## Medical/Disability Information for Classroom Teachers

# Cerebral Palsy





Cerebral palsy (CP) refers to a group of disorders that result from injury to the developing brain, and can affect movement and muscle coordination. Depending on which areas of the brain are damaged, CP can cause one or more of the following: muscle tightness or spasms, involuntary movement, difficulty with gross motor skills such as walking or running, difficulty with fine motor skills such as writing or doing up buttons, and difficulty with perception and sensation. Individuals with CP may have cognitive, speech and language disorders, visual and hearing impairments and/or learning disabilities. The parts of the body that are affected and the severity of impairment can vary widely. CP is not progressive, but can seem to change as the child grows.

#### Implications for Planning and Awareness

- ☐ Meet with the student and parents early in the school year to discuss how the school can support this student's needs related to cerebral palsy. This could include finding out about:
  - the student's strengths, interests and areas of need
  - the student's specific symptoms
  - successful strategies used at home or in the community that could be used at school.
- ☐ In collaboration with the parents and health care professionals, develop a written management plan that aligns with related jurisdictional policies and protocols and could include specific information, such as:
  - symptoms and associated disorders that may affect the student at school
  - the role of school staff
  - equipment and modifications
  - when emergency measures should be taken.
- ☐ If the student is taking medications during the school day, discuss with the parents possible side effects. Follow school and/or jurisdictional policies and protocols in storing and administering medication.
- ☐ Work with the parents to carry out a risk assessment before field trips to determine potential hazards and to plan for the student's safe and successful participation.
- ☐ Collaborate with the parents and student to consider if, and how, they would like to share specific information on cerebral palsy with peers. If they wish to do this, consultation with health care providers, such as school or community health nurses, may be helpful.
- ☐ Learn as much as you can about how cerebral palsy may affect learning and social and emotional well-being. Reading, asking questions and talking to qualified professionals will build your understanding and help you make decisions to support the student's success at school.

Your awareness needs to begin with conversations with the student's parents.





□ Arrange for any equipment or classroom modifications that might be needed, as recommended by a specialist. This may include accommodations for mobility equipment (e.g., wheelchairs, standing frames, walkers), supportive seating, supportive toiler seats and/or mechanical lifts.  □ Determine if any changes to school timetables or schedules will have to be made to accommodate the student's equipment and/or travel time from class-to-class.  □ Develop a system for sharing information with relevant staff members about the student's condition and successful strategies.    Develop a system for sharing information with relevant staff members about the student's condition and successful strategies.    Develop a system for sharing information with relevant staff members about the student's condition and successful strategies.    Develop a system for sharing information with relevant staff members about the student's condition and successful strategies.    Develop a system for sharing information with relevant staff members about the student's equipment and successful strategies.    Develop a system for sharing information with relevant staff members about the student's equipment and save swell as oral ones. Allow extra time for oral responses.    Provide checklists, graphic organizers, visual referents and examples to help the student plan ahead and to stay on-task.     Teach strategies for self-monitoring, such as making daily lists and personal checklists for areas of difficulty.    Use instructional strategies that include memory prompts.     Teach strategies for what to do while waiting for help (e.g., underline, highlight or rephrase directions; jot down key words or questions on sticky notes).     Provide extra time for tasks or reduce the amount of written work required.     Provide alternatives to writing for the student to demonstrate learning. If handwriting continues to be difficult for the student work required.     Provide clear expectations, consistency, structure and routine for the entire class and diff		coordinate any needed consultation and services, such as speech-language, occupational or physical therapy.	
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	Use low-key cues, such as touching the student's desk to signal the student to think about what he or she is doing without drawing the attention of				
	classmates.				
	Provide support in transitioning from one activity or place	to anothe	r. Cues,		
	routines and purposeful activity during transitions may be				
	Monitor for signs of anxiety or depression, such as visible to				
	changes in grooming habits, missing or coming late to class incomplete assignments.	s, fatigue o	or		
	Support the development of self-advocacy skills, so student	s feel com	fortable		
	and confident asking for what they need and expressing the				
	Consider having a "key person" the student can check in with on a weekly (or				
	daily basis) to assist with planning, self-monitoring and problem solving of any				
	concerns or issues that may arise.				
As	you consider the implications for this medical condition	on, think	about		
the following questions:					
1.	Do I need further conversations with the parents	☐ Yes	□ No		
	to better understand this student's medical needs?				
2.	Do I need targeted professional learning?	☐ Yes	$\square$ No		
	If yes, what specific topics and strategies would I explore?				
3.	Is consultation with jurisdictional staff required?	☐ Yes	□ No		
	If yes, what issues and questions would we explore?				
4.	Is consultation with external service providers required	☐ Yes	□ No		
	(e.g., Regional Educational Consulting Services,				
	Student Health Partnership, Alberta Children's Hospital,				
	Glenrose Hospital)?				
	If yes, what issues and questions would we explore?				
5.	Are further assessments required to assist with planning	☐ Yes	□ No		
	for this student?				
	If yes, what questions do I need answered?				
6.	Is service to the student from an external provider required?	☐ Yes	□ No		
	If yes, what outcomes would be anticipated?				

### Links for further information:

Center for Parent Information and Resources: Cerebral Palsy. https://www.parentcenterhub.org/cp/

British Columbia Ministry of Education. Awareness of Students with Diverse Learning Needs: What Teachers Need to Know: Cerebral Palsy. <a href="http://www.bced.gov.bc.ca/specialed/awareness/31.htm">http://www.bced.gov.bc.ca/specialed/awareness/31.htm</a>

#### Please note:

These websites are for information only and the user is responsible for evaluating the content and appropriate uses of the information.



