



Special Needs Statement Relative to the Provision of Day Care

Department of Social Services

TA, DCU, CPS, CS, AFS, FRS

B-3962 (2/2020)

Worker Name	Phone Number	Office	Unit	Worker	Date
Case Name			Case Number		
Child's Name			Date of Birth		

Please have your Physician or Specialist complete this form, listing your child's Special Needs condition[s], as defined on the definition sheets:

Recommendations / Comments on Special Requirements for Care, such as medical procedures, equipment, medication, training / skills of care provider, etc.:

Medical Provider's Signature	Date
Medical Provider's Printed Name	Phone Number

Medical Doctor Specialist Field:

Comments

Please return completed original to the ECDSS worker at:
Erie County Department of Social Services (ECDSS)
P.O. Box 120
Buffalo, NY 14201

FOR ECDSS USE ONLY

Approved Denied

Vendor Name	Vendor Number
Supervisor Signature	Date
Executive Staff Signature	Date

DEFINITIONS OF SPECIAL NEEDS

1. **Visual Impairment** – A visual handicap which, even with correction, adversely affects a child's ability to function normally. The term includes impairments that result in a child having partial sight or blindness. Diagnosis of the child's condition must be made by an ophthalmologist, optometrist, physician or pediatrician.
2. **Deafness** – A hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, and which adversely affects the child's ability to function normally. Diagnosis of the child's condition must be made by an audiologist, otolaryngologist, physician or pediatrician.
3. **Hard of Hearing** – A hearing impairment, whether permanent or fluctuating, which adversely affects the child's ability to function normally but which is not included under the definition of deaf. Diagnosis of the child's condition must be made by an audiologist, otolaryngologist, physician or pediatrician.
4. **Orthopedic Impairment** – A physical handicap resulting from a severe orthopedic impairment which adversely affects a child's ability to function normally. The term includes impairments caused by congenital anomaly [e.g., clubfoot, absence of some limb or digits, etc.], impairments caused by disease [e.g., poliomyelitis, bone tuberculosis, etc.], and impairments from other causes [e.g., cerebral palsy, amputation, and fractures or burns which cause contractures]. Diagnosis of the child's condition must be made by a physician, pediatrician, orthopedist, or neurologist.
5. **Emotional Disturbance** – An inability to learn which cannot be explained by intellectual, sensory or health factors and which causes a child to exhibit, to a marked degree, one or more of the following characteristics over a long period of time:
 - a. an inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
 - b. inappropriate types of behavior or feelings under normal circumstances;
 - c. a general pervasive mood of unhappiness or depression; or
 - d. a tendency to develop physical symptoms or fears associated with personal or school problems.Diagnosis of a child as emotionally disturbed must be made by a psychologist, psychiatrist or other clinically trained and State-qualified mental health professional.
6. **Intellectual Disability**– General intellectual functioning that is determined to be 1.5 standard deviations or more below the mean of the general population on the basis of a comprehensive evaluation which includes an individual psychological evaluation and which results in a consistent demonstrable deficit in a child's ability to adapt to his or her learning environment. Diagnosis of the child's condition must be made by a psychologist, physician or pediatrician.
7. **Learning Disability** – A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, neurological impairment, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems which are primarily the result of visual, hearing or motor handicaps, of intellectual disability, of emotional disturbance, or of environmental, cultural or economic disadvantage. A child who exhibits a discrepancy of 50 percent or more between expected achievement and actual achievement determined on an individual basis shall be deemed to have a learning disability. Diagnosis of the child's condition must be made by a psychologist, special education

professional, psychiatric social worker or other mental health professional.

8. **Speech Impairment** – A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment which adversely affects the child's ability to function normally. A child should not be classified as having a communication disorder when speech and language differences may be attributed to cultural, ethnic, bilingual, or dialectical differences or being non-English speaking. Diagnosis of the child's condition must be made by a speech or language pathologist, audiologist, otolaryngologist, physician, or pediatrician.
9. **Health Impairment** – A physical handicap which limits a child's strength, vitality or alertness caused by chronic or acute health problems which adversely affect a child's ability to function normally. Examples of such health problems include, but are not limited to, a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell, anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, tourette syndrome or HIV or AIDS. Diagnosis of the child's condition must be made by a pediatrician, physician or other medical specialists.
10. **Autism** – A behaviorally defined syndrome which occurs in children of all levels of intelligence. The essential features of autism are typically manifested prior to 30 months of age and include severe disturbances of developmental rates and/or sequences of responses to sensory stimuli, of speech, of language, of cognitive capacities, and of the ability to relate to people, events and objects. Diagnosis of the child's condition must be made by a psychologist, psychiatrist or other clinically trained and State-qualified mental health professional.
11. **Multiple Handicaps** – Two or more handicapping conditions identified in Sections 1 to 10, herein, that result in multisensory or motor deficiencies and developmental lags in the cognitive, affective, or psychomotor areas, the combination of which cause problems that interfere with the child's ability to function normally. Diagnosis of the child's condition must be made by a pediatrician, physician or other medical specialist.