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E For Everyone: Implementation Guide

Lindsay Calcaterra  
*University of New England*

Kaela Fischer  
*University of New England*

Kelley Flahaven  
*University of New England*

Megan Witherow Quarles  
*University of New England*

Maria Stern  
*University of New England*

See next page for additional authors

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E For Everyone: Implementation Guide

Abstract
‘E for Everyone’ is an innovative and unique inclusion program that equalizes the playing field among all people with and without disabilities by creating opportunities to build synergistic relationships through teamwork, fun, and physical activity. Created during the Fall 2016 semester, concurrent with the course Physical Therapy Administration, this implementation guide describes the step by step process for implementing the program.

Disciplines
Business | Physical Therapy

Comments
The implementation guide for this program can be found here:

http://dune.une.edu/pt_studadmin/1/

Faculty member Jeff Nevers taught this course and served as an advisor on this project.

Authors
Lindsay Calceterra, Kaela Fischer, Kelley Flahaven, Megan Witherow Quarles, Maria Stern, and Christina Tilton

This course paper is available at DUNE: DigitalUNE: https://dune.une.edu/pt_studadmin/2
E for Everyone
An Integrative Sports Experience For All Children

Authors:
Lindsay Calcaterra
Kaela Fischer
Kelley Flahaven
Maria Stern
Christina Tilton
Megan Witherow Quarles
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Introduction

Welcome to E for Everyone!

This program is designed to be a 12-week integrated sports program for children with neurodevelopmental disabilities and their typically developing peers. Inside this guide you will find the tools you will need to implement this program in your facility. It is important to consider the types of activities your students are interested in for attendance and sustainability. All sports can be mostly adapted using tools you already have at your disposal, but we have also included a list of local resources in your area that you can contact for additional equipment and funding opportunities.

Good luck!
Benefits

Implementing this program may seem ambitious, but we believe the benefits outweigh the efforts required to execute E for Everyone. Some of the benefits you may see include the following:

- Increased inclusion among children in your school
- Increased school and community pride
- Community education regarding people with disabilities and their capabilities
- Healthy lifestyle promotion
- Increased confidence and independence of children
- Decreased risk of comorbidities developed from inactivity
- Increased participation in school activities for children with disabilities
- Positive outcomes in academic work
- Positive outcomes regarding focus in the classroom

<table>
<thead>
<tr>
<th>Benefits for Children with Disabilities</th>
<th>Benefits for Typically Developing Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Sense of belonging</td>
<td>- Increased understanding of others who are different from them</td>
</tr>
<tr>
<td>- Opportunity to engage with peers in age-appropriate activities</td>
<td>- Cooperation with other ability levels</td>
</tr>
<tr>
<td>- Develop skills and behaviors related to teamwork, competition, winning, and losing</td>
<td>- Empathy</td>
</tr>
<tr>
<td>- Increase interest in activities that can prevent/slow progression of conditions</td>
<td>- Humility</td>
</tr>
<tr>
<td></td>
<td>- Problem-solving and adaptability</td>
</tr>
</tbody>
</table>
Vision, Mission, Values, Objectives

Vision and Mission: ‘E for Everyone’ is an innovative and unique inclusion program that equalizes the playing field among all people with and without disabilities by creating opportunities to participate in physical activity and build social relationships.

Values: We value inclusion, physical activity, wellness and prevention, teamwork and cooperation, and positive self-concept, as we believe these values will promote physical and social wellbeing, and encourage wellness of our future generations by creating opportunities for inclusive participation in physical activities.

Inclusion - Inclusion is about affording everyone the support systems they need. We hope to promote unity and interdependence, regardless of race, religion, or ability level. Our aim is to promote tolerance and acceptance in order to increase confidence and reduce social stigmas.

Physical Activity - We believe that physical activity is important for all members of society, regardless of ability level. Physical activity improves physical and mental health, and can reduce the risk of developing several diseases. It has both immediate and long-term benefits, and can greatly increase a person’s quality of life.

Wellness/Investment - Wellness is the act of making choices that lead to a healthy lifestyle. We value wellness as it depicts the health of a person as a whole, including physical, mental, and social health, leading to a well-rounded, healthier, happier person. Participating in physical activities can help develop healthy lifestyle habits which reduce the risk of developing obesity and related comorbidities. Over time, this will save healthcare dollars related to tests, prescriptions, and doctor’s visits.

Teamwork/Cooperation - We believe teamwork and cooperation is important as life requires a multitude of individuals to problem-solve. Learning to work with others and respect their points of view is a common social skill that is learned in childhood, and broadens our mental horizons. These skills also lead us to be more well-rounded, understanding, and respectful individuals.

Positive Self Concept: Physical activity has a positive correlation with building social relationships, which in turn promotes increased positive self-image. By promoting inclusion and teamwork for children of all abilities we hope to help children attain and maintain a positive self-concept.

Objective: By implementing a fresh, new adaptive sports program for children of all levels of ability, we intend to further the field of physical therapy by increasing consultative services and promoting access to physical activity for all children. Our objectives below achieve this by supporting access to physical activity through an easy and innovative integration program run by physical therapists, which in turn saves health care dollars.
Objective One - Support the access of physical activity for all children, regardless of physical or cognitive ability by adapting activities to meet the abilities of the children who participate in our program.

Objective Two - Create a novel physical activity program to integrate children with disabilities with typically developing peers for the benefit of all involved by facilitating respect, understanding, and teamwork.

Objective Three - Create novel consultative opportunities for the physical therapy profession.

Objective Four - Save healthcare dollars by promoting healthy lifestyle habits and reducing risk of developing obesity and comorbidities; this in turn reduces the need for tests, prescriptions, and visits to the physician.
Logistics for Implementation in a school

- Administration permission from:
  - Special Education Director
  - Principal

- Required staff:
  - Physical therapist and/or adaptive physical education teacher as a consultant that is present on day one and checks in periodically to ensure safety of activities and adaptations for students
  - Volunteers can be anyone above the age of 16. Here are some options for recruiting volunteers:
    - Local churches
    - Local high schools
    - Local colleges- especially ones with educational or health professional programs
  - The table below indicates proper staff:child ratios according to Maine Department of Health and Human Services Division of Licensing and Regulatory Services and Community Services Programs; ratio adjustments should be made with consideration to the level of disability for children involved in the program

<table>
<thead>
<tr>
<th>Age of children</th>
<th>1 staff – minimum staff to child ratios</th>
<th>2 staff – minimum staff to child ratios</th>
<th>3 staff – minimum staff to child ratios</th>
</tr>
</thead>
<tbody>
<tr>
<td>All children 6 weeks to 2 years old</td>
<td>1:4</td>
<td>2:8</td>
<td>3:12</td>
</tr>
<tr>
<td>All children 24 months and older</td>
<td>1 staff for 8 children under five years; plus 2 children over five years</td>
<td>2:12</td>
<td>3:12</td>
</tr>
<tr>
<td>All children over 5 years old (school age)</td>
<td>1:12</td>
<td>2:12</td>
<td>3:12</td>
</tr>
<tr>
<td>Mixed ages- when there is a combination of ages within a group, the staff:child ratio is determined by the age of the youngest child</td>
<td>1 staff for 3 children under two years plus 3 children two to five years plus 2 children over five years. <strong>Maximum is 6 plus 2 school age children total.</strong></td>
<td>2 staff for 6 children under 2 years plus 6 children over two years old. <strong>Maximum is 12 children total.</strong></td>
<td>3 staff for 12 children including no more than 9 children under two years of age. <strong>Maximum is 12 children total.</strong></td>
</tr>
</tbody>
</table>
Forms:

○ Waiver forms help protect you and the facility from liability should something go wrong. Your facility may have waiver forms they prefer to use, but there is a sample waiver form in the appendix if not.

○ It is recommended that children participating in this program have some form of physical fitness screen prior to participation. If your facility already has a physical requirement set in place, these documents should be assessed by professional personnel to determine the safety of the child to participate. If your facility does not have this in place, you can find a sample physical form in the appendix. Depending on your facility policy, this form can be filled out by your school nurse, or you can require participants to have an independent physical. If a family does not wish to submit to a physical screen, you need to provide them a waiver form to sign saying they chose not to have a screen prior to their child’s participation.

○ It may be of interest to have volunteers sign a general HIPAA compliance form, or show proof of completing HIPAA certification. A sample form may be found in the appendix.

○ All health records/forms must be kept in a locked office on site to be in compliance with HIPAA. We recommend using the nurse’s office.
## Projected Budget

<table>
<thead>
<tr>
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<th>For schools</th>
</tr>
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</table>
| **Rent for space** (including electricity, heat, etc.) | - $0.00 if endorsed by school  
- $1,000.00 if renting outside space |
| **Liability** - if endorsed by school, program will fall under school liability and liability is often included in rent of outside space.  
Questions to ask insurance company: | - $0.00  
- Do volunteers need to have a certain level of training? / Are background checks necessary for volunteers?  
- Will liability change if the program is run as an after school activity or a weekend activity?  
- Does the policy have staff:child ratios?  
- Does the policy require additional medical services?  
- Does the policy have specific staff:child attendance caps?  
- Does the policy have specific waiver requirements? |
| **Equipment**             | - Small basketball hoop: $35.00  
- Foam balls (Set of 7): $42.00  
- Inflatable balls: $5.00  
- Tennis racket: $15.00  
- Tennis balls (36 balls): $24.00  
- Batting stand: $22.00  
- Bats: $7.00  
- Soccer nets (set of 2): $25.00  
*Prices from Walmart* |
| **Adapted equipment** (i.e.; bikes, wheelchairs, harnesses, crutches, etc.) | - Wheelchair: $25/day, $55/weekend  
- Adapted Bike/Trike: $25/day, $55/weekend  
- Ice Sled and Sticks: $25/day, $75/week  
*Prices from Northeast Passage, Durham, NH* |
| **Compensation for certified staff** (PT, OT, Adapted PE, etc.); not applicable if salaried | Based on hourly rates:  
- PT: $34.00/hr  
- OT: $24.00/hr  
- PE teacher: $16.00/hr  
*Rates based on information from bls.gov* |
| **Compensation for medical staff** (i.e. nurse, AT, etc.); not applicable if salaried - Medical staff should meet needs of levels | Based on hourly rates:  
- School Nurse (i.e.; RN): $29.00/hr  
- Athletic Trainer: $23.00/hr |
of disability of participating children
- State of Maine regulates that there must be present at all times a staff member who is currently certified in first aid and infant, child and adult Cardio Pulmonary Resuscitation (CPR) (See appendix)

**Rates based on information from bls.gov**

<table>
<thead>
<tr>
<th>Miscellaneous Equipment (i.e. cups, towels, water etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Cups: $2.58 for 88 cups</td>
</tr>
<tr>
<td>- Hand Towels: $2 each</td>
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<tr>
<td>- Water: $0.88/gallon drinking water</td>
</tr>
<tr>
<td><strong>Prices from Walmart.com</strong></td>
</tr>
</tbody>
</table>

*You can use outcome measures to assess the efficacy of your program

| - PEM-CY: $99 |
| - Assessment of Life Habits: $235 |
| - Brockport Physical Fitness Test 2nd ed. With web resource: $34.65 |
| **Prices based on resource websites** |

In order to offset costs, participating children can provide their own water, snacks, towels, and personal pieces of equipment. Parents, siblings, and individual support staff members may also assist with sport participation to decrease need for finding outside volunteers or staff that requires compensation. In addition, local pediatric therapy clinics may be willing to loan pediatric wheelchairs if needed to offset costs. Further, in place of the outcome measures noted above you may design your own survey to administer to participants, their families, and staff.

If implementing within a school, sports equipment may be readily available, negating the costs listed above.

**Financial Models:**
Finances are important to manage. Based on the socioeconomic area your school is in and the students it serves, it is important to pick the best financial model that will encourage the most participation from the students, while ensuring the program has the financial capability to run successfully. Below are two suggested models.

**Model 1:**
The first model is designed to shift the financial burden to the program itself. In this model, the program fundraises for itself and does not share this burden with its participants. Solicit donations from local businesses as sponsors to eliminate the need for charging participant fees to help open up this program to children of lower socioeconomic areas. In exchange, sponsors get positive publicity such as: banners around facility, logos on back of t-shirts, advertisement booklet, media releases by the program. You can also solicit local adaptive equipment vendors as sponsors for use of their equipment during the season. In return, they would receive publicity of their equipment and logo, as well as potential business from participating families who are interested in adaptive equipment they have tried through this program.
Model 2:
This model shares the financial burden with its student by imposing a participation fee. This fee can help to offset the costs of renting adaptive equipment, space, etc. It is possible to have this fee on the same sliding scale used for reduced lunches and other financial reliefs in order to encourage maximum participation from the students. A reduced rate can be utilized as incentive for signing up for multiple seasons thereby increasing the likelihood of developing good physical activity habits that will continue later in life.

Potential Sources for Fundraising:
Fundraising can help to offset the costs this program incurs. A sample letter to sponsors can be found in the appendix: one on behalf of the program, and one on the behalf of the student. Below is a list of potential sponsors:
- Local banks
- Local supermarkets
- Local stores, cafes, restaurants
- Elks club
- Kiwanis club
- Local lions club
- Local grants
- Local Masonic lodges

Any many more….
Marketing strategies

Marketing is vital to the success of this program. Marketing the benefits of the program to children, parents, and their healthcare providers is important to garner participation in the program once implemented.

- **Message:** Participation in this inclusive sports program will improve physical fitness, social relationships, and self-concept for children with and without disabilities. Participation in physical activity can prevent future health care expenditures by reducing secondary effects of inactivity. Age-appropriate physical activity can promote a sense of belonging for children with disabilities and teach life-skills such as teamwork. Hosting a program such as this would be a boon for participating school systems.

- **Audience w/ demographic analysis:**
  - The audience for the inclusive program itself is children in grades 4-8 with and without disabilities (including but not limited to neurological, orthopedic, congenital) and their parents.

- **Distribute information directly to school systems via school-based physical therapists, special education directors, principals, and adaptive physical educators.** This is a low-cost method of marketing that can be achieved through a face-to-face meeting, phone call/video conversation, or written correspondence.

- **Once a location has decided to implement the program, participant referrals will come from pediatric physical therapists, adaptive physical education teachers, and special educators.** Interested parties will be placed on a contact list to receive information about dates, times, and locations. Self-referrals will also be permitted and are encouraged. Marketing through local media outlets such as newspapers, radio, public access television, social media, and school newsletters will invite children within our demographic to participate. This will have some cost associated, but donations from local sponsors can be used to pay for this.

- **Once program validity in your community has been established, you can market this program to local pediatricians so they can refer patients they think would benefit from a physical activity program like this.**
Goals

The following are suggested goals for implementation within your school system.

1. Provide a positive, fun-filled experience for all children.
2. Attain participation of 20 children within 4 weeks of initiating program.
3. Teach participants the skills and sportsmanship required to play the designated sport.
4. Build character by promoting team experience regardless of ability level.
5. Provide opportunities for equal playing time for all participating children.
6. Generate interest in physical activity among middle school-age children.
Sample Plan of Action

Implementing “E for Everyone” in your school system may involve a presentation to stakeholders, such as the superintendent, principal, special education director, or teachers and staff. We have outlined questions you should consider and be prepared to discuss and provided sample answers to these questions.

**Schools targeted:** Auburn Middle School, East Auburn Community School, Fairview Elementary School, Park Avenue Elementary School, Sherwood Heights Elementary School, Walton Elementary School, Washburn Elementary School, and Franklin Alternative School all located in Auburn, Maine.

**Grades involved:** Children in grades 4-8

**Recruitment method:** Flyer sent home with children, email contact to parents, social media and newspaper advertisements in the *Lewiston-Auburn Sun Journal.*

**Dates/times of program:** Program will meet once a week for 1 hour on Tuesdays after school in April 2017

**Facility intended to use:** Gymnasium at Auburn Middle School

**Sport(s) planned:** Basketball

**Number of participants to recruit:** 10 participants would make this successful, but it can be run with as few as 8. Beyond 20 participants would involve substitutions or round-robin play.

**Adaptations to facility:** Lower hoops will be utilized. These will be borrowed from East Auburn Community School physical education equipment and will be transported by a designated volunteer and set up by a custodian on the day of the program. Depending on the number of participants two games can be performed simultaneously on the width of the court; therefore, a maximum of four hoops will be used.

**Equipment needed from school supplies:** Basketballs and lower basketball hoops from physical education supplies, pinnies.

**Equipment to be obtained:** 1-2 manual wheelchairs for children without disabilities to use during program to gain perspective about life with a disability will be borrowed from local pediatric PT clinic.

**Fees:** No fees are anticipated

**How fees/funds will be raised:** Sponsorship from local Hannaford Supermarkets, Oceanview Credit Union, Elks Lodge # 345 in Auburn, ME

**Staffing source:** The University of New England has promised 12-15 graduate-level physical therapy students who are part of the Normal Development or Pediatrics course for each session.

**Follow-up questions to consider:**
- Will you cap the participants at a certain number?
- Does this program need to meet after school/on weekdays?
- Does school staff (PT/OT/SLP, PE teachers, special education teachers, nurse, others) need to be present/participate and will this be voluntary/pro bono?
- How will participants be transported to the location of the program?
- How will fees/funds be raised if needed?
- Should parents be present/on premises?
- What measures have been taken to ensure child safety?
- Where with health information be stored? (HIPAA compliance)
- Will bussing be an issue given that there are several different schools in this district?
- (half-sized bus, van/personal cars operated by parents)
- Will this compete with the district-sponsored after-school programs?
- Will this conflict with other sports programs available to children in the district? (e.g. interscholastic programs)

Note: It is important to consider the presence of Individual Support Programs (ISPs). These should be shared with coaches so as to maintain consistency of positive behavioral support for children who require extra supports.
General Adaptation Considerations

Field setup:
- Shorter fields, or increased space for free motion
- Shorten distance players have to wheel or run (i.e.: distance between baskets, smaller baseball diamond, etc.)
- Level the playing field by placing typically developing students in wheelchairs, or having them use crutches
- Divide the field into zones depending on level of mobility (i.e.; running, walking, wheelchairs, etc.) and have the typically developing children rotate through the zones
- Mark positions on the field
- Use well defined boundaries

Modifications for visually impaired:
- Use larger and brighter balls
- Make sure peers and instructors are within the child’s visual field
- Use verbal commands/ call students name before passing
- Decrease the business of the surrounding areas
- Use partitions between the zones to minimize increased visual stimulus
- Orient student to the court and give them an area to cover
- Use bright colors on the field boundaries
- Use lighted goals/hoops

Modifications for hearing impaired:
- Use lights instead of whistles
- Put bells inside the balls
- Use hand signals
- Use partitions between the zones or play inside a gym or in smaller groups to minimize increased visual stimulus

Modifications for mobility impaired:
- Use smooth surface
- Use partner system on uneven surfaces (i.e.; grass) so propulsion isn’t solely on one student

Modifications for cognitively impaired:
- Use simple instructions
- Repeat instructions clearly and slowly
- Motivate for small goals (i.e.; passing and catching) and work higher (i.e.; goals and hoops)

General:
- Allow for changes in the rules (i.e.; double hits, traveling etc.) but not so much that you lose the essence of the game

Safety:
- Adapt the activities to the students mental age as well as physical abilities
- To prevent tipping, students with less control over their wheelchairs should use wider wheels
- Keep inhalers nearby for students with asthma
- Provide frequent rest periods and access to water
Adapted Basketball

Set Up and Rules
- Use lower baskets or larger-sized hoops
- Draw attention to the basket with lights, bright colors, etc.
- Use a smaller or lighter ball
- Modify the rules of basketball (E.g. multiple steps allowed between dribbling, more than 3 seconds permitted in the lane, dribbling with two hands)
  - For wheelchair participants, allow them to carry the ball in their lap but restrict the number of pushes or distance that they can go before this becomes a “travel”
  - Allow all participants to utilize wheelchairs
- Award points for smaller accomplishments (E.g. consecutive dribbles, successful passes)
- Sound-producing device and/or visibility-enhancing device on ball (E.g. beeper, brightly colored tape)
- Call a teammate’s name before passing to them

Skill-Specific
- Bounce passes are preferred over chest passes
- Encourage trapping the ball against the chest with two hands
- Shoot at an angle to the basket instead of head on

Reference:
http://ww2.manchester.edu/docs/default-source/academic-departments/ess/apebasketball.pdf?sfvrsn=2
Adapted Baseball

Setup and Rules:
- Shorten the distance a player has to run to be considered ‘safe’
- Allow other players to run in place of the player batting (designated runner)
- Use lighter or bigger bats, or racquets
- Use bigger/lighter balls
- Don’t count strikes and balls, but give each player at most 6 attempts
- Don’t count outs, but play until whole team has hit; vary hitting order so each has chance to run
- Give individual points or hits or ‘outs’
- Players without disabilities play at regular distance from pitcher’s mound and bases
- Players without disabilities wait 10 seconds before tagging out players with disabilities

Skill Specific:
- Immobilize the ball (i.e.; use a tee) until player gains ability to hit moving target
- Use scoops to pick up the ball
- Use overhand/underhand throw and progress to one-hand throw
- Use Velcro balls and mitts
Bowling

Setup and Rules:
- Use a ramp
- Use a partner
- Give continuous verbal cues
- Create distinct boundaries
- Use softer balls
- Use bigger and lighter pins
- Use less pins

Skill Specific:
- Use two hands and progress to one hand
- Remain in stationary position and progress to moving
Golf

Setup and rules:
- Use a club with a larger head
- Use a shorter and/or lighter club
- Use colored, larger balls
- Shorten distance to the hole

Skill Specific:
- Practice first without a ball
- Use a tee for all shots, and progress to no tee
Ice Hockey (Sled Hockey)

Set Up and Rules:
- Use sleds for everyone
- Use plastic sticks
  - Two for everyone, to be used to propel, shoot, and pass
  - For those with limited grip, sticks can be secured to their hands
- All players to wear helmet with face mask, as well as full body protection
- Children who are unable to self-propel their sled may have a partner to push/steer
- Do not allow checking

Skill Specific
- Practice sled turning, decreasing radius as able
- Practice using sticks to advance across ice

*Image from Google Images*
Soccer

Setup and Rules:
- Use well defined boundaries
- Reduce field size
- Play six on six
- For children with wheelchairs allow player to hold ball on their lap while pushing the wheelchair
- Use bigger balls
- Use targets that make a noise with goal
- Allow children without lower extremity control to use a hockey stick

Skill Specific:
- Practice for coordination; start with kicking stationary ball and then progress to moving ball
Tennis

Setup and Rules:
- Use larger/lighter balls
- Use shorter/lighter racquets or larger head racquets
- Allow for drop serve
- Allow for double bounce
- Use wider boundaries or allow “three strikes” of the ball going out of bounds
- Award points for skills such as returning the ball over the net or backhand hits
- Challenge more skilled players to hold racket in non-dominant hand
- Play doubles, triples, etc. so each player is responsible for a smaller section of the court
- Allow volleys between teammates before passing the ball over the net (like volleyball)

Skill Specific
- Challenge participants to dribble the ball as many consecutive times as possible
  - On the racquet
  - Between the racquet and the ground
- Practice volleys between players at a closer distance so less force is required
Track and Field

Set-up and Rules
- Running
  - Use relay races with a mixture of ability levels
    - Match legs of the relay race based on ability levels so race is evenly matched
    - Require faster participants to perform jumping jacks before running, or require 10 second delay
  - Incorporate dynamic activities such as skipping, side shuffling, and backpedaling as part of the relay
- Jumping
  - Measure from the launch point for the long and triple jumps
    - Do not count a foul if the child misses the designated jumping point
- Throwing
  - Use a lighter/safer implement such as Frisbee and softball instead of traditional throwing implements

Skill Specific
- Create a training program based on ability
  - Ex. Repeat 100m sprints x 10 for higher ability and x 4 for others but all participants are running at the same time
Volleyball

Set Up and Rules:
- Use a lower net
- Use a lighter/larger ball that has more hang time
  - Ex. beach ball or balloon
- Increase the number of players on the court
- Allow the ball to hit the floor
- Allow underhand serves with multiple attempts to clear the net
  - If group as a whole is having difficulty serving have coach bounce the ball into play
- Allow the ball to be played out-of-bounds
- Play “freeze volleyball” where each player is responsible for a designated spot
  - Equalizes children using wheelchairs
- Allow an increased number of passes before the ball needs to cross the net
- Allow children to safely use feet or head
  - Especially helpful with children with upper extremity involvement
- Award points for consecutive passes amongst a team

Skill Specific:
- Practice “bumping” and “setting” ball with a partner or against a wall
Other Physical Activities

- Obstacle Courses:
  - Combine a variety of physical tasks (i.e. skipping, running, hula-hooping) with cognitive tasks (i.e. puzzles, trivia) so all children are asked to perform a task they have mastered and a task they have struggled with
Suggestions for Initiating Inclusion

- Promote commonalities by beginning the program with the children introducing themselves by name and birth month/favorite color/favorite sports team
- Mix teams weekly or part-way through each session so children all get a chance to know each other
- Promote sportsmanship by giving one child a “sportsmanship award” each session
- Award points for passing to promote the utilization of all participants during a game
- If a child is demonstrating negative attitudes or behaviors toward their peers a “time out” in the “penalty box” can be implemented or points can be retracted from the player’s team

If this persists a conversation with the child and parents may be beneficial
Community Resources

Robbie Foundation, Scarborough, ME.
- Help with fundraising for equipment, therapy, and/or technology not covered by insurance. http://robbiefoundation.com/

Maine Cite
- Adaptive equipment and technology funding sources
http://mainecite.org/paying-for-at/

Saco Medically Oriented Gym (MOG), Saco, ME
- Providing Kids Fitness classes and adapted fitness instruction. For more information, contact Jen Corbeil (207) 439-5104 http://sacome.themoggroup.com/

Casco Bay YMCA, Freeport, ME
- Adaptive exercise programs for adults and youth with disabilities, illness, and recovering from injury. Contact 207-865-9600.

Pine Tree Society
- Camp (day and overnight) programs for youth with disabilities 5-18 years located in Belgrade Lakes Region. For details contact 207-443-3341, http://www.pinetreesociety.org/camp.asp

Special Olympics Maine
- Large variety of adapted sport events and integrated sports leagues available. For programming details in Maine contact (207) 879-0489, http://www.somaine.org/sports/our-sports/

Maine Adaptive

Black Bear Medical Equipment

Northeast Passage
- Promotes recreation and health programs for people with disabilities, and rents recreational equipment to those who do not have their own. http://nepassage.org/equipment-rentals/

Maine Principals’ Association - Unified Sports
Acknowledgements:

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References:

http://www.pecentral.org/adapted/adaptedactivities.html
http://ww2.manchester.edu/docs/default-source/academic-departments/ess/apebasketball.pdf?sfvrsn=2
http://www.bls.gov/oes/current/611100_2.htm#25-0000
http://www.disabledsportsusa.org/sport/sled-hockey/
Appendix:
Excerpt from the Maine Department of Health and Human Services
Division of Licensing and Regulatory Services and Community Services Programs

1. PERSONNEL

1.1. Staff requirements for all Child Care Facilities

1.1.1. **Student assistants or volunteers.** Students at least sixteen (16) years of age serving as assistants or volunteers in a child caring capacity need not be counted as children in care and shall not be counted as staff.

1.1.2. **Supervision of student assistants or volunteers.** Students in Section 12.1.1 above must be under the direct supervision and observation of a staff member.

1.1.3. **First aid and CPR.** There must be present at all times a staff member in each Child Care Facility who is currently certified in first aid and infant, child and adult Cardio Pulmonary Resuscitation (CPR).

1.1.4. **Assigned tasks.** Administrative and childcare staff must be able to perform their assigned tasks and meet all staff requirements in these rules.

1.1.5. **Exercise good judgment.** Childcare staff responsible for or assisting with the care of children in the facility and other paid or unpaid staff and volunteers shall be emotionally stable and mature, able to exercise good judgment in the handling of children and shall not engage in any action or practice that may be deemed detrimental to the welfare of the children.

1.1.5.1. **Detrimental actions or practices.** Actions or practices that may be deemed detrimental to the welfare of children or that are potentially harmful to children are strictly prohibited.

1.1.5.2. Such actions or practices as defined by the Division of Licensing and Regulatory Services include but are not limited to the following:

1.1.5.2.1. Corporal punishment, as defined in Section 1.6;

1.1.5.2.2. Use of a stick or other instrument in disciplining a child;

1.1.5.2.3. Sexual abuse;

1.1.5.2.4. Lack of supervision;
1.1.5.2.5. Neglect in any form;
1.1.5.2.6. Withholding food or drink;
1.1.5.2.7. Derogatory remarks to or about children or parents;
1.1.5.2.8. Name calling;
1.1.5.2.9. Shaming or embarrassed;
1.1.5.2.10. Unusual confinement; or
1.1.5.2.11. Rough handling.
Sample Liability Release Form

Name of Business or Organization

________________________________________

Activity or Event

________________________________________

Participant’s Name

________________________________________

I understand that participation in the above Activity or Event may be hazardous for the above-named participant.

In signing below, I assume risk of harm or injury which may occur to the participant as a result of participating in the above-named event or activity. I hereby release (business or organization name) ________________ and its officers, employees, or agents from any liability, costs and damages resulting this individual’s participation.

If the participant is a minor:

I agree that the minor has my consent to participate in the event or activity.

I also give my consent for the business or organization to seek emergency treatment for the minor if necessary, and I agree to accept financial responsibility for the costs related to this emergency treatment.

________________________________________ / __________

Participant’s signature / Date

________________________________________

Name of Parent or Guardian

________________________________________ / __________

Signature of Parent/Guardian / Date
Sample Athletic Participation Form

Name:_____________________________________ Birth Date:_____________________________ Gender: M   F
Grade:_______________________ School:__________________________ Sport:__________________________
Address:___________________________________________________ Home Phone:_______________________
Parent 1 Name:___________________________________________ Phone:____________________________
Parent 2 Name:___________________________________________ Phone:____________________________
Emergency Contact Person (in the event that neither parents can be reached):
Name:__________________________________ Relation:_____________________ Phone:___________________

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Comments:____________________________________________________________________________
_____________________________________________________________________________________

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<tr>
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</table>

I approve this student’s participation in an interscholastic sport for one year:  Yes  No

Physician/PNP Name: ____________________________________________________________

Physician/PNP Signature: ___________________________ Date:______________________
Letter template for participants to use to solicit financial sponsorship to participate:

Date
Name
Organization
Street
City, State ZIP

Dear Name,

“E for Everyone” is an inclusive sports program for children in grades 4-8 with and without neurodevelopmental disabilities. This program meets [day of week] at [place]. This program promotes physical activity and social relationships between participants regardless of ability. I am looking for a sponsor who can sponsor my participation in this activity. I would be very grateful if your organization could contribute [$ amount] for my participation fee.

Thank you in advance for this or any other contribution you can make to promote my physical and social health!

Sincerely,

[Name]

Adapted from https://www.qgiv.com/blog/fundraising-letter-templates/
Sample Letter to Local Newspaper for Publicity

Dear Editor,

[Insert school name] has implemented an inclusive sports program for children in grades 4-8 aptly called “E for Everyone.” This program allows local children to come together to enjoy physical activity in a fun, safe environment while fostering understanding and self-confidence. All children are encouraged to play, regardless of physical or mental ability, and the sports played are adapted based on the guidance of physical therapists and adaptive physical education teachers. There are many benefits gained from participation in this program which are backed by research. We welcome new participants, donations to run our program, and volunteers! For more information, please contact [contact name] at [email/phone #].

We thank the community for its support!

[Contact name]

- Provide photo if available and per parental photo release permission
Sample Photo Release Form

“E for Everyone”
[School name]
[Address]

Permission to Use Photograph
Participant name: ___________________
Location: __________________________

I give permission for “E for Everyone” to take and use photographs of [child’s name] for lawful purposes in connection with publicizing, advertising, and promoting this program. I authorize photographs to be published in print or electronically at the discretion of “E for Everyone” by this entity and chosen media outlets. I agree that these photographs may be used with or without [child’s name] name identified.

I have read and understand the above.

Child’s Name: ______________________________________
Parent’s Name: ______________________________________
Parent’s Signature ____________________________________ Date: ______________

Modeled after:
https://www.inphilanthropy.org/sites/default/files/resources/Sample%20Photo%20Release%20Form.pdf
Letter template to form partnerships with colleges/universities and recruit participants

Dear [Program Director Name],

“E for Everyone” is an inclusive sports program for children in grades 4-8 with and without neurodevelopmental disabilities. This program meets [day of week] at [place]. “E for Everyone” promotes physical activity and social relationships between participants regardless of ability through the adaptation of age-appropriate sports. As you are probably aware, there are numerous physical and social benefits to be gained by participating in a program such as this.

The [school name] group of “E for Everyone” would like to form a partnership with [institution name]. We invite your students who are majoring in education, physical education, special education, physical therapy, occupational therapy, health professions, or are seeking volunteer experience to consider joining “E for Everyone.” This would be a rewarding and fun experience for your students, and an opportunity for our participants to have positive young-adult role models. Interested students can learn more information by contacting me at [email].

We look forward to partnering with [institution name]!

Sincerely,

[Contact name]
[Contact info]
Sample HIPAA Compliance Form

Each person who works, advises, or volunteers at E for Everyone is required to ensure confidentiality of information. It applies to all aspects of interactions at any E for Everyone facility or function. Confidentiality must be maintained to past, present, and future information obtained by any means – oral (heard or discussed), paper (faxes, documents), and electronic (computer, PDA). The obligation to maintain confidentiality pertains especially but not limited to the following:

- Patient and family information
- Information from the medical record
- Business information, organizational documents or other sensitive information
- Media communication

In consideration of your association with E for Everyone and its affiliated entities, you (and your associates) agree, that during this time period and thereafter indefinitely, you shall not allow disclosure, directly or indirectly, of confidential information, obtained by any means, except where disclosure is required as part of your job or association, required by law, or with the written approval of E for Everyone.

Furthermore, you agree that at the end of this association, you shall promptly return to the facility any and all confidential information disclosed to you that is written, electronic or other form. You will continue to hold confidential any unwritten or oral information subject to the terms of this agreement.

I understand any violation of this agreement may result in appropriate action.

I have read the above statements and agree to abide by the obligations of confidentiality in regards to for any and all information.

_____________________________________________________________
Print Name

_____________________________________________________________
Sign Name

_____________________________________________________________
Today’s Date

Name, Title
E for Everyone Contact/Supervisor