

## Integration Plan – Document to retain in the parental record

The development of an integration plan and its periodic or annual review aim to determine—as objectively as possible—the child's actual needs in terms of integration based on the childcare provider's activities, the layout of the premises and the availability of equipment.

Developed by the childcare provider and the child's parents or guardians, the integration plan must specify the needs for material and human resources required according to the recommendations of various professionals recognized by the Ministère de la Famille (the Ministère<sup>1</sup>). It is possible that the childcare provider will not implement all the recommendations of the professional(s) consulted. In this case, the childcare provider and the parents must indicate in an appendix why the recommended resources do not all appear in the integration plan.

The plan must be reviewed and enhanced as needed, at least once a year. The date and signature of the updated integration plan confirm the periodic or annual update.

### The integration plan is comprised of four parts:

- Part A** General information;
- Part B** Evaluation of the child's abilities;
- Part C** Identification of the child's special needs and potential means to meet them;
- Part D** Identification of the childcare provider's needs to meet the child's special needs.

- Parts A and B must be completed by the parents. They can consult the childcare provider for Part B.
- The information provided in this document will remain strictly confidential.

### In addition to this document, the following documents must be placed in the parental record:

- The Board of Directors resolution in view of integrating a disabled child into a childcare facility, as applicable;
- A certificate from Retraite Québec or a report by a professional recognized by the Ministère, attesting the child's disabilities;
- A document presenting the recommendations of at least one professional pertaining to the measures to apply, particularly with respect to material and human resources. These recommendations can be formulated by the professional who has attested the child's disabilities or other professionals recognized by the Ministère;
- Invoices and other vouchers related to the use of Part A of the allowance;
- Reasons for refusal of integration as they are specified in the integration or expulsion policy of the childcare provider, as applicable.

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1. The list of professionals who can sign this report is available in the Professional's Report form on the Ministère's website.

## Partie A General information

### Child identification

Child's last name and first name			
<input type="text"/>			
Address (number, street, apt.)			
<input type="text"/>			
City	Province	Postal code	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of birth (YYYY-MM-DD)	Current age	Telephone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

### Identification of the parents or guardian

Parent's last name and first name			
<input type="text"/>			
Telephone	ext.	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parent's last name and first name			
<input type="text"/>			
Telephone	ext.	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parent's last name and first name			
<input type="text"/>			
Telephone	ext.	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

### Identification of the childcare provider

Childcare centre (CPE)			
Home childcare provider (HCP) with subsidized places			
Subsidized daycare centre			
Name of the childcare provider			
<input type="text"/>			
Address (number, street, apt.)	Choose a region		
<input type="text"/>	<input type="text"/>		
Name of the home childcare Coordinating Office (CO), as applicable			
<input type="text"/>			
Address (number, street, apt.)	Choose a region		
<input type="text"/>	<input type="text"/>		
Licence capacity or number of children the HCP can accept based on its recognition	Number of spaces held by children with disabilities		
<input type="text"/>	<input type="text"/>		
Last name and first name of contact person			
<input type="text"/>			
Telephone	ext.	Position	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date child was admitted to the child-care facility	<input type="text"/>	Date of declaration of disability (or of need for integration support)	<input type="text"/>
	(YYYY-MM-DD)		(YYYY-MM-DD)

<b>Child's experience in a childcare facility</b>		
Has the child ever attended a childcare facility?	Yes	No
Centre based childcare facility	Home childcare	
Does the child go to the nursery of a centre based childcare facility?	Yes	No
<b>Specialized services</b>		
Has the child ever received specialized services (e.g., medical, adaptation and rehabilitation services)?	Yes	No
If <b>yes</b> , please provide the following information:		
1. Organization or facility that provided the specialized services		
_____		
Last name and first name of the professional		
_____		
Profession	Telephone	ext.
_____	( )	_____
2. Organization or facility that provided the specialized services		
_____		
Last name and first name of the professional		
_____		
Profession	Telephone	ext.
_____	( )	_____
3. Organization or facility that provided the specialized services		
_____		
Last name and first name of the professional		
_____		
Profession	Telephone	ext.
_____	( )	_____
If the child has received specialized services in the past but no longer receives them now, enter the date when the service ended	_____	
	(YYYY-MM-DD)	
<b>Technical aids</b>		
Does the child use technical aids or any other means to compensate for his or her disability or to help with certain everyday activities (e.g., hearing aids, prosthesis, orthosis, Bliss symbol, wheelchair, tricycle)?	Yes	No
If <b>yes</b> , please specify:		
_____		
<b>Drugs and treatment</b>		
If <b>yes</b> , please specify:		
_____		

## Part B Evaluation of the child's abilities

This section aims to provide the elements needed for analysis of the child's special needs.

### Daily activities

Here is a list of everyday activities:

- ① Check the response that best describes the child's usual ability to perform the activity. If the child does not have any difficulty performing the activity, or if the activity does not apply to his or her case, **check "not applicable."**
- ② In order to monitor the child's progress, check his or her **current level of learning**<sup>2</sup>.

#### Legend ①

- 1 With difficulty
- 2 With technical aid
- 3 With assistance
- 4 Unable of performing

#### Legend ②

- A Never learned
- B Learning in progress
- C Learning completed

2. Note that this refers to specialized and non-specialized learning other than those associated with common activities for a child of that age.

### Nutrition

Not applicable

	①					②		
	1	2	3	4		A	B	C
Eats (e.g., non-slip plate, adapted utensils)								
Drinks (e.g., with a straw, from the cup)								
Special diet:								
Food consistency (e.g., puree):								
Position during meals (e.g., bumping block, arm chair):								

### Dressing

Not applicable

	①					②		
	1	2	3	4		A	B	C
Removes his/her shoes								
Puts on his/her shoes								
Undresses him/herself								
Dresses him/herself								
Unfastens his/her clothes								
Fastens his/her clothes								

Comment:

**Potty training**

Not applicable

Wears diapers      Occasionally      Permanently

	1				2		
	1	2	3	4	A	B	C
Sits on the potty							
Sits on the toilet							
Asks to go							
Washes his/her hands and face							

Comment:

**Intolerances or special sensitivities**

Not applicable

To cold                                      To the sun                                      To wind                                      To noise  
 To air                                      To heat                                      To dust                                      Allergies (specify)

Comment:

**Gross motor skills**

Not applicable

	1				2		
	1	2	3	4	A	B	C
Raises and bows his/her head							
Rolls over, changes position							
Crawls							
Sits							
Moves on all fours							
Walks							
Pushes or pulls a toy while walking							
Runs							
Joins in activities that require physical coordination (e.g., claps his/her hands, catches a ball, walks down the stairs)							
Can do activities such as use a swing, a tricycle, a slide							

Comment:

Coordination difficulties:

Position to favour:

Position to avoid:

**Fine motor skills**

Not applicable

	①				②		
	1	2	3	4	A	B	C
Grasps an object with his/her hands							
Handles an object							
Transfers an object from one hand to the other and voluntarily releases the object							
Grabs an object with his/her thumb and index finger							
Empties and fills a container							
Stacks rings on a pole							
Stacks, makes a tower using three blocks							
Turns the pages of a book							
Rolls playdoh into a ball							
Makes a puzzle							
Screws, unscrews, turns a doorknob							
Holds a pencil between his/her thumb and index							
Uses scissors							

Comment:

**Verbal and non-verbal communication**

Not applicable

	①				②		
	1	2	3	4	A	B	C
Notices sounds, messages, music							
Mimics sounds							
Understands and executes a simple instruction							
Gives or points to objects on demand							
Communicates using signs, gestures and sounds							
Mimics noises, animal sounds, etc.							
Expresses him/herself using two words consecutively (e.g., <i>Want this!</i> )							
Answers simple questions							
Executes two instructions with a common thread							
Speaks fluently							

Comment:

**Vision**

Not applicable

	1				2		
	1	2	3	4	A	B	C
Finds a hidden object							
Follows the adult and other children with his/her eyes when they move around							
Is attracted to his/her reflection in the mirror							
Takes part in activities requiring fine vision (recognizes shapes, objects, colours, etc.)							
Moves around without bumping into things or falling							
Takes part in activities requiring distance and peripheral vision (ball, obstacle games)							

Wears glasses:

Yes

No

Comment:

**Reasoning**

Not applicable

	1				2		
	1	2	3	4	A	B	C
Finds a hidden object (behind his/her back, under a bucket)							
Copies simple gestures							
Makes associations and places objects in a given order							
Executes an instruction ( <i>Give, Take, Come</i> , etc.)							
Points to a picture or item mentioned							
Matches three colours							
Understands the notion of "the same and different"							
Focuses during structured activities							
Plays the same games as other children his/her age							

Comment:



**Adaptation and socialization**

Not applicable

	1	2	1	3	4	A	2	B	C
Reacts to the adult's presence									
Tolerates his/her parent's absence									
Supports the educator's absence									
Responds when he/she is called upon									
Mimics others' gestures when playing (can imitate)									
Furthers simple instructions									
Plays with his/her peers									
Can play alone									
Stays in the yard or within an established perimeter									
Communicates									
Shares									
Waits his/her turn									
Avoids certain dangers									
Engages in free play									
Cooperates during play									
Avoids actions that are dangerous to him/herself and to others									

Comment:

**Part C Identification of the child's special needs and potential means to meet them**

**"Special needs" refers to the needs directly linked to the impairment and disabilities, the other needs having been recognized as individual needs comparable to those of any other child.**

**Nutrition**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Dressing**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Potty training**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Intolerances or special sensitivities, allergies**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Gross motor skills**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Fine motor skills**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Verbal and non-verbal communication**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Vision**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Reasoning**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

**Adaptation and socialization**

Not applicable

Explain the difficulties encountered:

Specify the potential means to mitigate integration obstacles:

## Part D Identification of the childcare provider's needs to meet the child's special needs

*Note that the childcare provider must specify any material and human resources needed in accordance with the recommendations of the professionals recognized by the Ministère and with the analysis of the needs identified in Part C above.*

### Experience of the childcare provider

Has the staff already experienced the integration of a disabled child?

Yes

No

Needs in terms of:

### Material resources

Adaptation of material or equipment used by children of the same age.

Specify:

Purchase of specialized equipment or material.

Specify:

Layout

Specify:

### Human Resources

Reduced number of children per educator or HCP.

Specify:

Addition of staff or of an assistant.

Specify:

Training and replacement of staff who receive this training;

Specify:

<b>Others</b>
Specify:
<b>External collaboration and search for information</b>
Professional support (rehabilitation centre, CISSS/CIUSSS, etc.) Specify:
Information and documentation (e.g., type of disability, bibliography) Specify:
Special training (e.g., using the device, special means of communication) Specify:

<b>Signatures</b>					
<b>I agree with this integration plan for my child and undertake to collaborate with the childcare provider.</b>					
<input type="text"/> Date (YYYY-MM-DD)	<table border="1" style="width: 100%;"> <tr> <td style="width: 10%; text-align: center;"><b>X</b></td> <td style="width: 90%;"></td> </tr> <tr> <td colspan="2" style="text-align: center;">Signature of the parent or guardian</td> </tr> </table>	<b>X</b>		Signature of the parent or guardian	
<b>X</b>					
Signature of the parent or guardian					
<b>I undertake to immediately implement this integration plan and to update it as needed, no later than one year from today.</b>					
<input type="text"/> Date (YYYY-MM-DD)	<table border="1" style="width: 100%;"> <tr> <td style="width: 10%; text-align: center;"><b>X</b></td> <td style="width: 90%;"></td> </tr> <tr> <td colspan="2" style="text-align: center;">Signature of the person responsible for integration at the childcare facility</td> </tr> </table>	<b>X</b>		Signature of the person responsible for integration at the childcare facility	
<b>X</b>					
Signature of the person responsible for integration at the childcare facility					

**For more information**

For more information, contact the Ministère's Information Service at:  
**1-855-336-8568** or visit the Ministère's website: [www.mfa.gouv.qc.ca](http://www.mfa.gouv.qc.ca)