

## Inservice/Staff Development Opportunities through Connected Kansas Kids

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Each presentation is approximately 60 minutes in duration, including time for questions and answers. Specific presentations/conferences can be arranged for case-specific needs or to plan for individual students with special health needs. Presentations are supported through the generous support of Kan-ed, and are free-of-charge to participating districts. **New offerings are highlighted in red font.**

**1. Section 504 of the Rehabilitation Act**

Section 504 of the Rehabilitation Act is civil rights legislation which discourages discrimination based on a disability. This presentation outlines the Act itself, requirements of a 504 Plan, compliance issues, and ideas for the development of effective 504 Plans.

**2. No Child Left Behind**

Adequate yearly progress, highly qualified teachers, limited English proficient students, high stakes testing.... what does it all mean to educators, students and parents.

**3. Individuals with Disabilities Education Act (IDEA)**

IDEA is the legislation that drives special education services for students. This presentation provides an overview of IDEA, including the 2004 reauthorization, and examines how it may support the needs of students with special health needs. Differences between IDEA and Section 504 are reviewed.

**4. From IDEA to NCLB**

This presentation offers a review of educational and civil rights legislation (IDEA, Section 504, ADA, NCLB) that may impact programming for students with special health needs.

**5. Learning Disabilities**

LD is a disorder that affects people's ability to either interpret what they see and can show up in many ways: as specific difficulties with spoken and written language, coordination, self control, or attention. Such difficulties extend to schoolwork and can impede learning to read, write, or do math. This presentation provides an overview LD and provides information on ways to help support the learner.

**6. Dyslexia**

Dyslexia is a life-long language processing disorder that hinders the development of oral and written language skills. Children and adults with dyslexia can be highly intelligent; however they have a neurological disorder that causes the brain to process and interpret information differently. The presentation is an overview of dyslexia, including strategies and tips for teachers.

**7. Communication Disorders**

Speech and language disorders are among the most commonly diagnosed disability of younger children. Learn about various speech and language disabilities and disorders; when to refer a student for evaluation; and how to provide modifications in the classroom.

**8. Attention Deficit Disorder**

ADD and ADHD are among the most common diagnoses of childhood, and among the most misunderstood. This presentation provides current findings re: the neurobiological basis of the condition, recommended treatment methods, and classroom strategies for helping the student with ADD/ADHD.

**9. Pervasive Developmental Disorders**

Providing education and behavioral support for a student with an autism spectrum disorder requires unique skills and knowledge. This presentation offers an overview of autism, Asperger's syndrome, pervasive developmental disorders, and other autism spectrum diagnoses, and provides suggestions on how to provide supports for the student.

**10. Hearing and Vision Impairments**

Students who are blind or visually impaired, deaf or hearing impaired, or deaf-blind will likely have special support at school. Learn more about these conditions, and the educational implications.

**11. Early Intervention and Early Childhood Special Education Services**

Much has been written in recent years about critical periods of development for the very young child. This presentation will discuss the advantages of early intervention, describe models for supporting the very young child and family, and highlight the goals of early intervention programs. Differences between the IFSP and IEP will be discussed, as well as new directions under IDEA for early intervention services.

**12. Inclusion**

IDEA supports educating all students in the least restrictive environment. Inclusion is a belief in every person's inherent right to participate fully in society, and implies an acceptance of differences. Inclusion requires collaboration, teamwork, flexibility and a willingness to take risks. This presentation covers way to make inclusion a process that works for everyone involved.

**13. Historical Perspectives in Special Education**

Special education is a relatively new field. Not until P.L. 94-142, were schools required to provide educational services for students with disabilities. Parents, civil rights activists, legislators and others have paved the way for all young people to be guaranteed a free and appropriate public education. This presentation examines the history of special education, and projects future advances.

**14. Other Health Impaired**

IDEA defines a student who is "other health impaired" as having limited strength, vitality, or alertness due to chronic or acute health problems such as a heart condition, rheumatic fever, asthma, hemophilia, and leukemia, which adversely affect educational performance. This presentation discusses several chronic conditions of childhood that may adversely affect educational performance.

**15. Obesity in Childhood**

Results from the 1999-2002 National Health and Nutrition Examination Survey (NHANES), using measured heights and weights, indicate that an estimated 16 percent of children and adolescents ages 6-19 years are overweight. Obesity in childhood can lead to various serious health conditions. This presentation describes current issues related to childhood obesity, and suggests ways to help ensure children have healthy lifestyle choices at school.

**16. Accommodations and Modifications for Students with Special Health Needs**

Accommodations and modifications are indicated for students with special health needs who have Section 504 plans or IEPs. This presentation helps educators and school nurses determine and identify this population of students, evaluate what type of accommodations and modifications to consider for a variety of diagnoses.

**Presentations 17 – 29:**

Identifies this population of students, characteristics, program planning, health care plans, learning implications of disease and treatment, etc.

- 17. Young People with Physical Impairments**
- 18. Young People who are Other Health Impaired**
- 19. Young People with Orthopedic Impairments**
- 20. Young People with Asthma**
- 21. Young People with Cancer**
- 22. Young People with Cystic Fibrosis**
- 23. Young People with Dandy-Walker Syndrome**
- 24. Young People with Depression and/or Anxiety**
- 25. Young People with Diabetes**
- 26. Young People with Epilepsy**
- 27. Young People with Juvenile Rheumatoid Arthritis**
- 28. Young People with Lupus**
- 29. Young People with Muscular Dystrophy**
- 30. Young People with Sickle Cell Anemia**
- 31. Young People with Spina Bifida**
- 32. Young People with Tourette's Syndrome**
- 33. Young People with Traumatic Injuries**

**34. The KU Kids Healing Place (Featured Presentation)**

The **KU Kids Healing Place** is a new program at the University of Kansas Medical Center which offers holistic care to children with chronic or life-limiting diagnoses and their families. By partnering with schools and other community organizations that care for children, the **KU Kids Healing Place** is enhancing care for children with serious illnesses, and enabling them to achieve their maximum potential. Training is available for all who are working with children who are very ill.

**35. Common Pediatric Chronic Illnesses (cancer, cystic fibrosis, diabetes, lupus, asthma, sickle cell anemia, juvenile rheumatoid arthritis) – 90 minutes**

This presentation provides an overview of each of these pediatric diagnoses. Although each can be readily managed within the school/child care/youth group/athletics/etc. environment, there are specific issues of importance related to the care and educational needs of young people with these illnesses.

- 36. Learning Challenges of Chronic Illness (diabetes, asthma, sickle cell anemia, cancer, etc.)**  
Research is now providing information about some of the subtle learning issues that may result from specific diagnoses. Each student will present unique traits, strengths and areas of need. A knowledge and understanding of the research can assist the educational team in planning and programming for the educational and health care needs of students with chronic illness, and provide guidance in determining when issues may warrant further assessment.
- 37. Cognitive Disabilities Associated with Brain Tumors, Leukemia and Sickle Cell Anemia**  
This presentation will cover the research that describes the possible cognitive exacerbations of treatment/disease in brain tumors, leukemia and sickle cell anemia. Students with these diagnoses may present with unique learning challenges that require intervention.
- 38. Munchausen by Proxy Syndrome: Medical and Educational Exacerbations**  
Munchausen by proxy syndrome (MBPS) is one of the most harmful forms of child abuse. It is also perplexing. MBPS involves an apparent deeply caring mother who repeatedly fabricates symptoms or provokes actual illnesses in her helpless infant or child. Now, there is some evidence that a similar phenomenon may exist in the realm of special education, where parents seek educational diagnoses and services, when there may be no need, for their child. This presentation provides information about the difficult-to-diagnose form of child abuse.
- 39. The Ventilator Dependent Child**  
Students who are ventilator dependent are now being educated at school, when medically possible. This population of students has unique issues related to their care. This presentation provides information regarding potential needs at school, research on supporting children who are ventilator dependent and their families, and other relevant information.
- 40. Partnering with Parents**  
Despite the greatest of efforts, there are still times when parents and professionals may not agree on how to provide the best services for a child. This presentation focuses on ways to limit parent/professional disagreement; effective forms of communication; and techniques for building a true team to support the young person with special needs.
- 41. Communicating and Teaming with Physicians and other Health Care Providers**  
The “Med-Ed Gap” is sometimes very wide, with physicians and educators having differing perceptions on how to care for a young person with special health needs. Just obtaining information from a physician or other health care provider may be challenging. This presentation offers tips for how, with parent permission, to make and maintain a connection with health care providers to further enhance the team approach of caring for a child with a special health need.
- 42. Supporting Siblings and Peers of Students who are Chronically Ill**  
Being a sibling or friend of a young person with a serious health condition is, sometimes, a very difficult task. Guilt, fear, jealousy and many other emotions may impact the young person’s ability to support the special health needs child. For siblings, difficulties may arise if parents must be far away from home to care for a hospitalized sibling, or if family changes result in the light of the diagnosis. This presentation highlights how to respond to the needs of siblings and peers, and how to provide education and information without breaching the confidentiality of the child with special health needs.
- 43. Relaxation Strategies for Children**  
Test anxiety, social issues, family problems, overscheduled lives, worrying about one’s health – these issues and many more can result in a great deal of stress in a child. Research has linked childhood stress and anxiety to a higher incidence of adult depression. Simple techniques and strategies are taught in this session to help young people manage stress and anxiety. They work great for adults, too!
- 44. Community Response at a Child’s End-of-Life**  
A child’s death, whether sudden or anticipated has an overwhelming impact on a school and community. Family, educators, child care providers, activity directors, peers and extended community members seek to find meaning and comfort at a time of great distress. This session talks about ways a school and community may respond to a child’s death; common issues of concern; and how to care for one another.
- 45. End-of-Life Support in School: When it is Time to Say Goodbye**  
When a child has an illness that may result in death, there is no guide for preparing oneself, peers, siblings, school staff and others. How should the school respond if the child is able to continue to come to school during the end-of-life stage? What if the child is in the hospital or at home – how can the school be responsive to the needs of the child, family, and other students? This presentation provides information on planning prior to the child’s death, coming together as a school, and enabling

all involved to participate in positive experiences that may lead to healthy attitudes about life's present and future challenges and losses.

**46. The Grieving Child: Losses of Childhood from Divorce to Death**

Children are not miniature adults, and children's grief differs greatly from the grief of adults. However, their grief is very real, and often requires special understanding. For a child who has experienced a loss, grief may be displayed as acting-out behavior, sadness, anger, or withdrawal. This session examines ways to determine if a child is experiencing grief and how to support the child through the grief process.

**47. Focusing on the Needs of the School (Child Care, Baseball, Scouts, Youth Group, etc.) Community when a Child is Terminally Ill**

There is no way to create a generic plan for the support needed by a child who is dying, his family, friends, educators and community. This session allows for individual consultation and creativity to address the needs of unique communities when a student (or staff member) is dying. Palliative care is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. School is often the place where children and adolescents feel the sense of belonging, comfort and care that equate palliation in the end-of-life. Consultations will assist schools in determining what their role is, and how to respond to the needs of the all involved. **(Individual session designed to address specific school/family needs)**

**48. Child Abuse and Neglect**

The presentation provides an overview of issues surrounding child abuse and neglect. It includes information about mandated reporting in the state of Kansas and how/who to call if you need to report suspected abuse or neglect. Descriptions are given for various types of abuse (physical, sexual, emotional, neglect); characteristics of vulnerable children; recognizing the physical and behavioral signs of sexual abuse; the effects of psychological abuse on children; activities professionals can perform to help vulnerable children and their families; and more.

**49. Chronic Absence and School Avoidance**

Tummy aches, headaches, "I can't go to school because I don't feel good". Many children miss a day or two of school that may not be necessary. But, when does school avoidance become a problem? How do you determine if a child/student is really ill, or if there are other issues that are causing concern about coming to school? This presentation will discuss school avoidance and how to intervene when a child is having difficulty with school attendance.

**50. Bullying and Bullies**

This presentation examines bullying behavior, and identifies types of bullying, characteristics of targets and bullies, when and where bullying is likely to occur and much more. The presentation offers targets for schools, child care facilities, athletic teams, organizations, and others to help both the child who is bullied and the bully, and methods to develop "bully proof" environments.

**51. Identifying Children and Adolescents at Risk for Depression**

Depression and anxiety can affect children and adolescents, as well as adults, with children as young as 4 years of age being identified as having depression. Everyone has periods of sadness or feeling "down". However, some youngsters may have more than the typical amount of sadness and may benefit from additional supports. Learn about who is at risk and which young people may need further evaluation.

**52. Depression Goes to School (Child Care, Baseball, Scouts, Youth Group, etc.)**

Children and adolescents may suffer from depression or anxiety. As a result, concentration, attention and interest in school work and activities may be affected. This presentation offers suggestions for supporting these students and interventions which may help pave the way toward school success.

**53. The School Experience: Perceptions of Young People with Chronic Illness**

"School" means many different things to children and adolescents. For a student with a chronic health condition, academics, socialization, psychological well-being and much more may be affected by the diagnosis and treatment for a serious illness. There are ways that educators can help. Learn how to develop plans that address the unique educational needs of seriously ill students.

**54. Generational Issues: Getting Along in the Workplace**

The Silent Generation, Baby Boomers, Gen Xers, Gen Yers.... So many different perspectives, but we all work in the same workplace. Learn about the unique characteristics and perspectives of each group and see how when we were raised determines how we see the world. Fun and interactive!

**55. School Interventions for Students with ADHD**

Students with attention deficit disorder may benefit significantly from simple interventions and strategies in the classroom and school setting. Learn ways to make the journey easier for students, educators and parents.

**56. School Interventions for Students with Mental Health Diagnoses**

Depression, bipolar disease, emotional disturbance: children come to school with a variety of mental health diagnoses that can complicate learning, relationships with others, and the ability to cope with the school environment. This presentation offers strategies to support these special students.

**57. Fetal Alcohol Spectrum Diagnoses**

Children who are exposed to alcohol in utero have unique challenges. This presentation offers an overview of FASDs, the cognitive and behavioral affects, and interventions for caregivers.

**58. Self Care for those Caring for Seriously Ill Children**

Compassion fatigue is a term used to describe the unique challenges resulting from living inside the grief and challenges of others as a caring professional. This presentation gives tips to clergy, child care providers, education professionals, coaches, scout leaders, health care professionals and others on maintaining balance in one's life, and how to care for yourself, amidst caring for others.

**59. Cutting and Self-Mutilation**

Self-injury is the act of deliberately hurting one's own body and may include such acts as intentional cutting or burning of one's body. The intent is not suicide, nor is it part of an acceptable cultural or artistic ritual. Rather, it is an unhealthy effort to cope with overwhelming negative emotions such as intense anger, tension or frustration. Learn about this phenomenon, and how to help youngsters who engage in such behavior.

**60. Developing Boundaries in the Caregiving World: Can We Be the Facebook Friend of Those For Whom We Care?**

Those who care for children have heard the frightening stories about predators on social media sites. Recent reports have also covered inappropriate use of social media between teachers and students; nurses and patients; etc. The indiscretion may be known to the adult, or they may think they are just 'chatting' with others. Social media is here to stay, and has many effective uses for teaching and learning. Learn about privacy issues and appropriate usage of social media. What is that "line" that should not be crossed, and how do we continue to care, while imposing boundaries? This session includes "tips and trips" when using social media.

**61. Pediatric Palliative Care Goes to School: Caring for Students with Serious Illness**

When a child is near the end-of-life, health care providers offer a special kind of care called palliative care. The focus shifts from "cure" to "care" with special attention paid to the psychological, social, and spiritual needs of the child. It is now being realized that kids with serious health conditions need this type of care much sooner than the end-of-life. For some, life expectancy will reach into adulthood, but the challenges of being a young person with a serious illness exist throughout the child's life. It is time to partner with school professionals, as we all work, from diagnosis forward, toward physical, psychological, social, spiritual and educational health. This session is for everyone, with practical applications for both professional and personal experiences.

**All presentations are available in person, or via interactive televideo. For more information, or to schedule a presentation, contact:**

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