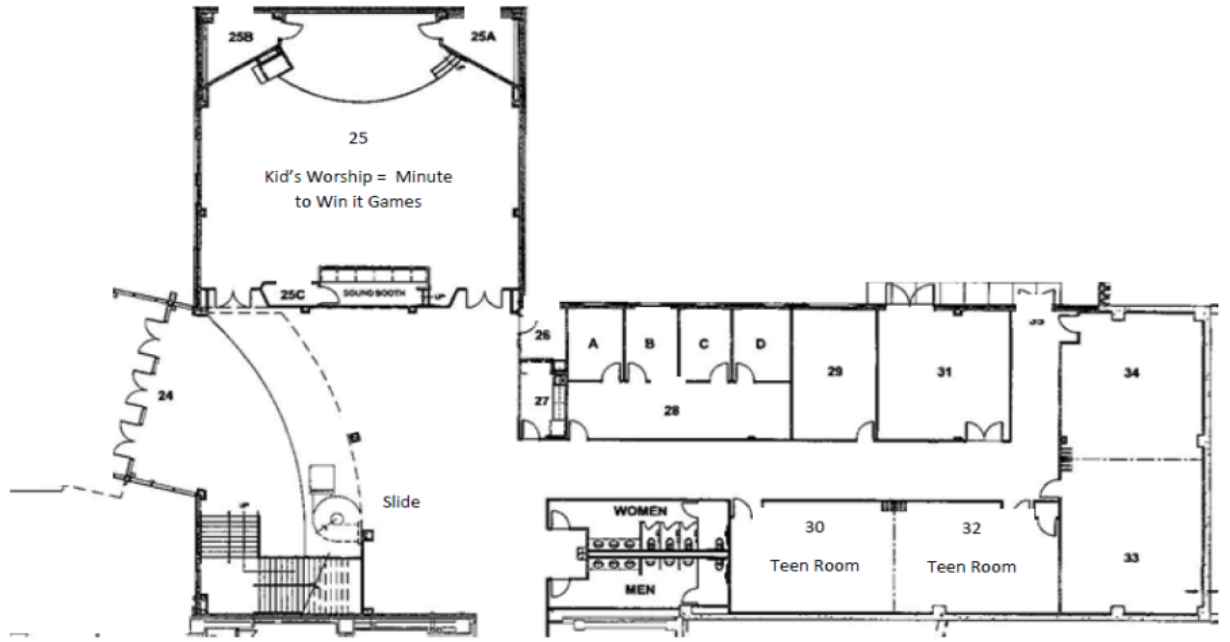
Activities Available

- Dinner/Snacks – SOAR Room Siblings Room
- Crafts
- Quiet Room (music, books, quiet games)
- Obstacle Course/Relays
- Movies Room
- Parachute/games-Kickball, Frisbee, Dodgeball, Football
- Blocks, Playdough, Legos, Fine motor skills activities
- Sensory Room: Beans, shaving cream, sensory table
- Face Painting - (When available)
- Video Games/bkb hoops SOAR
- Teen Room – video games/finger nail painting, etc.
- Music Room – fun with music
- Nursery
- Preschool

Volunteer Opportunities

- One on one mentor with SOAR participant (Grace)
- Mentor with sibling (at Redeemer Presbyterian)
- Hospitality – assist with serving dinner (Grace/Redeemer)
- Welcome/Check-in/Security (Grace/Redeemer)
- Crafts/games/sensory room general assistance (Grace/Redeemer)
- Movie/A/V (Grace/Redeemer)
- Nursery/Preschool Helper (Grace)
- Medical Personnel (Grace/Redeemer)
- Photographer (Grace/Redeemer)
- Set up/Tear down (Grace/Redeemer)





What to wear/bring

Clothes- please wear comfortable and appropriate clothes and shoes. Children may be frightened of people in white. Avoid dangle earrings, bracelets, necklaces. Use perfume with moderation. Many children are sensitive to fragrances.

Staffing

Volunteers will be assigned to a child or activity prior to Friday night. Remember that siblings have *special* needs. Consideration will be made for making this a positive experience for siblings too. Assignments will be made based on the individual needs of the children.

Prior to the event, volunteers will receive via email with their assignment. SOAR buddies will be notified of the child, age, and diagnosis by email prior to the event, and will receive a copy of their child's Plan of Care at check-in. Please review the Plan of Care and familiarize yourself with the needs and expectations of the child you are placed with. Take special note of any dietary restrictions the child may have. If you have any questions or concerns regarding the child you are placed with, please communicate this with the director before the event. Please return the copy of the Plan of Care prior to leaving for the evening. If you are working with the siblings you will not receive a plan of care. Please respect the family's privacy and do not discuss the child or their disabilities outside of the program.

Buddy Responsibilities

Have fun with the children! We want to make this a positive experience for each child entrusted to our care.

The time of arrival of the children and their parents is a time of a very important first impression. All volunteers should arrive at 5:30 (Grace or Redeemer Presbyterian) to get final instructions as well as eat a pizza dinner that is provided by SOAR. This will allow you time to be ready to greet your child and the family at 6:00. Greet the families with warmth and enthusiasm. This time frame has the potential for being rushed and confusing. Each child should be greeted individually, by name, and made to feel welcome – as our guests. Introduce yourself to the parents and children. Buddies must take time to **LISTEN** to the parents. Listen for last minute changes in the child's routine, best ways to help the child separate from parents, what he might enjoy doing - anything that will ease the child's transition time and let the parents know we are paying attention to the advice they give. The buddy will meet their family in the foyer and then will take their individual into the gym to eat.

Buddies are expected to play an active role in admitting and dismissing their children. This very important process allows the parents to give special instructions to the buddies and allows the buddies an opportunity to let the parents know how the night went. Many

of these children have difficulty transitioning so it is beneficial for you to begin to transition the child at approximately 8:45 pm. Simple statements such as “Mom or Dad will be here in 15 minutes” will go far in preparing the child to leave when their parents arrive. At 8:45 all SOAR students and siblings will move upstairs to the gym for pick-up by the parents. (Pre-School and nursery will remain in their rooms and you will be notified when the family has arrived. Pick up of the siblings at Redeemer Presbyterian will occur first at 8:45 and then the families will come and pick up at Grace.

Very young children or children who are not left with sitters frequently may have a difficult time separating from their parents. Encourage the parents to step outside the room and observe what is happening out of the child’s line of vision. Hold the child quietly and allow the child to proceed at his or her own pace.

Some children will have more medical needs than others. We will have medical personnel available to assist in any way. Only medical personnel will administer any medications. Medications will be given according to the direction of parents. All medications need to be given to the medical personnel at check-in.

Children with medical needs may have special dietary, physical or assistance needs. If you were unable to talk with the parents of a child regarding his care, please check with the Coordinator or medical personnel before feeding, changing diapers, etc. Many older children may also wear diapers and may be less able to express their needs. Care should be taken to check all children’s diapers frequently. Men are not permitted to change diapers. If your child needs a diaper change, please contact a Coordinator.

If you are asked to do anything you don’t feel comfortable doing, decline and let the Coordinator know your feelings.

Sibling Groups (5 y/o-13 y/o)

Siblings of children with special needs do not have a “normal” life. Many times the child with special needs has to come first due to medical issues, behavioral issues or needing more attention. Siblings many times become the protector and choose to put their sibling’s needs before their own. Siblings need just as much of a break as the parents do. This night gives them the opportunity to feel loved, special and appreciated!!!! You will play an active role in making them feel special by just showing them you care and appreciate them!

Sibling groups will be housed at a separate location due to the growth that has taken place. Grace Church’s SOAR Ministry is partnering with **Redeemer Presbyterian Church (9333 W 159th Street)**. When you arrive at Redeemer, please park on the west side (cemetery side) parking and enter into the building from the main entrance on that side. We are extremely blessed to partner with Redeemer as God has been using this ministry to bless many families who need to have a night away. The families will first check in their individuals with special needs at Grace (and pick up the siblings name tags) and then will transport the siblings to Redeemer. Each of the siblings will get to

have the opportunity to check in with their group leaders, eat dinner, have time to explore the different stations at their leisure, which may include crafts, games, large group games etc...

Siblings are split into 2 groups. They are split by ages usually about 5-8 year olds and 9-13 year olds. The size of the groups range from 15-25, but then they are divided into sub groups with about 7 or so in each of those with about 3 volunteers leading each sub group. (The child's sticker will have their assignment on it, i.e. Sibling Group 2).

It is your responsibility as a sibling group leader to check your roster at arrival and departure. If you find that you are missing a child, let a coordinator know right away. You will start the night with all your children and end the night with all your children. The role of the volunteers in the sibling groups are to help supervise, make sure that everyone is being safe, and help the siblings to have fun. You will be able to let the siblings rotate through the different stations freely throughout the evening, giving them times to check in with you. Security and first aid will play a vital role at this location as safety is a number one priority for all of the children and volunteers. When the children are picked up please make sure to check the security tag that the parents bring in, matching it with the code that is on the child's name tag to ensure the children get with the right parents.

Infection Control Procedures

Please notify us for a replacement if you or anyone in your household has a contagious illness. Volunteers must be fever free for 24 hours.

In all areas, wash hands often. Use gloves to change diapers for all children. This can be difficult to remember, so feel free to remind each other!

Toys should not be shared among children who have medical concerns. These children will be identified in staffing prior to children's arrival. Do not mix together toys from other rooms. If needed, toys can be cleaned with disinfectant solution, dried and reused immediately.

Special precautions will be taken to clean the areas used because of the medications and illnesses these children have. Prior to each program, everything in the room will be sprayed with a disinfectant to insure maximum protection for the children.

Isolated Situation/Restroom Policy

Do not put yourself in a position where you are alone with one or more children. There should always be at least two adults present in secluded situations (such as the restroom). If the child you are mentoring requires assistance in the restroom, ask one of the

Coordinators in your area to assist. Coordinators will be stationed in the following areas: Main Foyer, Kids Worship, and downstairs hallways.

Emergency Procedures

Minor “emergencies” are to be expected whenever children are involved. We have a first aid kit to use in case of a minor emergency. In case of a life-threatening emergency, 911 will be called. Medical personnel will handle all emergencies involving children registered in our program. The Coordinator will assist with all emergencies.

The Coordinator must be notified of any incident involving a child and will make the decision whether to page the parents and will call for our in house medical personnel. In all cases of incident or minor injury, parents will be notified upon their return. The medical personnel will make the decision if 911 is needed.

Seizures can be a common problem for children with medical conditions. Seizures which last more than 5 minutes constitute an emergency. If you suspect that a child is having a seizure, notify the Coordinator or medical personnel at once AND note what time it is (most important thing you can do).

Feedback

The success of this program depends on feedback from you, the volunteer. You are our quality assurance. If you have suggestions for improvement, or if you have concerns about anything that occurs, please report it to the Coordinator. Listen to comments from parents on their return. If they indicate any concern, notify the Coordinator. There will be times of miscommunication or unavoidable incidents. These events are more easily dealt with at the time of the occurrence.

Growth

We are excited to see this ministry grow. We know only God can do this. We are so blessed to be able to assist God in this ministry. We will continually need qualified volunteers to make each evening a special one for our children.

Challenging Behaviors: Crisis Prevention

A crisis can be defined as a moment in time when an individual in your charge loses rational, and at times even physical, control over his or her own behavior. This can be very challenging and anxiety producing for those responsible for intervening. It is vital that buddies stay calm and proceed with a plan to reduce the behavior.

These moments do not sprout into being without roots; there are almost always warning signs that let you know an individual's behavior is escalating. By following some basic procedures it is often possible to intervene before the behavior becomes dangerous or out of control. **Remember the moment you feel uncomfortable- ask for a coordinator!!!!**

Some Signs of Escalation:

- Pacing/Eloping/Running
- Stemming Behaviors Increase
- Verbal Outbursts
- Self-Injurious Behaviors
- Non-Compliance/ Refusal to complete Task/Transition to a new task

Possible Reasons for Behavior	How should I react?
Escape/Avoidance of Tasks or Requests	Allow them to leave that situation
Attention	Ignore- most individuals will up their ante if attention is brought to the behavior
Power/Control	Allow them to feel in control- let them make choices (this or that)
Communication	“show me what you want” “use your words”
Stress/Frustration	Give the individual a break
Self-Stimulation/Sensory Stimulation	Allow the student to seek the sensory activities that we have listed below.

Crisis Prevention Techniques: Be proactive... act before the behavior is out of control

- **Be empathetic:** pay attention (get down on their level and talk in a calm voice/quiet)
- **Clarify messages:** repeat what they are expressing to show that you understand how they are feeling
 - Ask them to tell you what they want or show you what they want
- **Sensory Stimulation:** the individual many need a sensory break (deep pressure, swing or spinning, quiet room/movie, walking, sensory room)
- **Set and enforce reasonable limits:** set limits clearly and give choices (if/then statements, first/then)
- **Ignore challenging questions:** redirect the individual when possible
- **Avoid overreacting:** remain calm (walk with the individual or try distracting them/reengaging them)
- **Use Physical techniques as a last resort** (call for help from a coordinator **first**): use the least restrictive method of intervention possible) **only when a harm to themselves or others!**
- **Remind of reinforcement-** if they are “working” towards something (something that the individual has really liked in the evening).

Thank you

Your generous gift of time is a ministry that Grace Church offers to children with special needs and their families. It is a time for parents to enjoy an evening together, or do necessary household tasks that often go undone. It is a place where children can feel secure, accepted and surrounded by love. On behalf of the staff and Grace Church and Redeemer Presbyterian, thank you for being a SPECIAL FRIEND.

Comments and questions can be directed to Doc Hunsley, SOAR@visitgracechurch.com, 816-506-1305.

General Considerations for Children with Special Needs

- Listen to what his parents say about his abilities and needs; ask questions if you need more information than the parents give.
- Identify his abilities and strengths (find fun activities the child can achieve)
- Give short, clear instructions.
- Use extra patience.
- Be firm with limits which are set to provide safety to child and others.
- Be encouraging and give praise frequently.
- Limit choices to 1 to 3 specific activities.
- Help the child if he is frustrated but let him do what he is able to do.
- Engage the child in activities with other children.
- Don't talk about the child in front of him as if he wasn't there or in front of other children.
- Play – have fun!
- Teach other children to be accepting and loving by setting a good example.
- Accept the child as a child of God who is uniquely and wonderfully made.

Autism

Definition

A specific type of developmental disorder that causes many various language, social, and behavioral problems for affected infants and children. It is often described as a tendency of the child to withdraw into oneself, ignoring much of what goes on in the environment. Asperger's Syndrome is high functioning autism.

Common Characteristics

- Moderate to severe speech problems (unusual speech volume, rate or pitch, speaking in monotone, repetitions)
- No imaginative play
- Problems making friends or interaction with others
- Making unusual, repeated movements (spinning, head banging, rocking, etc)
- Becoming attached to a specific object
- Often some intellectual disability, from mild to severe; some have average or above average intelligence but have some distortions of thinking

Considerations

1. If physical contact upsets the child, avoid touching him
2. Allow child to have favorite object
3. Encourage good behavior by providing a reward such as a favorite food treat or a desired privilege
4. Don't force child to play with others but encourage them awareness of and interaction with others as he is able
5. Don't expect the child to participate when imagination is required
6. Social interactions are difficult; don't take it personally if there is a lack of "connection" or warmth

Cerebral Palsy

Definition

A group of various disorders that cause problems for individuals in the areas of posture and movement; which results in abnormal muscle tone and poor coordination in these individuals. Individuals may be wheelchair bound.

Common Characteristics

- Poor Posture and movement (trouble walking, running , and sitting up)
- Trouble with eating, speaking, and drooling
- Vision and hearing problems
- There may be some degree of intellectual problems also
- Problems with daily activities and self-care (bathing, dressing, etc)

Considerations

1. Assist the child with movement and keep him safe from falling or injury (no rugs or toys or other objects left on the ground, use caution with steps or uneven ground, etc)
2. Help the child with eating as needed
3. Find out the child's self-care limitations and help him with these activities as needed
4. Encourage the child to participate in activities he is capable of doing
5. Help the child to "fit in" and to be accepted by other children
6. Speak clearly and allow him to see your face if he has hearing problems

Developmental Disabilities

Definition

Any physical or mental condition which causes an infant or child to develop more slowly in the areas of language development, thinking, personal, social or movement skills. The delay may be severe or mild and may be in one area or several. Specific examples in each area include delays in movement skills (such as standing, walking, holding), language, (talking) personal and social (interacting normally with other people), and/or self-help (brushing teeth, dressing, etc).

Common Characteristics

It is unusual for the child to have challenges in feeding and eating, toilet training, language, development, behavior, hearing, vision, muscle strength or coordination, and socialization.

Suggested Helps

1. Ignore temper tantrums
2. Praise good behavior
3. Teach skills through playing with toys and games
4. Provide opportunities to use all 5 senses and to use more than one sense at a time
5. Provide play which involves the higher functioning senses of the individual child

Down syndrome

Definition

A genetic disease also called Trisomy 21 that is caused by having one extra chromosome (group of genes)

Common Characteristics

- Low muscle tone (muscles are relaxed and “floppy”)
- Eyes that slant upwards and have small skin folds on the inner corners (can have problems with vision)
- Tongue that protrudes from the mouth
- Flattened nose
- Only 1 creased-line on the palm
- Soft, fine, sparse hair
- Medical problems with the heart and bowels are common
- Some degree of intellectual disability
- A social and friendly nature

Considerations

1. Focus on the child’s strengths and not weaknesses
2. Find tasks and activities in which the child will be able to succeed to reduce frustration
3. Help the other, ‘normal’ children to accept the Down Syndrome Child
4. Help the child’s development of physical abilities by involving him or her in games that practice running, skipping, jumping or arts and crafts with painting, drawing, and cutting (with blunt scissors)
5. Encourage play opportunities with other children

Fragile X Syndrome

Definition

A genetic disease with a mutation on the X chromosome.

Common Characteristics

- Speech delay or disturbance
- Intellectual disability — most males and one third of affected females, mostly mild to moderate but can be severe.
- Learning disabilities
- Co-ordination and motor problems, low muscle tone
- Physical Characteristics (often subtle and can be overlooked and less evident in women)
 - Large or prominent ears, long face
 - High broad forehead, high palate, prominent jaw
- Attention-deficit disorders, often with hyperactivity, distractibility, impulsiveness and poor concentration
- Hand mannerisms – hand or wrist biting, hand flapping
- Speech pattern disturbances
- Shyness, social avoidance, poor eye contact
- Autistic-like stereotyped behaviors, pre-occupation with objects, echolalia
- Aversion to touch, bright lights, loud noises, strong smells
- Emotional instability – outbursts of anger and aggression , especially in post-pubertal males

Considerations

1. Focus on the child's strengths and not weaknesses
2. Avoid overstimulation with noise, lights, and smells.
3. Praise good behavior
4. Help the child with eating as needed
5. Find out the child's self-care limitations and help him with these activities as needed
6. Remember that the child might not respond to his name or to simple requests (be patient)
7. Don't force child to play with others but encourage them awareness of and interaction with others as he is able
8. Speak clearly and allow him to see your face if he has hearing problems
9. Social interactions are difficult; don't take it personally if there is a lack of "connection" or warmth (be patient)
10. They succeed in highly structured activities and following routines – find out from parents what his normal routine is.

Sensory Integration Disorder

Definition

Sensory integration describes the brain's ability to process information from the senses (touch, smell, taste, vision, hearing and movement). In the condition known as Sensory Integration Disorder, the brain and the senses cannot connect in the normal manner. It may be compared to a traffic jam in the brain, where some of the sensory information gets stuck in traffic, and the brain does not get the information it needs to function correctly.

Common Characteristics

Sensory Integration Disorder involves very complicated parts of the brain that control coordination, attention, emotions, memory and higher level functions. All of these areas may be affected, making it difficult to form a list of symptoms. The more common problems include: distractibility, hyperactivity, uninhibited behavior, sensitivity to light or sound, playing repetitively, clumsy behavior, asking about sounds that most people ignore (refrigerator hum, fan, distant airplane, etc), difficulty with sleeping patterns, inability to calm or control themselves when worked up, mood swings, an abnormal response to sound or touch, and movement difficulty (not wanting to climb up steps or stand on uneven ground)

Considerations

- Remember the child can be awkward – try to keep him from falling (no rugs or toys laying on the ground)
- Don't touch the child if he dislikes being touched, or learn the method of touch that is comfortable to the child
- Remember that the child might not respond to his name or to simple requests (be patient)
- Help the child to regain control if he starts to lose it (suggest a time out, talk to him calmly, remove him from the situation)
- Try to keep the environment free of excess noise and odors; turn down the lights if they are too bright
- Expect mood swings and irritability (again be patient)