

Fact Sheet 17

SUPPORTING YOUR CHILD AT DAYCARE OR SCHOOL: SUGGESTIONS FOR INFORMATION PARENTS COULD SHARE

Starting daycare or school is an exciting step for both children and families. For children with a craniofacial condition, sharing some key information with educators and carers can help them feel confident in supporting your child. This might include explaining your child's condition and any surgeries they've had, letting staff know about monitoring for head injuries, or keeping track of ongoing appointments. It can also help to check in with your child's healthcare team first, so you're confident the information you share is accurate and relevant.



Although this fact sheet focuses on craniofacial conditions, many of the suggestions can be helpful for other children too. There's no need to share more than you're comfortable with—these ideas are here simply to guide you on what you might communicate with care or education staff.

Medical Considerations

You may want to share relevant medical details such as details of their condition, surgeries, ongoing treatments, or medication needs. For example, your child might have had surgery to address a cleft lip and palate and might take daily medication for reflux. This helps staff recognise signs of discomfort or swallowing difficulties.

Child Communication Preferences

Letting staff know how your child best communicates—whether through speech, gestures, sign language, or devices—can support clearer interactions. For instance, your child might use simple words and gestures or a communication app, so staff can use short sentences and visual cues.

(continued overleaf)



Craniofacial Australia

204 Melbourne Street
North Adelaide
South Australia, 5006

W: craniofacial.com.au
E: familysupport@acmff.org.au
P: (08) 8267 4128



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Parental Communication Preferences

You may also wish to share your own communication preferences with daycare or school staff. For example, some parents ask to be contacted about any falls—even minor ones—or if their child is frequently touching their head, especially before the skull has fully fused.

Developmental Notes

Sharing developmental factors like speech delays or hearing difficulties and effective strategies can aid learning. For example, your child may benefit from sitting near the teacher or using hearing aids. If there is a possibility of learning difficulties or developmental delay in the future, it may also be helpful to let staff know and ask to be informed if they have concerns.

Sensory Sensitivities

If your child is sensitive to noises, lights, textures, or busy environments, you could mention ways to help them feel more comfortable. Loud noises like fire alarms might be upsetting, or certain clothing textures uncomfortable. Providing a quiet corner or allowing soft clothing can help.

Mobility and Physical Needs

Informing staff if your child uses mobility aids or has physical restrictions ensures safety. For example, your child might use a wheelchair or need help with stairs or bathroom access.

Behavioural Considerations

Describing your child's temperament and responses to new situations or frustrations can help staff offer the right support. Your child may get anxious in new environments or when routines change, so advance warnings and calm reassurance are helpful.

Social Interaction Style

You might share how your child interacts with peers and what social support they benefit from. For instance, your child may be shy around new friends and do well with guided play or small groups.

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Explaining your Child's Boundaries

Children are naturally curious, and peers may ask questions or show interest in visible differences such as scars, medical devices, or facial features. Letting educators know your child's preferences helps them guide these interactions in a respectful way. For example, your child might not like others touching their scar, or they may prefer certain questions be answered by an adult. Educators can then set boundaries, model respectful behaviour, and even turn curiosity into a learning opportunity (e.g., a class discussion or activity about hospitals and visible differences).

Feeding and Nutrition

Sharing special feeding needs or dietary restrictions can be important. Your child might need soft foods only or have allergies requiring strict avoidance of certain ingredients.

Medication and Medical Equipment

Details about medication or devices used during the day help ensure proper care. For example, your child might need a daily inhaler or wear a hearing device that requires attention.

Emotional Support Needs

Explaining what helps your child cope with stress or difficult moments can guide staff. Your child might calm down with a favourite toy, a quiet space, or gentle encouragement.

Confidentiality and Privacy

You may wish to specify how information about your child's condition is shared among staff to respect privacy, such as limiting it to key personnel.

Emergency Procedures

Providing clear instructions for emergencies, including allergies or choking risks, helps staff respond appropriately and quickly contact you if needed.

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First Aid Response Clarity

Outline any physical characteristics that may look unusual but are normal for your child (e.g., a bump on their head).

Conversations with schools and carers will come up repeatedly as your child grows, especially if further medical interventions are needed (whether craniofacial-related or not).

Keeping a digital health portfolio can make this easier by storing important information in one place. Options include hospital or clinic portals (such as MyChart), government systems like My Health Record in Australia, secure apps designed for families, or a simple cloud-based folder system (e.g., Google Drive, Dropbox). Having a central record can save time, reduce stress, and ensure you always have accurate information ready when it's needed.

This information is based on the expertise of clinicians who work with families affected by craniofacial conditions and the lived experience of parents with children who have been diagnosed with craniosynostosis. We thank everyone who contributed to this fact sheet.



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How we can support you:

- Care packs
- Financial assistance
- Family support coordinator
- Connection to other families

