

SPECIAL EDUCATION SERVICES

A Manual of Policies, Procedures and Guidelines



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BRITISH COLUMBIA MINISTRY OF EDUCATION

Special Education Services: A Manual of Policies, Procedures and Guidelines

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TABLE OF CONTENTS

Introduction -----	iii
Using this Manual -----	iv
Glossary -----	v
A. Policy-----	1
Special Education Policy -----	1
B. Roles and Responsibilities -----	6
B.1 Ministry of Education: Special Education -----	6
B.2 School Districts -----	6
B.3 Schools -----	9
B.4 Parents-----	10
B.5 Students -----	11
C. Developing an Individual Education Plan-----	12
C.1 An Overview of the Process-----	12
C.2 Identification & Assessment-----	13
C.3 Planning-----	15
C.4 Program Support & Implementation-----	19
C.5 Evaluation of Student Learning-----	20
C.6 Reporting Student Progress-----	20
C.7 Students with Different Cultural or Linguistic Backgrounds -----	21
D. Special Considerations: Services -----	23
D.1 Learning Assistance Services -----	23
D.2 Counselling in Schools -----	26
D.3 School Psychology Services -----	29
D.4 Speech-Language Pathology -----	31
D.5 Physiotherapy/Occupational Therapy-----	33
D.6 Hospital Education Services -----	35
D.7 Homebound Education Services -----	37
D.8 Distributed Learning-----	38
D.9 Funding Special Education Services - Update -----	39
E. Special Needs Categories -----	40
E.1 Considerations for Reporting-----	40
E.2 Intellectual Disabilities -----	41
E.3 Learning Disabilities -----	47
E.4 Gifted -----	53
E.5 Behavioural Needs or Mental Illness -----	56
E.6 Physically Dependent -----	63
E.7 DeafBlind -----	67
E.8 Physical Disabilities or Chronic Health Impairments -----	70

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

E.9 Visual Impairments -----	74
E.10 Deaf or Hard of Hearing -----	79
E.11 Autism Spectrum Disorder -----	85
F. Provincial Resource Program -----	91
F.1 Provincial Resource Programs- PRPs -----	91
F.2 Eligibility for PRP Status-----	91
F.3 Procedures for Designation-----	92
F.4 List of Programs -----	93
G. Quick Reference - Internet Resources -----	97
H. Appendices-----	1
H.1 Accessible School Facilities Planning -----	1
H.2 Access to Equipment, Technology & Services -----	2
H.3 Adjudication: Provincial Examinations -----	11
H.4 Appeals: Resolution of Conflicts -----	12
H.5 Classification of Educational and Psychological Tests (Levels A-C)-----	13
H.6 Distributed Learning for Students with Special Needs-----	16
H.7 Full Day Kindergarten-----	17
H.8 Inter-Ministry Protocols - Provision of support Services -----	18
H.9 Removal Health Safety -----	20
H.10 Steps for Protection against Germs and Disease-----	21
H.11 Integrated Services & Case Management -----	23
H.12 Children & Youth with Special Needs (CYSN) Framework for Action-----	23
H.13 Relevant Governing Legislation: School Act - Ministerial Orders -----	25
H.14 Student Records: Use and Management-----	26
H.15 Summary: Distributed Learning Policy -----	27
H.16 Summary: Funding Special Needs Policy-----	31
H.17 Transition Planning -----	34
H.18 Transportation-----	36
H.19 Work Experience -----	37

INTRODUCTION

Introduction

This resource conveys policies, procedures, and guidelines that support the delivery of special education services in British Columbia's public schools. It was originally published in 1995, following an extensive provincial Special Education Review (1993-94).

The purpose of this manual is to provide a single point of reference regarding legislation, ministry policy and guidelines to assist school boards in developing programs and services that enable students with special needs to meet the goals of education. The manual also contains procedural information to assist in accessing programs and services provided at the provincial level. It is intended primarily for the use of principals, school-based teams and special educational professionals, but may also prove of interest to other professionals within the education, social service or health care communities, to parents and to members of the public at large.

In preparing this manual in 1995, the Ministry of Education received valuable advice from a Special Education Advisory Committee, school district representatives, groups of specialist teachers and administrators, and associations throughout British Columbia. The ministry acknowledges the contributions of these many individuals and groups.

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INTRODUCTION

Using this Manual

This manual is divided into six sections (A to F), a quick reference guide (G), and a set of appendices (H), listed in the Table of Contents.

A. Policy: provides policy for the delivery of special education programs and services in British Columbia.

B. Roles and Responsibilities: outlines the roles and responsibilities of the ministry, school boards, district and school-based personnel, parents and students in the development and implementation of special education services.

C. Developing an Individual Education Plan: describes the process of identifying students who have special needs, planning and implementing individual programs for them, and evaluating and reporting on their progress.

D. Special Considerations - Services: describes the generic services that should be available in school districts to support service delivery.

E. Special Needs Categories: defines the various kinds of students who have special needs and the essential elements that should be included in programs for them and the criteria that must be met for supplemental funding.

F. Provincial Resource Programs: describes what these programs are and lists those currently designated across the province.

G. Quick Reference – Internet Resources: provides a quick reference for online information websites.

H. Appendices: includes information about facilities planning; access to equipment, technology and services; resolution of conflicts; classification of psychological tests; distributed learning; full-day K; graduation requirements; in-school nursing support services; use of student records; transition planning; transportation and work experience.

Glossary

To ensure common interpretation, the definitions of terms used in this manual are being placed at the front of the document.

1. **Adaptations** are teaching and assessment strategies especially designed to accommodate a student's needs so he or she can achieve the learning outcomes of the subject or course and to demonstrate mastery of concepts. Essentially, adaptations are "best practice" in teaching. A student working on learning outcomes of any grade or course level may be supported through use of adaptations.

Adaptations do not represent unfair advantages to students. In fact, the opposite could be true. If appropriate adaptations are not used, students could be unfairly penalized for having learning differences, creating serious negative impacts to their achievement and self-concept.

2. **Assessment** is a systematic process of gathering information in order to make appropriate educational decisions for a student. It is a collaborative and progressive process designed to identify the student's strengths and needs, set goals, and results in the identification and implementation of selected educational strategies.

3. **Collaborative consultation** is a process in which people work together to solve a common problem or address a common concern. A successful collaborative process is characterized by the following features: it is voluntary; there is mutual trust and open communication among the people involved; identification/clarification of the problem to be addressed is a shared task; the goal is shared by all participants; each participant's contribution is valued equally; all participants' skills are employed in identifying and selecting problem-solving strategies; and there is shared responsibility for the program or strategy initiated.

4. A **guardian** of a person (in the wording of the *School Act*) "...when used in reference to a student or child, means guardian of the person of the student or child within the meaning of the *Family Relations Act*".

5. **Inclusion** describes the principle that all students are entitled to equitable access to learning, achievement and the pursuit of excellence in all aspects of their education. The practice of inclusion is not necessarily synonymous with integration and goes beyond placement to include meaningful participation and the promotion of interaction with others.

6. An **Individual Education Plan (IEP)** is a documented plan developed for a student with special needs that describes individualized goals, adaptations, modifications, the services to be provided, and includes measures for tracking achievement.

7. **Integration** is one of the major strategies used to achieve inclusion. With integration, students with special needs are included in educational settings with their peers who do not have special needs, and provided with the necessary accommodations determined on an individual basis, to enable them to be successful there. The principle of "placement in the most enabling learning environment"

GLOSSARY

applies when decisions are made about the extent to which an individual student is placed in regular classrooms, or assigned to an alternate placement.

8. **Mainstreaming** is a term which was in use during the early years of the movement toward integration of students with special needs, but which has been replaced by the term "integration" (see definition for integration above).

9. **Modifications** are instructional and assessment-related decisions made to accommodate a student's educational needs that consist of individualized learning goals and outcomes which are different than learning outcomes of a course or subject. Modifications should be considered for those students whose special needs are such that they are unable to access the curriculum (i.e., students with limited awareness of their surroundings, students with fragile mental/physical health, students medically and cognitively/multiply challenged.) Using the strategy of modifications for students not identified as special needs should be a rare practice.

10. **A neighbourhood school** is the school that students would normally attend if they did not have special needs.

11. **Parent** (in the wording of the School Act) "...means, in respect of a student or of a child registered under section 13, a) the guardian of the person of the student or child; b) the person legally entitled to custody of the student or child; or c) the person who usually has the care and control of the student or child". (<http://www.bced.gov.bc.ca/legislation/schoollaw/revisedstatutescontents.pdf>)

12. A **school-based team** is an on-going team of school-based personnel which has a formal role to play as a problem-solving unit in assisting classroom teachers to develop and implement instructional and/or management strategies and to co-ordinate support resources for students with special needs within the school.

13. **Special educational needs** are those characteristics which make it necessary to provide a student undertaking an educational program with resources different from those which are needed by most students. Special educational needs are identified during assessment of a student; they are the basis for determining an appropriate educational program (including necessary resources) for that student.

14. **Transition** is the passage of a student from one environment to another at key points in his or her development from childhood to adulthood.

15. **Transition planning** is the preparation, implementation and evaluation required to enable students to make major transitions during their lives - from home or pre-school to school; from class to class; from school to school; from school district to school district; and from school to post-secondary, community or work situations.

A. POLICY

A. Policy

In 1995, a *Special Education Policy Framework for British Columbia* was established, following extensive consultation with education partners. This Policy Framework guided the development of legislation and guidelines for special education programs and services in British Columbia, and served as the foundation for the resource *Special Education Services: A Manual of Policies, Procedures and Guidelines*.

A print copy of this historical *Framework* is available through Government Publications at: <http://www.publications.gov.bc.ca/search.aspx>

Title: *Special Education Policy Framework For BC, (LRB039)*

Special Education Policy

All students should have equitable access to learning, opportunities for achievement, and the pursuit of excellence in all aspects of their educational programs.

Rationale

Special education programs and services enable students with special needs to have equitable access to learning and opportunities to pursue and achieve the goals of their educational programs.

Legislation/ regulations

Special Needs Students Order M150/89: defines students with special needs, describes the obligation of school boards to consult with parents in the placement of students with special needs and describes policy regarding integration.

Individual Education Plan Order M638/95: sets out the requirements for school boards to design and implement individual education plans for students with special needs.

Student Progress Report Order M191/94: describes reporting requirements for students who have special needs.

Support Services for Schools Order M282/89.

Section 11 School Act.

Definitions

"Student with special needs:" A student who has a disability of an intellectual, physical, sensory, emotional or behavioural nature, has a learning disability or has special gifts or talents, as defined in the Manual of Policies, Procedures, and Guidelines, Section E.

A. POLICY

"Individual education plan (IEP):" An individual education plan designed for a student that includes one or more of the following:

- learning outcomes that are different from, or in addition to, expected learning outcomes set out in the applicable educational program guide,
- a list of support services,
- a list of adapted materials, instruction or assessment methods.

"Educational program guide:" A document specified as an educational program guide in Ministerial Order 333/99, the Educational Program Guide Order M333/99.

"adaptations": teaching and assessment strategies made to accommodate a student's special needs, and may include alternate formats (e.g., braille, books-on-tape), instructional strategies (e.g., use of interpreters, visual cues and aids) and assessment procedures (e.g., oral exams, additional time, assistive technologies).

"modifications": learning outcomes that are substantially different from the regular curriculum, and specifically selected to meet the student's special needs.

POLICY

Inclusion

British Columbia promotes an inclusive education system in which students with special needs are fully participating members of a community of learners. Inclusion describes the principle that all students are entitled to equitable access to learning, achievement and the pursuit of excellence in all aspects of their educational programs. The practice of inclusion is not necessarily synonymous with full integration in regular classrooms, and goes beyond placement to include meaningful participation and the promotion of interaction with others.

Placement

A school board must ensure that a principal offers to consult with a parent of a child who has special needs regarding the student's placement in an educational program.

A school board must provide a student who has special needs with an educational program in a classroom where the student is integrated with other students who do not have special needs, unless the educational needs of the student with special needs or other students indicate that the educational program for the student with special needs should be provided otherwise.

The emphasis on educating students with special needs in neighbourhood school classrooms with their age and grade peers, however, does not preclude the appropriate use of resource rooms, self-contained classes, community-based programs, or specialized settings. Students with special needs may be placed in settings other than a neighbourhood school classroom with age and grade peers.

A. POLICY

This should only be done when the school board has made all reasonable efforts to integrate the student, and it is clear that a combination of education in such classes and supplementary support cannot meet their educational or social needs, or when there is clear evidence that partial or full placement in another setting is the only option after considering their educational needs or the educational needs of others.

Planning

A school board must ensure that an Individual Education Plan (IEP) is designed for a student with special needs as soon as practical after the board identifies the student as having special needs. The only instances in which an IEP is not required are when:

- the student with special needs requires little or no adaptations to materials, instruction or assessment methods; or
- the expected learning outcomes have not been modified; or
- the student requires 25 or fewer hours of remedial instruction by someone other than the classroom teacher, in a school year.

A school board must ensure that the IEP is reviewed at least once each school year, and where necessary, is revised or cancelled.

A school board must offer the parent of the student, and where appropriate, the student the opportunity to be consulted about the preparation of the IEP.

The School Act [section 7(2)] requires a parent of a student to consult with the student's teacher or a school principal about the student's educational program, when requested to do so.

A school board must offer each student who has special needs learning activities in accordance with the IEP designed for that student. When services are so specialized that they cannot be replicated in every school, they should be available at the district level, or else school districts should arrange to obtain them from community or other sources.

Evaluation and reporting

Standards for all students, including students with special needs, are developed with high but appropriate expectations for student achievement. Students with special needs are expected to achieve some, most, or all provincial curriculum outcomes with special support.

Where a student with special needs is expected to achieve or surpass the learning outcomes, performance scales, letter grades and regular reporting procedures will be used to indicate progress. Where it is determined that a student with special needs is not capable of achieving the learning outcomes of provincial or Board/Authority Authorized curriculum, and substantial course or program modification is necessary, specific individual goals and objectives will be established for the student in his or her IEP. Performance scales, letter grades, and structured written comments may

A. POLICY

be used to report the level of the student's success in achieving these modified goals and objectives. It may not be appropriate to provide letter grades to all students with special needs. Considering the potential impact on the student, not providing letter grades should be a decision made by the school based team.

Where a professional support person other than the classroom teacher is responsible for providing some portion of the student's educational program, that person should provide written reports on the student's progress for inclusion with the report of the classroom teacher.

Accountability

The ministry audits enrolment of students with special needs services to ensure fair distribution of available resources among school districts. The Ministry regularly reviews the achievement of students, including those with special needs, by monitoring results such as graduation rates, performance on provincial assessments and transitions. In addition, the School Act requires School Planning Councils in each school to develop annual plans that address achievement of all students. The Act also requires boards of education submit Achievement Contracts that set out plans for improvement to the Minister each year. The Ministry periodically reviews district goals, structures, practices and other matters through the district review process.

Appeals

All school boards must have appeal procedures to help resolve disputes. The ministry expects that the appeal procedures will be based on principles of administrative fairness, which include the right of students and parents/guardians: to be heard by the school board; to be consulted in decisions affecting them; and to an impartial school board decision based on relevant information. In addition, the School Act provides for an appeal to the Ministry Superintendent of Achievement in certain circumstances.

PROCEDURES

An Individual Education Plan (IEP) is a documented plan developed for a student with special needs that describes individualized goals, adaptations, modifications, the services to be provided, and includes measures for tracking achievement. An IEP must have one or more of the following:

- the goals or outcomes set for that student for that school year where they are different from the learning outcomes set out in an applicable educational program guide; or
- a list of the support services required to achieve goals established for the student; or
- a list of the adaptations to educational materials, instructional strategies or assessment methods.

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

A. POLICY

An IEP should also include the following:

- the present levels of educational performance of the student;
- the setting where the educational program is to be provided;
- the names of all personnel who will be providing the educational program and the support services for the student during the school year;
- the period of time and process for review of the IEP;
- evidence of evaluation or review, which could include revisions made to the plan and the tracking of achievement in relation to goals; and
- plans for the next transition point in the student's education (including transitions beyond school completion).

B. ROLES AND RESPONSIBILITIES

B. Roles and Responsibilities

B.1 Ministry of Education: Special Education

The purpose of Special Education is to enable the equitable participation of students with special needs in the educational system in British Columbia.

To achieve this purpose, the Ministry has the following responsibilities:

- setting educational standards based on the outcomes students need to achieve;
- monitoring student performance and reporting the results to the public;
- working with partner groups to improve student and school performance;
- allocating funds for the education system; and
- overseeing the governance of the system as a whole.

B.2 School Districts

School boards are responsible for ensuring that special education services and programs are delivered to any of their students who require them. Such programs and services are an integral part of the total school system, and should be organized to ensure that services generally available to all students and their parents are also available to children with special needs, and that access will be as seamless as possible.

Program Development and Delivery

Development and delivery of special education programs and services at the local level should involve meaningful consultation with the parents or guardians of students with special needs, since they know their children and can contribute in substantial ways to the design of appropriate programs and services for them.

Services in districts should be organized along a continuum which reflects the diversity of students' special needs and the prevalence of various special needs in the school population.

It is important to note that although the text of these guidelines is organized with a focus on each area of special need this is not meant to imply that services and programs should be organized or delivered along categorical lines. The important factor is to match the identified special need of the student with service provisions to address them.

Staff Development

An ongoing staff development plan is essential for all staff so they can more successfully meet the special needs of students. Districts should ensure that all personnel who work with students with special needs have access to relevant in-service training opportunities in order to foster evidence-informed practice. For

B. ROLES AND RESPONSIBILITIES

specialized personnel, there is a need to focus on opportunities within their area of specialty and the specific roles they play in the service delivery system.

Information

School boards are responsible for informing their employees and communities about special education services and programs available and about procedures for gaining access to them.

Local Policies and Procedures

Local policies and procedures for special education should be congruent with practices in regular education programs, with special accommodation as necessary for addressing special needs.

Local policies and procedures should include:

- a description of services and special program options available in the district;
- procedures used to identify, assess and plan for students with special needs;
- procedures used to effect special placements should they be needed;
- reporting and record-keeping procedures used to track Individual Education Plans;
- procedures used to include parents and other service providers in identification, assessment and planning;
- procedures to be followed in evaluating and reporting on the progress of students with special needs;
- procedures for evaluating special education services and programs;
- internal appeal procedures available to parents or guardians (see Appendix H.4 Appeals: Resolution of Conflicts);
- specialist staff assignments and job descriptions that include any necessary specialist qualifications (see Sections D and E: Personnel Descriptions); and
- procedures to be followed in evaluating personnel in specialist assignments.

Organizational Considerations

Clearly defined responsibility

Responsibility for delivering educational programs and related services for students with special needs should be clearly identified in the organization of the school district. Roles within the organization should be clearly differentiated to ensure accountability and to enhance co-ordination in the delivery of the educational program.

Where professional personnel are assigned to positions other than classroom instruction, appropriate job descriptions should define their area of responsibility. Where specialized services are contracted, legislation requires that those services be

B. ROLES AND RESPONSIBILITIES

under the general supervision of an employee of the board who is a member of the College of Teachers.

School boards should ensure that their staff recruitment, selection, and assignment procedures encourage the availability of personnel with the range of training and skills necessary to provide educational programs for a broad range of students with special needs. Responsibility for the evaluation of staff assigned to work in specialized assignments should be clearly spelled out.

Levels of support

To the maximum extent possible, special education services should be organized for delivery at the school level. However, a support system should be available at the district level to ensure that schools have access to expertise and services which are so specialized as to preclude their replication in each school. School districts should ensure that when the resources available at the school level have been exhausted, a mechanism is in place to provide additional assistance to the school using district-level or community-based resources.

When school district size precludes the provision of the broad range of needed specialized services, school boards should consider collaborative planning with nearby districts.

Administrative Considerations - District

The roles of the various district and school-based administrators are described in sections 20, 22 and 23 of the School Act and in the attendant School Regulation sections (sections 5, 6 and 7).

The responsibility for administering special education programs and services should be clearly defined in the senior administrative structure of the school district, so that accountability for service effectiveness can be maintained. Typically, functions assigned to administrators responsible for special education at the district level include:

- establishing and maintaining effective ways of identifying and assessing students with special needs that are consistent among all schools in the district;
- determining, planning, and organizing the kinds of services and programs which are required in the district for meeting these needs;
- obtaining and co-ordinating the fiscal and human resources needed to deliver a full range of programs and services reflecting the special needs of identified students and facilitating equitable allocation of these among the schools in the district;
- providing technical advice and assistance to help school-based administrative staff and teachers in meeting their obligations to students with a full range of special needs;

B. ROLES AND RESPONSIBILITIES

- participating in local inter-ministerial structures designed to provide co-ordinated services for children and youth;
- providing advice and assistance in the development of district policies and procedures related to students with special needs;
- maintaining information systems necessary for planning and reporting data on students with special needs who are registered in the school district;
- planning and co-ordinating staff development programs for personnel working with students who have special needs;
- involving community representatives of groups concerned with students with special needs in program planning and evaluation;
- monitoring program quality for students with special needs across the district;
- establishing liaison with preschool and post-secondary services in the district and community which provide programs for students with special needs; and
- participating in community-level planning with other agencies and ministries in setting service priorities.

B.3 Schools

Administrative Considerations - School-Based

The powers and duties of the principal of a school are set out in regulations under the School Act. These include the implementation of educational programs and the placing and programming of students in the school. (E.g.: sections 13(2), 20, 26, 27(3)(b), 74(2), 166.4(1))

To accommodate students with special needs, schools should be organized in ways which allow flexibility in their response. Principals should ensure that teachers receive the information they need to work with students with special needs who are assigned to them, and that the school is organized to provide some first-line resource support on-site.

Principals should ensure that a school-based team is operational in the school, and facilitate the collaborative efforts of the team members in meeting the special needs of students.

Teachers

Sections 17(1) and (2) of the *School Act* and the attendant School Regulation section 4 spell out the responsibilities of teachers within the school system.

The teacher responsible for a student with special needs is responsible for designing, supervising and assessing the educational program for that student. Where the student requires specialized instruction, this is best done in consultation with resource personnel available, with the parents and with the student.

Where the student's program involves specialized instruction by someone other than the classroom teacher, collaborative processes are required to make best use of the expertise of the specialists available to assist and to ensure a co-ordinated approach.

B. ROLES AND RESPONSIBILITIES

In secondary schools, where several teachers may be involved in the student's program, co-ordinated planning is especially important.

Teachers' Assistants

Section 18 of the *School Act* specifies that:

- (1) A board may employ persons other than teachers to assist teachers in carrying out their responsibilities and duties under this Act and the regulations.
- (2) Persons employed under subsection (1) shall work under the direction of a teacher and the general supervision of a teacher or school principal.

Teachers are expected to design programs for students with special needs. Teachers' assistants play a key role in many programs for students with special needs, performing functions which range from personal care to assisting the teacher with instructional programs. Under the direction of a teacher they may play a key role in implementing the program.

While teachers' assistants may assist in the collection of data for the purpose of evaluating student progress, the teachers are responsible for evaluating and reporting on the progress of the student to parents.

In cases where teachers' assistants perform health-related procedures they should be given child-specific training by a qualified health professional (See Inter-Ministerial Protocol - *Nursing Support Services for Children and Youth with Special Health Care Needs*).

B.4 Parents

Parents play a vital role in the education of their children with special needs by working in partnership with educators and other service personnel (Please refer to the glossary for definition of parent).

Parents are entitled under the *School Act* (section 7 (1) and (2)) to be informed of a student's attendance, behaviour and progress in school, and to receive, on request, annual reports respecting general effectiveness of educational programs in the school district. They are entitled to examine all records kept by the board pertaining to their child, in accordance with the provisions of section 9 of the *School Act*.

Ministerial Order 150/89, the Special Needs Students Order, requires that parents be offered a consultation regarding the placement of their student with special needs.

Parents of students with special needs know a great deal about their children that can be helpful to school personnel in planning educational programs for them. Districts are therefore advised to involve parents in the planning, development and implementation of educational programs for their children. This consultation should be sought in a timely and supportive way, and the input of parents respected and acknowledged.

Parents also have a responsibility to support the education of their children. They must enrol their school-age child in an educational program in a school district or

B. ROLES AND RESPONSIBILITIES

independent school or distributed learning school, or register the child prior to September 30 in home education (*School Act*, sections 3 (1) and 13 (1)).

At the request of the teacher or principal, vice principal or director of instruction, a parent must consult with respect to the student's educational program (*School Act*, section 7(2)). With respect to the development of a student's Individual Education Plan, parents must be offered the opportunity to be consulted (IEP Order).

School staff members need to be aware of any special factors which may place a child with special needs or other children at risk. Districts are advised to structure their registration procedures to ensure that parents are given an opportunity to inform staff of any such special factors on a need-to-know basis, without violating the privacy of the individual or the family.

For children in care, boards should ensure that the guardian is receiving relevant information from the school.

B.5 Students

All students should be afforded opportunities to learn in environments that are safe and welcoming. Students with special needs should have their needs identified in a timely way, have these needs assessed in a comprehensive manner, and receive an appropriate response to those strengths and needs in the delivery of educational programs for them. Many students with special needs can contribute to the process of assessment and planning for their own educational programs, and provide an evaluation of the services available to them.

Where appropriate, students should be consulted on the development of the Individual Education Plan being created for them (IEP Order).

Students have the responsibility to comply with the school rules authorized by the principal, and with the code of conduct or any other rules and policies established by the school board (*School Act*, section 6).

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

C. Developing an Individual Education Plan

C.1 Overview of the Process

For purposes of discussion, the planning process is divided into five phases:

- identification/assessment;
- planning;
- program support/implementation;
- evaluation; and
- reporting.

Together, they constitute a process which is continuous and flexible, rather than a series of five separate and discontinuous phases.

Wherever possible, the process should be incorporated into the regular routines of planning, evaluation and reporting that occur for all students.

There should be a progressive flow from one phase to another, so that, according to need, supports can be obtained in a timely way from within the school, the district, the community and/or from regional or provincial services.

The process works best when:

- there is collaboration and ongoing consultation among teachers, administrative and support personnel, parents, students and representatives of district/community/regional agencies.
- parents/guardians and students have the opportunity to be active participants in the process, to initiate discussions regarding the learning needs or request school-based access to support. They should feel welcome and encouraged to contribute throughout the process, and are important partners in the development of the Individual Education Plan (IEP). As a rule, students should be included in all phases of the process unless they are unable or unwilling to participate.
- staff members have the support of inservice and other resources available to them. For example, a teacher should have access to specialist support, help with informal assessment procedures or suggestions for pre-referral intervention strategies.
- individual schools establish procedures to support collaborative consultation and planning. Staff should be identified within each school to be available for consultation and to be part of a school-based team. This team should be established with clear procedures to provide support, consultation, planning, case management, and, when appropriate, to facilitate inter-ministerial or community approaches.

Procedures should be in place to:

- ensure information is promptly shared;
- plan for and facilitate transitions;

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

- ensure consistency in reporting and documenting plans;
- promote communication and collaborative decision-making between the school and home;
- communicate planning decisions to parents, students and appropriate staff; and
- resolve differences effectively.

School districts support the process. This support is reflected in:

- recognition of the time and space required for planning/consultation;
- procedures which ensure prompt transfer and sharing of information while protecting privacy;
- establishment of qualification standards for personnel; and
- continuing inservice opportunities to support staff development to promote effective consultative models, school-based teams and inter-ministerial collaboration.

C.2 Identification & Assessment

Early identification is an essential element of successful program planning for students with special needs. Students may be identified before they enter the school system. In such cases, existing assessment and programming information should be requested without undue delay to permit planning.

In cases where students with special needs have been identified prior to enrolment, or when students have obvious and severe special needs, which have not been previously identified, the school-based team should respond promptly to a teacher's request for a determination of the need for assessment, planning and intervention.

Pre-referral Activities

For most students, the identification/assessment phase begins in the classroom, as the teacher observes exceptionalities in learning and behaviour. The teacher responds by entering the first phase of the process, initiating in-depth, systematic classroom observation and evaluation. Further, while beginning a comprehensive assessment of learning needs, the teacher should also introduce variations in instructional approaches, evaluating the success of using such teaching techniques and instructional materials with the student.

The teacher should consult with the parent and, when appropriate, the student regarding concerns and progress. The teacher should discuss with the parent the appropriateness of a referral to a physician for a comprehensive medical examination to exclude the possibility of a medical basis for the concerns.

If these efforts prove insufficient to meet the student's educational needs the teacher should embark on a process of consultation and collaboration with the school-based resource personnel. This may take the form of classroom observation, additional assessment, the consideration of additional classroom intervention strategies, and implementation of those strategies.

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

For many students, such collaborative planning and the resulting interventions will successfully address the student's needs. However, if this is not the case, the teacher can approach the school-based team for further assistance.

Referral to the School-Based Team

The school-based team can provide

- extended consultation on possible classroom strategies;
- planning for and co-ordination of services for the student;
- access to additional school, district, community or regional services; and
- planning for and co-ordination of services in the school.

What is a school-based team?

A school-based team is an on-going team of school-based personnel which has a formal role to play as a problem-solving unit in assisting classroom teachers to develop and implement instructional and/or management strategies and to co-ordinate support resources for students with special needs within the school.

Who is on the team?

The school-based team includes a small group of regular members, usually including a school principal, a learning assistance or resource teacher, a classroom teacher and a counsellor. On a case-by-case basis as needed to plan for individual students, the team should also include the student's referring teacher, and involve the parent, the student, and, as appropriate, district resource staff, and representatives from community services, regional authorities, or from other ministries.

What does the team do?

Upon the request of the referring teacher or parent, it provides support through extended consultation on possible classroom strategies, and may become a central focus for case management, referrals and resource decisions. It should appoint a case manager, identify the need for additional services and/or initiate referrals to access other school, district, community or regional services. The school-based team can also initiate or facilitate inter-ministerial planning and service delivery.

Referral for Extended Assessment

When extended assessments (e.g., psycho-educational, behavioural, speech and language, orientation and mobility) are requested, the goal is to better understand the student's strengths and needs in order to plan more effectively for that student.

School districts are advised to ensure that:

- where required, informed, written consent for the assessment is received from the parent and, as appropriate, the student;

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

- specialists are sensitive to cultural, linguistic and experiential factors when selecting assessment procedures and interpreting assessment results (The use of interpreters may be necessary to facilitate the assessment and planning process);
- information gained is readily usable for purposes of planning, and easily integrated into the student's Individual Education Plan;
- specialists communicate and interpret assessment findings to the parents, the student and staff; and
- the written report of the assessment is made available to the parents, the staff and, when appropriate, the student, in accordance with the provisions of the "Freedom of Information and Protection of Privacy Act".

C.3 Planning

At its core the planning process is the same for all students: it is a collaborative process in which the student, the parents and educators identify educational goals that are appropriate to the student, and the ways of attaining them. For students with special needs it is important that the planning process begin at school entry or as soon as their special needs become known. This process results in an Individual Education Plan (IEP) which identifies appropriate goals and objectives, and describes the nature of the commitments which the educational system makes to assist the student in attaining these goals and objectives.

Over the length of their school experience, students with special needs may experience a number of significant transitional steps: from home to kindergarten, from elementary school to secondary school, from program to program, from one school to another, from school to adulthood. Careful and sensitive planning should be undertaken within an IEP that addresses the needs of the student and the family members involved as they pass through each transition. Early introduction to the new environment or staff, assignment of a school "buddy", or early provision of information on timetables and school organization are examples of transition support.

It is important that students with special needs take an active role in the design of their IEPs to the maximum extent that their developmental level and ability permit. Factors affecting student participation in the development of an IEP include: age, level of maturity, and capacity for sustained, considered deliberation based on awareness of possibilities and consequences.

For students with special needs moving into adulthood, transition planning is a key element of their Individual Education Plan. This transition planning should include a statement of transition goals and, where appropriate, should identify inter-agency responsibilities or linkages that should occur before the student leaves the school setting. The school is in a key position to provide a variety of co-ordinated activities that lead to employment and/or further education for students with special needs. The commitment should be to early, collaborative and well-planned transitions from school to further training, supported work, or other environments. The success of an individual student in accessing post-secondary options and necessary supports for

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

the future depends in part on consistent information flow and advanced planning, as well as establishing firm linkages with other available agencies and community partners.

The transition plan in the IEP should incorporate the elements outlined in the Graduation Portfolio Transition Plan which include career, education and personal goals. (See Appendix H.17 Transition Planning or refer to the Ministry's website: <http://www.bced.gov.bc.ca/graduation/portfolio/>)

The Individual Education Plan (IEP)

What is an IEP?

An IEP is a documented plan developed for a student with special needs that describes individualized goals, adaptations, modifications, the services to be provided, and includes measures for tracking achievement.

It serves as a tool for collaborative planning among the school, the parents, the student (where appropriate) and, as necessary, school district personnel, other ministries and/or community agencies.

Typically an IEP includes individualized goals with measurable objectives, adaptations and/or modifications where appropriate, the strategies to meet these goals, and measures for tracking student achievement in relation to the goals. It also documents the special education services being provided as these relate to the student's identified needs.

Some students require small adaptations and minimum levels of support; other students with more complex needs may require detailed planning for educational modifications, adaptive technologies, or health care plans. The IEP will reflect the complexity of the student's need and, accordingly, can be brief or more detailed and lengthy.

What is an IEP for?

The development of an IEP serves a number of purposes:

- It formalizes planning decisions and processes, linking assessment with programming.
- It provides teachers, parents, and students with a record of the educational program for an individual student with special needs, and serves as the basis for reporting the student's progress.
- It serves as a tool for tracking individual student learning in terms of agreed-upon goals and objectives.
- It documents the relationships between any support services being provided and the student's educational program.
- It provides parents and students with a mechanism for input into the individualized planning process.

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

IEP documentation provides evidence that:

- the parent and/or student were offered the opportunity to be consulted about the preparation of the IEP;
- the student is receiving learning activities in accordance with IEP; and
- the IEP is reviewed at least once each school year.

What must an IEP contain?

The IEP document does not describe every aspect of the student's program. It makes reference to those aspects of the education program that are adapted or have been modified, and identifies the support services to be provided. IEP learning outcomes are often described as goals and objectives.

An IEP must have one or more of the following:

- the goals or outcomes set for that student for that school year where they are different from the learning outcomes set out in an applicable educational program guide; or
- a list of the support services required to achieve goals established for the student; or
- a list of the adaptations to educational materials, instructional strategies or assessment methods.

An IEP should also include the following:

- the present levels of educational performance of the student;
- the setting where the educational program is to be provided;
- the names of all personnel who will be providing the educational program and the support services for the student during the school year;
- the period of time and process for review of the IEP;
- evidence of evaluation or review, which could include revisions made to the plan and the tracking of achievement in relation to goals; and
- plans for the next transition point in the student's education (including transitions beyond school completion) and linkages to Graduation Portfolio during Grades 10-12.

Where the goals established for the student are different from the expected learning outcomes for the age or grade, these should

- be set at a high but attainable level to encourage parents, students and staff to hold high expectations.
- be accompanied by measurable objectives developed for each goal to enable IEP review and evaluation.

The IEP may be brief, or it may be more detailed and complex, depending on the complexity of the student's needs. For example, the IEP for a student who needs examinations with adaptations and support with note-taking can be relatively simple. In contrast, a student with multiple disabilities who requires the involvement of a

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

variety of professionals, adaptive technologies and major curricular modifications will require a much more extensive IEP.

Who develops the IEP?

The principal of the school is responsible for the implementation of educational programs (School Act Regulation 5(7)(a)). Though planning occurs collaboratively, the principal of the school should ensure that for each such student a case manager is appointed to co-ordinate development, documentation and implementation of the student's IEP.

As necessary, other school district personnel or staff from regional or community agencies may be involved in the development and have a role to play in its implementation.

Parents must be given the opportunity to be consulted in the planning process, and should receive a copy of the IEP. To the extent possible, the student should also participate in the process.

The IEP should document instances where services are offered but the parent or the student refuses them.

Who must have an IEP?

All students with special needs must have an IEP. An exception can be made if:

- the student with special needs requires no adaptation or only minor adaptations to educational materials, or instructional or assessment methods;
- the expected learning outcomes established by the applicable educational program guide have not been modified for the student with special needs; and
- the student with special needs requires in a school year, 25 hours or less remedial instruction, by a person other than the classroom teacher in order for the student to meet the expected learning outcomes.

Planning and Co-ordinating Community Services

Some students will require services and supports provided by agencies in the community. For example, some students may need medical or therapeutic services offered through child development centres or clinics; others may require the support of a mental health worker or a drug rehabilitation counsellor, or the services of a social worker or a probation officer.

It is essential that school and community services be co-ordinated to avoid duplication, and to ensure consensus regarding goals, consistency in interventions and an integrated approach to service delivery. The school-based team should be responsible for co-operating with these community services, and plays a key role in:

- keeping school staff informed of services available in the community;
- acting as a referral source for these community supports;

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

- through the case manager, planning the delivery of services with community partners;
- ensuring school-based services are co-ordinated with community services;
- documenting in the IEP the community services provided and those responsible for delivering them;
- assisting in the review and evaluation of service delivery;
- facilitating and planning the transition of students from the school to the community;
- documenting the need for services; and
- facilitating the continuity of co-ordinated supports when students transfer between schools/districts.

Planning and service delivery works best when parents and students are active participants in the process. With older students who live independently, however, parent participation may not be appropriate.

C.4 Program Support & Implementation

Program support/implementation is putting into practice the plans, strategies and support agreed upon in the IEP. Additional information on program implementation can be found in sections of this manual - *D: Special Considerations-Services* and *E: Special Needs Categories*.

Prior to implementing the program/supports:

- plans need to be understood and supported by those involved, including the student. This is particularly critical in secondary schools.
- every effort should be made to ensure resources are in place, including necessary inservice (e.g., evidence-informed teaching strategies).

Program support/implementation works best when:

- it is sensitive to cultural, linguistic and experiential factors;
- it is based on the IEP;
- it incorporates observation, assessment and evaluation to refine and/or validate goals, strategies, etc.;
- it is carried out through collaborative consultation within the school, and/or with other ministries and/or community agencies; and
- the student with special needs is seen as first a student and not defined exclusively by those special needs.

Program support/implementation usually includes one or more of the following:

- adaptations to make the learning environment more accessible;
- alternate approaches to instruction and/or evaluation;
- use of adaptive/assistive technologies;
- provision of intensive, direct instructional intervention (e.g., remedial, compensatory);

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

- modifications to the curriculum content;
- provision of services that are beyond those offered to the general student population and are proportionate to level of need.; and/or
- provision of specialized training (e.g., braille, orientation and mobility, speech reading and sign language instruction).

C.5 Evaluation of Student Learning

Wherever possible, students will be evaluated using standards established for other students and on all components of their program, including those that have been modified and those that have not. It is important that evaluation and reporting procedures accommodate the range of adaptations and modifications, so as to recognize that students with special needs may:

- take part in the regular program with some adaptations (i.e., the student is following the same curriculum but aspects of the program require adaptation);
- take part in the regular program but have some modified components (i.e., in some areas, the expected learning outcomes are substantially different from the regular curriculum; for example, math may be totally individualized, with a life-skills orientation); and/or
- participate in a program that is completely modified (e.g., a student with profound intellectual disabilities whose program may focus on independence and self-care skills).

There are many students whose learning outcomes are identical to those of their classmates, but for whom teachers use adapted evaluation procedures (e.g., an oral exam rather than a written one). Use of adapted evaluation procedures should be noted in the student's IEP. For these students, evaluation is based on whether the learning outcomes for the course/program have been met. The methods of evaluation and reporting progress must be consistent with ministry grading and reporting policies for the K-12 program.

Some students may require extensive modifications to their program. Some or all of their learning outcomes will be substantially different from the regular curriculum. Evaluation will be based on the degree to which such outcomes are achieved. In this case, evaluation must be referenced to individually established standards.

Parents can assist the school in achieving and evaluating progress toward learning outcomes - particularly with respect to achievement of social goals, acquisition of life skills, and career exploration and development.

C.6 Reporting Student Progress

Student progress reports for students with special needs should be provided on the same schedule as used for all students in the school. When necessary, additional informal reporting may include other procedures such as daily logs.

Where a student with special needs is expected to achieve or surpass the learning outcomes, performance scales, letter grades and regular reporting procedures will be

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

used to indicate progress. Where it is determined that a student with special needs is not capable of achieving the learning outcomes of provincial or Board/Authority Authorized curriculum, and substantial course or program modification is necessary, specific individual goals and objectives will be established for the student in his or her IEP. Performance scales, letter grades, and structured written comments may be used to report the level of the student's success in achieving these modified goals and objectives. It may not be appropriate to provide letter grades to all students with special needs. Considering the potential impact on the student, whether or not to use letter grades should be made in consultation with the school based team.

Where a professional support person other than the classroom teacher is responsible for providing some portion of the student's educational program (e.g., speech pathologist, orientation and mobility instructors), those persons should provide written reports on the student's progress for inclusion with the report of the classroom teacher.

Grades on reports to parents should identify whether courses have been modified, although adaptations (e.g., oral exam) need not be identified. With written consent, such information should be communicated to post-secondary institutions or community agencies providing adult services in a manner consistent with legislation affecting freedom of information and protection of privacy.

Reference: Ministerial Order 191/94, the Student Progress Report Order

C.7 Students with Different Cultural or Linguistic Backgrounds

Learning another language and new cultural norms, adjusting to a different social and physical setting, or overcoming homesickness or trauma can affect a student's school adjustment and learning. These factors, when combined with a disability or impairment, can significantly undermine school achievement. Assessing and planning for students with special needs becomes more complex when language, cultural or migration factors are involved.

Except for cases of obvious disability (e.g., profound intellectual disability, physical or sensory disability), teachers should fully consider cultural, linguistic and/or experiential factors that can affect learning before assuming the presence of a disability or impairment. Consideration should be given to prior educational experience, and the student should be allowed sufficient time for second-language learning and social adjustment. Students may need additional support for language development, and academic upgrading (e.g., math), or assistance with social integration, without necessarily presenting with a disability.

When assessing and planning for students with special needs with different cultural or linguistic backgrounds, teachers should:

- communicate with the parents regarding the student's progress and discuss the factors which may be affecting learning. It is important to obtain a developmental and educational history, and parental perceptions and expectations regarding schooling.

C. DEVELOPING AN INDIVIDUAL EDUCATION PLAN

- when language is a barrier, use an interpreter for communicating with the parent or the student to assist with meetings, assessments and planning sessions. The interpreter should be an adult who is familiar with the language and the culture of the parents and student.
- Request testing of the student's vision and hearing, and, if appropriate, a medical examination. Examiners should be alerted to cultural, linguistic or experiential factors.
- be aware of and sensitive to cultural factors that may influence the relationship between the teacher and parents, the developmental and educational expectations as well as parental beliefs about special needs.

Use of Standardized Assessments

When formal assessments are carried out, it is important that care be taken in the selection and administration of tests to minimize the impact of the test's cultural and linguistic biases. Interpretation of assessment results should fully consider the linguistic, cultural and experiential factors, as well as the tests' referent populations.

An interpreter can be helpful in obtaining an estimate of the student's language competencies in her/his mother tongue, and with some aspects of the assessment (e.g., establishing rapport, explaining purpose and procedures). The translations of instructions for some assessment tasks, particularly non-verbal tasks, may be appropriate. However, it is usually not appropriate to translate verbal test items with the intent of using the test's standardization norms.

Use of educational and psychological tests with students from cultural and linguistic backgrounds different from the group on which the test was normed should reference the most current edition of Standards for Educational and Psychological Testing - "Standards for Particular Applications" - a joint publication of the American Educational Research Association, the American Psychological Association, and the National Council on Measurement in Education (<http://www.apa.org/science/standards.html>).

D. SPECIAL CONSIDERATIONS: SERVICES

D. Special Considerations: Services

D.1 Learning Assistance Services

Purpose

Learning assistance services are school-based, non-categorical resource services designed to support classroom teachers and their students who have mild to moderate difficulties in learning and behaviour.

Description of Services

Learning assistance provides a co-ordinated and integrated set of support services that include school-based consultation, collaborative planning and co-ordination with the school-based team, and instruction. It also includes assessment and evaluation to Level B (see Appendix H.5 Classification of Educational and Psychological Tests (Levels A-C))

Learning Assistance Teachers typically help to organize, maintain, and integrate services in the school and, as part of a school-based team, provide the major link with support services available at the district level. Students who have severe disabilities usually require access to more specialized programs and services described in Section E Special Needs Categories.

Some schools combine learning assistance with other special education services to create a 'Resource Teacher' model. Where this model is used, it means that one resource teacher works with a number of classroom teachers to provide support for all students in their classroom: those who are in the high and low incidence groups; those who have mild learning difficulties; those who may need enrichment; and in some cases, those who are learning English as a second language. There are no territorial lines drawn in service delivery. The ministry considers this appropriate provided the supports available to the students served are consistent with guidelines and appropriate to the needs of the students.

Collaborative Planning and Co-ordination

The learning assistance teacher plays an active role in the identification, assessment, planning, implementation, reporting and evaluation process described in Section C. Developing an Individual Education Plan. He/she is a member of the school-based team, provides collaborative consultation, assists with pre-referral interventions and works closely with teachers and the school-based team to plan for, organize and access support services for students with special needs.

D. SPECIAL CONSIDERATIONS: SERVICES

Instruction

Instructional services include:

- teaching students to develop learning strategies for use in classroom settings or for independent learning;
- skill development or remediation; and
- development of compensatory skills to minimize the effect of a disabling condition on learning.

Students with special needs receiving ongoing instruction in a learning assistance program should have an Individual Education Plan.

The setting in which the direct instruction provided by learning assistance teachers takes place (the classroom, the learning assistance centre, or some combination of both) should be determined in collaboration with the classroom teacher based on student needs and the instructional goals to be achieved.

Consultation

Consultative services include:

- collaboration with classroom teachers to design or implement instructional strategies or to adapt instructional content or materials;
- advising teachers concerning adjustments to curriculum, instruction, or environmental factors in the classroom which may facilitate learning for a student or group of students;
- consulting with parents and students regarding learning strategies and organizational skills; and
- consulting with district and community resource personnel.

Assessment

The purpose of assessment and evaluation is to plan and implement an educational program to help the student learn. The assessment support may include:

- criterion-referenced or norm-referenced assessment as appropriate to answer questions about how best to provide instruction or support (see references about testing levels in Appendix H.5 Classification of Educational and Psychological Tests (Levels A-C));
- systematic observation and collection of behavioural data to establish baseline/progress data, or describe functional behaviours;
- synthesis of information from parents, student records, other service providers, and health-related information to aid the assessment process; and
- in-depth interviews with students to determine their knowledge of the learning process and/or thinking strategies.

D. SPECIAL CONSIDERATIONS: SERVICES

Access to Learning Assistance Services

Each school should establish procedures for teachers, students and parents to access learning assistance services consistent with the overall purpose stated above. Schools should also decide the focus for learning assistance services, considering the nature of the needs and range of other school-based supports.

Personnel

Districts employing education staff who work with students with special needs and are responsible for planning and delivery of programs and services must ensure personnel possess acceptable qualifications and that students receive services from appropriately qualified staff.

Guidelines for Learning Assistance Teachers

Knowledge and skills:

- strong interpersonal, communication and collaborative skills;
- expertise in a wide range of teaching and management strategies;
- knowledge of methods for evaluating and selecting instructional materials suitable for students with a variety of special needs;
- ability to carry out a variety of assessments, including classroom observation, curriculum-based assessment and diagnostic teaching methods, administration and interpretation of norm-referenced assessment instruments to Level B (see Assessment above);
- ability to contribute to the development, implementation, and evaluation of an IEP in consultation with classroom teacher(s), parents, students and district and community resource personnel; and
- standards as set out by the BC College of Teachers for professional educators in schools.

Learning assistance teachers have:

- Membership in the BC College of Teachers
- A Bachelor of Education degree or equivalent
- Successful classroom teaching experience
- University-level courses in the following areas:
- Students with special needs;
- Assessment/testing theory and practice;
- Strategies for adapting and modifying curriculum to meet the diverse needs of students.

In addition, university courses in the following areas are recommended:

- teaching students with specific needs (e.g., learning disabilities, giftedness);
- computer technology for the classroom; and
- meeting the diverse behavioural and emotional needs of students.

D. SPECIAL CONSIDERATIONS: SERVICES

Teachers' assistants often work in learning assistance programs. Teachers' assistants should have sufficient skills and training for the duties they are assigned, including:

- characteristics of students with special needs;
- strategies for working with students with learning and behaviour difficulties; and
- familiarity with assistive communication technologies (e.g., word prediction, speech-to-text).

In-service training should include opportunities to develop further expertise in these and related areas.

D.2 Counselling in Schools

The aim of a school counselling program is to support the intellectual development, human and social development, and career development of each student so that he or she can become a responsible, productive citizen.

In schools, counselling services are provided primarily by school counsellors and by other mental health professionals (e.g., youth and family counsellors, behavioural therapists). School counselling services should be co-ordinated with services provided in the community by other ministries (such as mental health services) and community agencies.

School Counselling Services

Purpose

School counselling services are school or district based, non-categorical resource services designed to support students, their families and educators. These services are intended to facilitate the educational, personal, social, emotional and career development of students in schools and in the community.

The focus of school counselling is upon enhancing the students' development, assisting with the development of an enabling school culture, and empowering students toward positive change.

Description of services

School counsellors provide a continuum of preventative, developmental, remedial, and intervention services and programs and facilitate referral to community resources. The school counsellor's role includes counselling, school-based consultation, co-ordination and education. The school counsellor does not discipline, but rather helps in the development of effective behavioural change. The relative emphasis given to the services described below varies between elementary and secondary schools and reflects the needs of each school, the school district and community.

D. SPECIAL CONSIDERATIONS: SERVICES

Counselling

School counselling functions include individual, group and class work to provide both an intervention and a prevention service. The counsellor:

- promotes personal and social development appropriate to developmental stages;
- counsels students, their families and the community to foster growth in the students' self esteem, individual responsibility, and in skills such as decision-making and social skills;
- ameliorates factors which may precipitate problems for students;
- enhances students' educational achievement through goal setting, assisting with the development of Portfolios, IEPs and activities such as promotion of effective work and study habits;
- provides appropriate interventions to assist students with school-related problems and issues; and
- facilitate the goals of career education by assisting students and their families to explore and clarify the student's career options, through developmental activities that stress decision-making, personal planning and career awareness.

School and district-based consultation and planning

School counsellors consult and plan collaboratively with students, other educators, the school based team, parents, community agency personnel and other professionals in planning goals and effective strategies to promote the development of students. Consultation may focus on students' individual needs or on school, district or community programs. School counsellors are active participants in the planning process, assisting with the development of Individual Education Plans.

Coordination of services

As a member of the school-based team, school counsellors assist in the access to and coordination of school, district and other community services for students. Coordination may include information gathering, case management, referral, and liaison among home, school and community. School counsellors frequently assist students with transitions between schools throughout the K-12 system and with post-secondary plans.

Educational role

School counsellors may provide direct instruction to students in areas such as peer helping, conflict resolution, social skills and life skills. As well, school counsellors provide support to other educators in implementing health and career education and promoting healthy school environments. Their educational role may include staff and curriculum development.

D. SPECIAL CONSIDERATIONS: SERVICES

Access to school counselling services

School districts and schools should establish referral procedures for educators, students and their families and community personnel to access the services of school counsellors.

The school-based team is usually involved in accessing school counselling services, particularly at the elementary school level.

Personnel

School counsellors should meet the following qualifications:

- a professional teaching certificate;
- a Master's degree recognized by the College of Teachers in counselling psychology or a related discipline with a focus in counselling.

Counselling Services Provided by Community Agencies

A number of agencies offer counselling and health related services. In some cases, these services are offered outside the school; in other cases, personnel provide mental health/counselling services in schools. In either case, school districts should establish agreements with the respective agencies or authorities regarding service delivery (see Appendix H.11 Integrated Services & Case Management).

When services are provided in the community, school districts and the service agency should establish agreements to clarify:

- referral procedures;
- procedures for co-ordinated case management;
- protocols for sharing information that is consistent with the Freedom of Information and Protection of Privacy Act; and
- procedures for prioritizing areas of services and dealing with emergencies.

When services are to be provided in schools, school districts and the respective agency should establish a local agreement prior to starting the service. The agreement should specify:

- the role description for the service;
- the target for the service;
- the process for referring students;
- the administrative officer responsible for supervising or managing the service in the school;
- procedures for sharing information, and parameters for access to confidential information;
- the desired qualifications of personnel and ethical standards of practice;
- access to facilities and resources needed for service;
- the process for evaluating service; and

D. SPECIAL CONSIDERATIONS: SERVICES

- the duration of the agreement.

D.3 School Psychology Services

Purpose

School psychology services are district-based, non-categorical educational and mental health services designed to support students, school personnel and parents in enhancing academic, adaptive and social skills for students.

Description of Services

School psychology services play a supportive role in the identification, assessment, planning, implementation, reporting and evaluation process described in Section C. Developing an Individual Education Plan.

The school psychologist

- provides collaborative consultation,
- may assist with pre-referral interventions,
- provides psycho-educational assessments for students referred by the school-based team,
- provides ongoing collaborative planning ,
- may contribute to the design and evaluation of the IEP, and
- may provide inservice training in the area of assessment.

Consultation and collaboration

Consultative services include:

- consultation with teachers, parents, students and community agencies regarding the nature of students' strengths and needs, their educational implications, and ways to enhance learning and interpersonal relations; and
- collaboration with school-based and/or district personnel to gather classroom-based data, design or implement instructional strategies, and design and implement behaviour management interventions.

Informal/formal assessment and evaluation

When the school-based team decides it is necessary to gather additional information in order to provide appropriate instruction, a referral for psycho-educational assessment may be in order. This step is taken only after there has been considerable pre-referral assessment and pre-referral intervention. Emphasis on school-based problem solving should lessen the number of referrals for testing.

Informal assessment services include systematic observation, file review, interdisciplinary consultation, interviews and assessment to determine academic skill development, strengths and weaknesses in learning processes and social/adaptive functioning.

D. SPECIAL CONSIDERATIONS: SERVICES

Formal psycho-educational assessments serve diagnostic and planning functions for students with special needs and may include assessment of cognitive functioning. These assessments should provide information that assists teachers and parents to better understand the nature of the special need, developmental factors and educational, social, emotional and career implications. Assessment information should be used for planning and goal setting, selecting teaching and behaviour intervention strategies, and evaluation.

Assessment findings are summarized in a written report that is shared with the parent/guardian, the school-based team and, when appropriate, the student. Parents have to be informed as to how the report will be made accessible to others working with the student. (References: Appendix H.14 Student Records: Use and Management; Freedom of Information and Protection of Privacy Act at: http://www.qp.gov.bc.ca/statreg/stat/F/96165_01.htm)

Other services

Psychologists can assist school and district staff in providing inservice training for professional and teacher assistant staff (e.g., behaviour management, observational techniques/data gathering), and participate or assist in program evaluation and research activities.

Access to School Psychology Services

School districts should establish procedures for teachers, students and parents to access these services, establishing protocols for informed, written consent in the case of interventions and assessments, and for protecting the confidentiality of reports. Such procedures should be designed to ensure equity of access for all students.

Personnel

School psychologists should have experience in the education system with knowledge of instruction and assessment. In order for their work to be effective, they need experience with students and teachers. The collegial relationship between school psychologists and teachers is important for the role they play in schools and districts.

A school psychologist must have the following qualifications:

- registration with the College of Psychologists, with special training in school psychology; or
- a Master's degree in school/educational psychology or a related field with a focus on school psychology and qualifications that meet the standard for membership in the British Columbia Association of School Psychologists.

School districts must ensure that employees carrying out psycho-educational assessments meet these qualifications. When the services of a psychologist are contracted, that person should meet the requirements for registration by the College of Psychologists as established in bylaws under the *Health Professions Act*.

D. SPECIAL CONSIDERATIONS: SERVICES

In recognition of the fact that school psychologists require a 1200 hour internship in order to meet the requirements for certification and membership with BCASP; or a 1600 hour internship to meet the registration requirements with the CPBC, the Ministry encourages school districts to acknowledge the value that school psychology interns play in the renewal of their individual school district's student services as well as the profession of school psychology as a whole by providing internship opportunities.

Qualifications of test administrators

The ministry supports the principles set forth in *Standards for Educational and Psychological Tests and Ethical Standards for Psychologists, 1999*, published by the American Psychological Association and adopted by the Canadian Psychological Association.

Educational and psychological tests are generally categorized according to levels of training required of the test administrators (See Appendix H.5 for guidelines related to the training of persons administering psychological tests).

School districts should ensure that personnel administering tests have appropriate levels of training or are supervised by school psychologists with appropriate levels of training.

D.4 Speech-Language Pathology

Purpose

Speech-language pathology services are those services provided by speech-language pathologists designed to support students whose education is adversely affected by oral communication difficulties (Reference: *Ministerial Order 149/89, Support Services for Schools Order*).

Speech-language pathology is defined in the *Health Professions Act*, Health Section (94/2010) as "the health profession in which a person provides, for the purposes of promoting and maintaining communicative health, the services of assessment, treatment, rehabilitation, and prevention of a) speech, language and related communication disorders and conditions, and b) vocal tract dysfunction, including related feeding and swallowing disorders."

The speech-language pathology services in a school district may include a full range of services encompassing prevention, identification and assessment, direct instruction for students (individually, in classroom settings, or in small groups as appropriate), consultation, collaboration with other educators regarding the student's needs in the classroom and other school environments, inservice training, information sharing with families and other service providers and public education.

Any student with delayed, disordered or atypical speech and/or language skills should be brought to the attention of the speech-language pathologist.

D. SPECIAL CONSIDERATIONS: SERVICES

Speech and/or language difficulties may occur at any age and/or in any segment of the school population. Although they may occur in relative isolation from any other special education considerations, they are often associated with intellectual disabilities, autism spectrum disorder, physical disabilities, sensory impairments, severe emotional/behaviour problems, learning disabilities or other learning difficulties. Not all children with these disorders will require direct intervention by a speech-language pathologist, but information sharing and monitoring of needs through collaboration among professionals and team management will ensure that appropriate and co-ordinated services are provided.

Providing primary assistance to students using English as a second language is not considered to be the responsibility of the speech-language pathologist, although these children may have specific communication disorders that warrant intervention.

Description of services

All districts are encouraged to use school-based teams to initiate and monitor referrals for assessment and program planning, and a clearly defined pre-referral and referral process should be in place. A variety of identification and assessment activities related to speech and language difficulties are possible. Some districts may elect to implement screening programs for students of a particular age or in a particular program. Others may rely on a referral system that involves the school principal, teachers, parents or guardians, the learner and/or community agencies.

Speech-language pathologists should use both formal and informal measures to evaluate a student's abilities relative to established norms, school expectations, the classroom environment and the student's needs. A variety of standardized measures should be used in conjunction with samples of behaviour taken from the school context, observations of students and/or interviews with the student, parent/guardian and relevant others. The information obtained should be related to other assessment/planning activities undertaken as part of the learner's educational program.

A school district's speech-language pathology services should be directed towards assisting educators as well as specific students in their attempt to provide support for students with communication impairments. Each school district should document program goals and objectives, service priorities, operating procedures, reporting practices and record-keeping systems. Program entrance and exit criteria should be established, together with follow-up policies and practices. Procedures for handling and storing confidential records should be established. Documentation of program policies and operating practices should be clearly articulated and available for use in planning, management and evaluation activities.

In developing individual speech-language pathology services for students, care should be taken to relate communication objectives to the student's total educational program. Services for communicatively disabled students should be based on documented objectives and incorporated into each student's Individual Education Plan. Parents/guardians and other educators should be informed of assessment results, be involved in plans for intervention, and assist in observing and evaluating

D. SPECIAL CONSIDERATIONS: SERVICES

progress toward stated goals. These partners should be active participants throughout the intervention process.

Speech-language pathologists should have access to work spaces that are conducive to effective instruction (i.e., in compliance with health and safety codes, quiet, and free from distractions). It may be most appropriate for intervention to take place within the classroom context, in which case the speech-language pathologist will be called upon to determine instructional approaches in collaboration with the classroom teacher. Speech-language pathologists should have ready access to relevant instruments and materials that will permit effective assessment and intervention for the wide variety of students who experience communication difficulties.

Access to Speech-Language Pathology services

Service delivery and scheduling models may vary according to district priorities. Some districts may emphasize direct intervention with children, while others may choose a model where more time is spent in collaborative consultation with other educators, service providers, parents and the student.

Personnel

Speech-language pathologists must be registered with the *College of Speech and Hearing Professionals in British Columbia*, and are expected to adhere to their roles and responsibilities as defined in the *Speech and Hearing Health Professions Regulation 413/208* and the College Bylaws.

Information about this regulation is available online at: <http://www.cshhpbc.org>

D.5 Physiotherapy/Occupational Therapy

Purpose

Physiotherapy is a professional health discipline primarily directed toward the prevention and alleviation of movement dysfunction to promote maximal independence for the student in his/her home, school and community. Physiotherapists provide services to children with orthopaedic, neurological, muscular, spinal, joint or sensory dysfunction. These services include assistance in physical positioning to promote optimal physical access, assistance in maximizing independence for students who have limited mobility, and prevention and alleviation of movement dysfunction. The services performed by a physiotherapist in schools may include screening, assessment, consultation, program planning, and assistance in diagnosis, treatment, equipment selection/adaptation, administration, education and research.

Occupational therapy is a professional health discipline that utilizes the analysis and application of activities specifically related to performance in the areas of self-care, productivity, and leisure. Occupational therapists work to promote, maintain, and develop the skills needed by students to be functional in a school setting. Occupational therapists provide services to children with orthopaedic, neurological,

D. SPECIAL CONSIDERATIONS: SERVICES

muscular, spinal, joint or sensory dysfunction, as well as those with cognitive and complex neuro-behavioural disorders. The services provided by the occupational therapist in schools may include assessment, consultation, program planning, and assistance in diagnosis, treatment and equipment selection/adaptation.

Description of services

Physical disabilities and developmental delays may be noted in students who have other special needs, but they can also occur in isolation. Not all students with physical disabilities or delays will require physical/occupational therapies or consultation. Referrals should be handled through the school-based team management process, to ensure that appropriate services are considered for every child.

A student's needs in the area of physiotherapy or occupational therapy services should be determined by the appropriate health professionals after reviewing reports, interviewing parents or guardians, observing and assessing the learner's needs, and consulting with education staff and/or appropriate medical personnel.

Educators and therapists should collaborate to optimize the student's physical functioning and to integrate the student's therapeutic goals within all of the student's educational routines.

Access to Physiotherapy/Occupational Therapy services

School boards should secure the services of an occupational therapist or physiotherapist for students when the absence of basic services provides an impediment to their learning in the school. These services may include:

- screening/assessment;
- consultation for school staff/families;
- training of staff to carry out routines such as positioning, seating, feeding or motor activities for optimal maintenance of students in classroom settings during the school day; and
- monitoring and ongoing evaluation of students in classroom settings.

When "direct" service (i.e. direct treatment) is required, either temporarily or long-term, the student's physician makes a referral to a community-based physiotherapist. This kind of service is considered to be a matter between health professionals and the family, and is beyond the realm of the school district's responsibility. Given these dual responsibilities, there is a need for locally negotiated agreements between health agencies and school districts.

In those instances where students are enrolled in ongoing therapy programs, communication links should be well established between health personnel, the student's home and school staff to ensure that consistency is maintained.

Students with physical disabilities may require adaptations to facilities or provision of specialized equipment or technologies. The physiotherapist and occupational

D. SPECIAL CONSIDERATIONS: SERVICES

therapist will often be able to provide useful advice to school personnel in these matters.

Personnel

Standards of training for physiotherapists are determined by the College of Physical Therapists of British Columbia, which has the authority to issue licences to qualified practitioners. The CPTBC sets standards for entry into the profession, registers physical therapists, sets and enforces a set of rules that registrants must follow and develops programs to promote the highest standards of physical therapy practice. Registration with the CPTBC is mandatory to work as a physical therapist/physiotherapist in British Columbia.

Standards of training for occupational therapists are determined by the College of Occupational Therapists of British Columbia, which has the authority to issue licences to qualified practitioners. Possession of a current licence is a requirement for practicing occupational therapists in British Columbia. Those who provide occupational therapy services in schools should meet standards established by the College of Occupational Therapists of B.C.

D.6 Hospital Education Services

Purpose

The purpose of hospital education services is to enable students to continue their educational program while hospitalized.

Description of services

Depending on their health, hospitalized students should continue with an educational program as similar as possible to the program they would receive in school.

In most instances hospital teachers employed by school districts provide classroom assignments and instructional support for students confined to hospital. Classroom teachers maintain ongoing responsibility for coordinating the student's educational program with the hospital teacher acting as liaison.

Districts should establish procedures to ensure that:

- all appropriate school assignments are provided to the student;
- the hospital teacher provides reports on student progress;
- regular contact is established among the hospital teacher, the regular classroom teacher and the parent;
- the hospital teacher has access to available school district resources (e.g., equipment, materials and curriculum guides);
- facilities appropriate to good learning conditions within the hospital setting are secured through agreement between the school district and the hospital administration; and

D. SPECIAL CONSIDERATIONS: SERVICES

- records of referrals received and educational services rendered to hospitalized students are maintained and available at the district level.

School districts are encouraged to co-operate with each other to ensure that instruction is provided to students who must be temporarily hospitalized outside their home school district.

Access to Hospital Education services

Students eligible for education services within the hospital include those with medical conditions including injury, disease, surgery, pregnancy, or psychological disability. Before education services are provided to the student, authorization from the attending physician should be received. Instruction should be initiated as soon as the student's medical condition permits.

Funding

Hospital Homebound funding to school boards is included in the per pupil allocation.

For hospital education services designated as Provincial Resource Programs, information is contained in Section F of this manual.

Personnel

Teachers working in hospital education services should be able to demonstrate:

- successful teaching experience at elementary or secondary level;
- knowledge of health care and community services;
- the ability to work effectively with parents, public health and hospital personnel, medical staff and, following discharge of students, with homebound teachers or other school district personnel;
- knowledge of curricula and instructional resources across a range of school years;
- knowledge of distributed learning techniques and computer-assisted learning;
- knowledge of human behaviour and the ability to work effectively with students who have medical and/or psychological problems;
- knowledge of child development and an understanding of the educational needs of special children; and
- skills to assess the educational needs of a student and to modify learning activities, intended outcomes, teaching techniques and materials to meet the student's specific needs.

Where Teachers' assistants are required, they will work under the supervision of the hospital teacher.

D. SPECIAL CONSIDERATIONS: SERVICES

D.7 Homebound Education Services

Purpose

The purpose of homebound education services is to enable students to continue their education program while absent from school for periods during the school year because of illness or related medical/psychiatric reasons.

Description of services

Homebound education services provide students with an educational program as similar as possible to the program they would receive if attending school. Contact with the student will be on a regular basis, and of sufficient duration that the student is able to maintain his/her educational program to the extent that the medical condition allows. Regular contact between the homebound program teacher, the principal, the classroom teacher(s) and the parents or guardians, and access to all available school district resources is expected.

Teachers of homebound students provide direct instruction to students, but in most cases responsibility for long-term planning of the students' educational program remains with the students' classroom teacher(s) in collaboration with the homebound teacher and the school-based team. Instruction may be face-to-face, through video conferencing or via the Internet.

It is essential that there be effective collaboration, consultation and co-ordination with all care givers if services for homebound students are to be effective. In some instances, when a student is experiencing psychiatric difficulties, homebound services may exacerbate the student's difficulties. In these cases, alternative educational plans should be developed in collaboration with the community mental health and other service providers as appropriate.

Districts should establish policies and procedures to:

- ensure direct instruction is provided to the student;
- outline a procedure for reporting student progress;
- outline the responsibilities of the parents, the principal, the classroom teacher, related school district and community personnel and homebound teachers while a student is on homebound instruction; and
- ensure collaboration, consultation and co-ordination with all caregivers (e.g., physician, mental health and social work personnel).

School boards are advised to address in their procedures issues such as parent or guardian presence in the home, service to students with communicable diseases, and potentially unsafe conditions.

Access to Homebound Education services

School districts are required to make available an educational program to all persons of school age who are resident in its district and who are enrolled in a school in the

D. SPECIAL CONSIDERATIONS: SERVICES

district. School districts must maintain appropriate educational programs for students who are anticipated to be absent from school for extended periods of time. Instruction should be initiated as soon as possible. Authorization from the physician or public health nurse should be received prior to services being provided to students with health problems.

Students eligible for homebound services include:

- students who are absent from school for medical reasons such as injury, disease, surgery, pregnancy, psychological reasons, etc.; and
- students suspended by the board of school trustees under the School Act may be served in a homebound program.

This program should not be used routinely as the only option for students with severe behavioural or emotional problems. As well, homebound education services are not intended to serve students registered under the Home Education section of the School Act.

Districts should establish and publish policies and procedures for accessing homebound services. Policies should take into consideration the School Act, section 91 (Examinations and reports by school medical officer).

Personnel

Homebound program teachers should be certified by the BC College of Teachers with experience or training to work with homebound students, and should be able to demonstrate:

- the ability to work effectively with parents, school staff, district personnel, medical personnel and community agencies;
- knowledge of curricula and instructional resources across a range of school years;
- knowledge of human behaviour and the ability to work effectively with students who have emotional or social problems;
- knowledge of child development and an understanding of the educational needs of special children;
- the skills necessary to assess the educational needs of a student and to modify curriculum, adapt teaching techniques and materials to meet the student's specific needs; and
- knowledge of distributed learning techniques and computer-assisted learning.

D.8 Distributed Learning

Distributed learning is an alternative to classroom-based instruction for Kindergarten to Grade 12 students, including those with special needs.

School districts should establish policies and procedures related to the provision of electronic and distributed learning programs. These policies must reflect relevant sections of the Act, Ministerial Orders, and meet the requirements and guidelines for students with special needs taking a distributed learning program. Information about

D. SPECIAL CONSIDERATIONS: SERVICES

these requirements and guidelines is available online at:
http://www.bced.gov.bc.ca/policy/policies/spneed_distance_ed.htm

D.9 Funding Special Education Services - Update

The current funding system, introduced on March 1, 2002, moved into the student base allocation a significant portion of those resources that, in the past, formed part of the special education supplement. This includes funds that were previously identified as part of the special education "core" allocation: funds for learning assistance, special health services, identification assessment/planning and hospital/homebound services and supplementary funds for students who are identified as having severe learning disabilities, mild intellectual disabilities, students requiring moderate behaviour supports and students who are gifted.

Supplementary funding continues to be provided to school boards in addressing the aspects of special education for students who meet criteria as Level 1, 2 or 3 unique needs.

- Level 1 – includes students with multiple needs who are Dependent Handicapped or DeafBlind
- Level 2 – includes students with Moderate/Profound Intellectual Disabilities, with Physical Disabilities or Chronic Health Impairments, with Visual Impairments, with Autism Spectrum Disorder, or students who are Deaf or Hard of Hearing
- Level 3 – includes students requiring Intensive Behaviour Interventions or students with Serious Mental Illness

Though the funding system changed, the obligations placed on school boards to address the special needs of students did not.

A summary of funding policy is available in the appendices of this manual or via the Internet at: http://www.bced.gov.bc.ca/policy/policies/funding_special_needs.htm

E. SPECIAL NEEDS CATEGORIES

E. Special Needs Categories

E.1 Considerations for Reporting

Special needs categories are established to assist school districts in identifying the needs of students and providing appropriate education programs to them.

These categories are designed to focus on the educational needs of students regardless of the original cause(s) of those needs.

For example, a student who is hard of hearing should receive the appropriate services, regardless of the cause of the hearing impairment. Similarly, if a student presents atypical behaviours, or intellectual impairment, it is the intensity of the disability and the interventions provided that dictate the category in which the student is reported.

Students should be identified according to the following general guidelines:

- The current 'categorical' system is not intended to specifically identify all medically diagnosed conditions and syndromes that may have an impact on the student's needs and educational program.
- A medical diagnosis by itself does not determine the appropriate special needs category or service required.
- Identifying and reporting students should involve careful determination of the nature, extent and impact of their disabling condition(s) and the nature and extent of educational interventions required.
- Students with diagnosed conditions should be identified in the educational category that best reflects the type and intensity of educational interventions documented in the IEP.

E.2 INTELLECTUAL DISABILITIES

E.2 Intellectual Disabilities

Definition

Students with intellectual disabilities have general intellectual functioning significantly below the mean, as well as significant limitations in adaptive functioning in at least two of the following skill areas as appropriate to the student's age: communication, self-care, home living, social/interpersonal skills, use of community resources, self-direction, functional academic skills, work, leisure, health and safety. Students can experience intellectual disabilities across a range: mild to profound.

A diagnosis of intellectual disability should only be made when a student has significant limitations in both intellectual functioning and adaptive functioning.

To be reported to the Ministry as having an intellectual disability the following conditions must be met:

- 1) The student meets the following eligibility criteria:
 - a) A student with a **mild intellectual disability** has intellectual functioning that is 2 or more standard deviations below the mean on an individually administered Level C assessment instrument of intellectual functioning, and has limitations of similar degree in adaptive functioning in at least two skill areas appropriate to the student's age.
 - b) A student with a **moderate to profound intellectual disability** has intellectual functioning that is 3 or more standard deviations below the mean on an individually administered Level C assessment instrument of intellectual functioning, and has limitations of similar degree in adaptive functioning in at least two skill areas appropriate to the student's age.
- 2) A current IEP is in place that includes:
 - a) individualized goals with measurable objectives,
 - b) adaptations and/or modifications where appropriate,
 - c) the strategies to meet these goals, and
 - d) measures for tracking student achievement in relation to the goals
- 3) Ongoing special education service(s) must be provided.
- 4) The services being provided are beyond those offered to the general student population and are proportionate to level of need.
- 5) The special education services are outlined in the IEP and directly relate to the student's identified special needs.
- 6) Reduction in class size is not by itself a sufficient service to meet the definition.

Identification and Assessment

A student with an intellectual disability will often be identified before entering the school system. For students with a mild intellectual disability, however, difficulties with adaptive behaviour may not have been previously documented. The American Association on Intellectual and Developmental Disabilities, defines adaptive behaviour as three types of skills:

E.2 INTELLECTUAL DISABILITIES

- Conceptual skills-language and literacy; money, time, and number concepts; and self-direction
- Social skills-interpersonal skills, social responsibility, self-esteem, gullibility, naiveté (i.e., wariness), social problem solving, and the ability to follow rules, obey laws, and avoid being victimized
- Practical skills-activities of daily living (personal care), occupational skills, healthcare, travel/transportation, schedules/routines, safety, use of money, use of the telephone

(*See: <http://www.aamr.org>)

A psycho-educational assessment will be used to determine a student's level of functioning and should be based on a variety of measures of intellectual ability and adaptive behaviour, as well as information from the family and, where available, other service providers. Instruments such as the most current revision of the *Vineland Adaptive Behavior Scales*, *The Scales of Independent Behaviour*, or the *Adaptive Behaviour Assessment System* should be used in the assessment of an individual's adaptive behaviour. The most frequently used tests in assessing intellectual ability are the most current revisions of the *Stanford-Binet* and the *Wechsler Intelligence* scales.

It should be noted that every instrument has measurement error of approximately 5 points, so a student may be identified with a mild intellectual disability with an overall cognitive score as high as 75 when there are significant deficits in adaptive functioning. Similarly, a student with a cognitive score below 70 but no significant impairments in two or more adaptive skill areas (appropriate to the student's age) would not be identified in this category. A student may be identified with a moderate intellectual disability with an overall cognitive score as high as 59 when there are significant impairments in adaptive functioning, but would not be identified with a moderate intellectual disability if scores in two or more adaptive skill areas (appropriate to the student's age) are not at a similar level.

The Inter-Ministerial Protocol for Transition Planning for Youth with Special Needs requires and Community Living British Columbia (CLBC) expects that school psychologists will, by the year in which a student turns 16, either conduct a current psycho-educational assessment or provide confirmation of a developmental disability.

The psycho-educational assessment or confirmation must adhere to the diagnostic criteria of the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition: Text Revision* for Mental Retardation- Mild (317), Moderate (318.0), Severe (318.1) or Profound (318.2).

Planning and Implementation for Students with Mild Intellectual Disability

Most students with mild intellectual disabilities benefit from and may learn best from being with age peers, but generally also require additional intervention. As they proceed through elementary school, their IEPs should specify any modifications or adaptations to subject areas or courses, use of special materials, and the measures of progress. The emphasis is on designing and delivering support tailored to helping

E.2 INTELLECTUAL DISABILITIES

students reach their personal goals and their highest level of functioning. Parents must be given the opportunity to participate in the planning process, and to the extent that they are able, students should also participate.

While individual needs may differ, many students with mild intellectual disabilities will require specific instruction for the acquisition of academic skills, personal independence, social responsibility and life skills, as well as with reasoning skills, memory, problem solving and conceptualizing skills.

The older the student, the greater the need for concrete educational objectives. At the secondary level, a student with a mild intellectual disability should have the opportunity and option to access a variety of educational and social experiences both within the school and in the community. For many students, continued participation in academic areas, with adaptations and support where needed, is both reasonable and desirable. For other students, increasing community integration and work experience/work placement opportunities are most enabling (see Appendix H.16 Work Experience).

Planning for Students with Moderate to Profound Intellectual Disabilities

Students with moderate to profound intellectual disabilities have particular learning characteristics. They require support in the development of academic skills, communication skills, cognitive skills, fine and gross motor skills, self-care, life skills and socialization skills. Generally, a student with this level of intellectual functioning is also significantly delayed in social-emotional development. There may also be accompanying sensory, physical and health disabilities.

If a student with a severe to profound intellectual disability has a sensory impairment, physical disability or medical/health needs, support services from a teacher's assistant as well as the expertise of an occupational therapist, a physiotherapist, a speech-language pathologist, or an itinerant specialist may be required. These other professionals should work with the school-based team so that joint planning can take place and information can be shared.

Students with moderate to profound intellectual disabilities can usually learn many appropriate skills and behaviours, and can benefit from being with students who do not have disabilities. However, they require additional intervention beyond integration and socialization. In preparation for an IEP, teachers may want to consider implementing a planning mechanism such as the *McGill Action Planning System (MAPS)**¹, or *Planning for Alternative Tomorrow with Hope (PATH)*. These procedures are effective in identifying the student's strengths and needs and in eliciting involvement and commitment from peers and those involved in supporting the student in setting and achieving goals.

The older the student or the more severe the disability, the greater is the need for functional educational objectives. Since the skills taught should be those that afford many opportunities for practice, and since teaching should be in preparation for adult

E.2 INTELLECTUAL DISABILITIES

life in the community, the student will need an increasing degree of educational instruction in community environments.

(*See MAPS and PATHS at:

http://www.bced.gov.bc.ca/specialed/docs/moe_clt_resource_rb0144.pdf)

Evaluation and Reporting

Some students with intellectual disabilities may be able to achieve the learning outcomes for their subjects or course with adaptations. For these students, evaluation will be based on the regular standards (i.e., the extent to which the learning outcomes for the course are attained). The method of evaluation will be consistent with the IEP and with ministry reporting policies in respect to the use of comments and/or letter grades.

Many students with mild intellectual disabilities will be provided accommodations in the form of modifications to their educational program. Modifications are instructional and assessment-related decisions made to accommodate a student's special needs so that the student may achieve individualized learning goals and outcomes.

Reports to parents should be provided on the same schedule used for all students. Progress should be reported with respect to all components of the program, and with reference to achievement in relation to IEP goals. Students in Grades 10 to 12 who are working toward individualized goals or objectives in an IEP may receive structured written comments and letter grades. Reports should indicate the adaptations and modifications made to the student's educational program. All personnel directly involved in the ongoing educational program (e.g., the classroom teacher, specialist teacher, speech-language pathologist) should report on student progress.

Most students with moderate to profound intellectual disabilities will require extensive modifications to parts of their programs so that some of their learning outcomes will be substantially different from the regular curriculum. In these cases, evaluation will be based on the degree to which the individualized outcomes are achieved.

Personnel

Teachers

With sufficient training and experience, classroom teachers will be capable of including students with intellectual disabilities and providing programs in which they can be successful, provided that specialized support is available when needed. In-service training opportunities and a collaborative team approach are recommended to support and encourage the development of the necessary skills and understandings which the classroom teacher may require.

Specialist teachers with responsibilities for supporting students with intellectual disabilities should fulfill the qualifications described for Learning Assistance (see section D: Learning Assistance Services).

E.2 INTELLECTUAL DISABILITIES

In addition, they should have advanced coursework in:

- the characteristics and needs of students with intellectual disabilities;
- specialized instructional methodologies and technologies;
- adaptations and modifications for students with intellectual disabilities; and
- functional life skills and career development.

Recent and ongoing technological advances in adaptive devices related to computer access, environmental controls and augmented communication have greatly enhanced learning opportunities for students with intellectual disabilities. Specialist staff should stay informed about current developments and introduce new technologies as appropriate and as resources permit.

Teachers' assistants

Teachers' assistants who work in classrooms with students with intellectual disabilities should have sufficient skills and training for the duties they are assigned.

It should be noted that teachers' assistants work under the direction of a teacher and the general supervision of a school principal. In-service training should include opportunities to further develop skills in these and related areas.

Students with Intellectual Disabilities: Quick Guide

Category	Mild Intellectual Disabilities	Moderate to Profound Intellectual Disabilities (Special Needs Funding Category)
Assessment Criteria Related to Student	<p>Demonstrate intellectual functioning that is 2 or more standard deviations below the mean on an individually administered Level C assessment instrument of intellectual functioning.</p> <p>Demonstrate significant limitations* in 2 or more adaptive skill areas (appropriate to the student's age) on a norm referenced measure of adaptive behaviour using instruments such as the <i>Vineland Adaptive Behaviour Scales-Second Edition</i> (<i>Vineland-11</i>), <i>The Scales of Independent Behaviour-Revised (SIB-R/ICA)</i>, or the <i>Adaptive Behaviour Assessment System, Second Edition (ABAS-11)</i>.</p> <p>* The definition of "significant limitations" refers to performances that are 2 or more standard deviations below the mean.</p>	<p>Demonstrate intellectual functioning that is 3 or more standard deviations below the mean on an individually administered Level C assessment instrument of intellectual functioning.</p> <p>Demonstrate significant limitations* in 2 or more adaptive skill areas (appropriate to the student's age) on a norm referenced measure of adaptive behaviour using instruments such as the <i>Vineland Adaptive Behaviour Scales-Second Edition</i> (<i>Vineland-11</i>), <i>The Scales of Independent Behaviour-Revised (SIB-R/ICA)</i>, or the <i>Adaptive Behaviour Assessment System, Second Edition (ABAS-11)</i>.</p> <p>* The definition of "significant limitations" refers to performances that are approximately 3 or more standard deviations below the mean.</p>

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

E.2 INTELLECTUAL DISABILITIES

Criteria for Planning and Service	<p>IEP that addresses the student's needs, and includes any adaptations and modifications and services for the student.</p> <p>IEP outlines individualized goals and documents plans for interventions and measures for tracking student achievement in relation to the IEP goals.</p> <p>The student is receiving the services outlined in the IEP.</p>	<p>IEP that addresses the student's needs, and includes any adaptations and modifications and services for the student.</p> <p>IEP outlines individualized goals and documents plans for interventions and measures for tracking student achievement in relation to the IP goals.</p> <p>The student is receiving the services outlined in the IEP.</p>
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E.3 LEARNING DISABILITIES

E.3 Learning Disabilities

Definition

In May 2002, the Ministry of Education adopted the following definition of learning disabilities, adapted from the definition developed by the Canadian Learning Disabilities Association (January 2002).

Learning disabilities refers to a number of disorders that may affect the acquisition, organization, retention, understanding or use of verbal or nonverbal information. These disorders affect learning in individuals who otherwise demonstrate at least average abilities essential for thinking and/or reasoning. As such, learning disabilities are distinct from global intellectual disabilities.

Learning disabilities result from impairments in one or more processes related to perceiving, thinking, remembering or learning. These include, but are not limited to: language processing, phonological processing, visual spatial processing, processing speed, memory and attention, and executive functions (e.g. planning and decision-making).

Learning disabilities range in severity and may interfere with the acquisition and use of one or more of the following:

- Oral language (e.g., listening, speaking, understanding)
- Reading (e.g., decoding, phonetic knowledge, word recognition, comprehension)
- Written language (e.g., spelling and written expression)
- Mathematics (e.g., computation, problem solving)

Learning disabilities may also involve difficulties with organizational skills, social perception, social interaction and perspective taking.

Learning disabilities are life-long. The way in which they are expressed may vary over an individual's lifetime, depending on the interaction between the demands of the environment and the individual's strengths and needs. Learning disabilities are suggested by unexpected academic under-achievement or achievement that is maintained only by unusually high levels of effort and support.

Learning disabilities are due to genetic and/or neurological factors or injury that alters brain function in a manner that affects one or more processes related to learning. These disorders are not due primarily to hearing and/or vision problems, social-economic factors, cultural or linguistic differences, lack of motivation, inadequate or insufficient instruction, although these factors may further complicate the challenges faced by individuals with learning disabilities. Learning disabilities may co-exist with other disorders such as attentional, behavioural or emotional disorders, sensory impairments, or other medical conditions.

E.3 LEARNING DISABILITIES

Identification and Assessment

Schools and school boards are responsible for assessing students for the purpose of planning instruction and support services and for identifying students with special needs.

Students with learning disabilities may not demonstrate obvious special needs before entering the school system. Due to their ability to perform well in some areas, academic difficulties may be misunderstood and viewed as lack of motivation until the learning disabilities are identified.

Identifying learning disabilities as early as possible can facilitate early intervention and may minimize ongoing learning difficulties. Due to the variations among learning disabilities, students demonstrate a range of patterns of difficulties and strengths. As a result, learning disabilities may be identified at a various stages of the student's school life.

Identifying learning disabilities requires multiple sources of both formal and informal assessment information. Ability, academic achievement and cognitive processes should be addressed through systematic documentation of the student's classroom performance and response to varying instructional approaches as well as through standardized measurement.

A process of systematic assessment and documentation identifies students with learning disabilities based on their

1. Persistent difficulty learning **and**
2. Average or above average cognitive ability **and**
3. Weaknesses in cognitive processing.

1. Persistent difficulty learning

The student's opportunity to learn is a primary consideration in identifying learning disabilities. Persistent difficulty refers to restricted progress that cannot be explained by inadequate attendance, cultural or linguistic differences, sensory deficits, social emotional factors, health issues and/or poor/insufficient instruction. Current research describes persistent academic difficulties as inadequate response to instruction or intervention.

Learning disabilities may be suspected when a student has had appropriate opportunities to learn but has not demonstrated expected progress toward learning outcomes related to:

- oral language development (listening, speaking, understanding)
- acquisition of pre-academic skills such as recognition of letters and numbers in the early primary years; and/or
- acquisition of reading, written language, and/or numeracy
- retention, organization, understanding or use of verbal and/or non-verbal information (e.g. demonstrating organizational skills, using symbols, understanding visual aids, applying/generalizing learning).

E.3 LEARNING DISABILITIES

Evidence of persistent learning difficulties may include curriculum-based assessment, standardized achievement tests and/or portfolios of student work. Assessment data should document systematic attempts to address the student's difficulty through instructional adaptations as well as the extent of the student's ongoing difficulties in spite of the variations in instructional approaches.

2. Average or above average cognitive ability

The usual way to assess cognitive ability is to use norm-referenced tests of cognitive abilities, commonly known as Level C Assessment.

Another way to estimate cognitive ability is to use a battery of norm-referenced measures, commonly known as level B tests, to assess academic skills that depend upon the student's ability to reason. Such measures might be focused on mathematical problem-solving, reading comprehension, written expression and listening comprehension. Not all tests that focus on these skills can be assumed to yield a valid estimate of ability. If academic measures are used to estimate ability, school boards should ensure that the measures employed are appropriate for this purpose. The use of more than one measure is important.

Students with average or above potential will score at or above one standard deviation below the mean for their age on standardized tests.

3. Weaknesses in cognitive processing

Students with learning disabilities have impairments to processes related to perceiving, thinking, remembering or learning. Their learning difficulties may arise from deficits in various aspects of

- attention
- language, phonological and/or visual-spatial processing,
- processing speed,
- memory, and/or
- executive functions (e.g., planning and decision-making).

Specific weaknesses may be suggested by informal measures of classroom performance and then be confirmed through norm-referenced assessment (Level C).

Identifying a student's processing difficulties provides an explanation for academic difficulties and facilitates the implementation of appropriate instructional approaches that may enable the student to demonstrate improved progress.

Social-emotional status should also be considered when investigating possible learning disabilities.

- Students with learning disabilities may demonstrate social problems as the result of their deficits in perceiving or processing visual clues and/or some aspects of language. These may appear as difficulties with social perception, social interaction and perspective taking.
- Students may develop emotional difficulties, with or without social problems as the result of frustration and self esteem issues developing secondary to their learning disabilities.

E.3 LEARNING DISABILITIES

- Some students with average ability who do not have learning disabilities may demonstrate persistent difficulty learning due to stress associated with neglect, abuse, family upheaval, trauma, or other social problems.

Specialized assessment is required for formal diagnosis of learning disabilities. Level B and Level C assessments must be conducted by appropriately qualified professionals who can interpret results considering the student's opportunities for learning, learning patterns, approach to tasks and response to instruction.

In some cases, learning disabilities may be identified in clinical settings. The assessment may be multidisciplinary, supplementing psycho-educational assessment with information from a speech-language pathologist, an occupational therapist or other medical personnel.

Assessment of a student to identify a learning disability should integrate information from a number of sources including the family, classroom teacher, counsellors (if involved), learning assistance or support records, formal student records, and any relevant medical reports (such as OT, PT, SLP), in addition to current test results.

The assessment should integrate information related to a number of factors:

- developmental and health history as well as current health status
- sensory acuity (i.e. hearing and vision), cultural and linguistic considerations and any potentially relevant socio-economic factors (including transience)
- history of attendance and academic performance
- current pre-academic or academic skills
- overall intellectual functioning
- specific cognitive processes, including strengths and weaknesses and their implications for learning
- current social-emotional status

All assessment information should contribute to the process of planning and monitoring the student's education program.

Planning and Implementation

Learning disabilities vary considerably in their severity and impact on learning. Students with severe learning disabilities will generally require intensive intervention. Students whose learning disabilities have not been identified and addressed early frequently exhibit secondary emotional and behavioural difficulties. Students may be gifted and learning disabled. Students with learning disabilities require an educational plan that builds on their strengths while remediating and compensating for their disabilities. Research suggests three main approaches for supporting students with learning disabilities:

- intense direct instruction;
- instruction in learning and compensatory strategies; and
- adaptation of instructional practices and assessment strategies.

E.3 LEARNING DISABILITIES

This instruction may take place in regular classrooms, but this does not preclude the use of different learning environments such as small group instruction in a resource room, self-contained classes or other specialized settings. The goal of the placement should be to meet the students' educational needs.

Some ways to support students with learning disabilities could include, but are not limited to the following:

- direct remedial, corrective, tutorial or skill-building instruction;
- adapted or supplementary curriculum and materials;
- alternate instructional and/or evaluation strategies, including adjudicated provincial examinations;
- use of equipment, including computer and audiovisual technology;
- social skills training;
- instruction and practice of self advocacy skills; and
- learning strategies instruction.

Evaluation and Reporting

Evaluating student progress

In most cases students will take part in the regular program with the necessary adaptations (e.g., alternate evaluation methods). Evaluation will be based on the regular standards (i.e., extent to which learning outcomes were attained). The method of evaluation will be consistent with the IEP and with ministry reporting policies in respect to the use of comments and/or letter grades.

Reporting

Reports to parents should be provided in the same format and on the same schedule used for all students. Progress should be reported with respect to all components of the program, and with reference to progress in relation to IEP goals. Reports should indicate the adaptations made to the student's educational program, as well as performance relative to widely held expectations. All personnel directly involved in the ongoing educational program (e.g., classroom teacher, specialist teacher, speech-language pathologist) should report on student progress.

Personnel

Teachers

With sufficient training and experience, classroom teachers will be able to meet the needs of most students with learning disabilities and provide an education program in which they can be successful, provided that specialized support is available when needed. In-service training opportunities and a collaborative team approach are recommended to support and encourage the development of the necessary skills and understandings which the classroom teacher may require.

E.3 LEARNING DISABILITIES

Teachers with specialist responsibilities for supporting students with learning disabilities should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

In addition, their qualifications should include advanced coursework in:

- characteristics and needs of students with learning disabilities; and
- specialized instructional and remedial strategies, technologies, materials and curricular adaptations.

As well, they should have training and demonstrated skills in:

- social skills development and behaviour management;
- co-operative planning and collaborative consultation; and
- assessment, classroom management and motivation.

Teachers' assistants

Teachers' assistants working with students with learning disabilities should have sufficient skills and training for the duties they are assigned, including:

- an understanding of learning disabilities;
- collaborative and communication skills;
- strategies for motivating students; and
- behaviour management skills.

It should be noted that teachers' assistants work under the direction of a teacher and the general supervision of a teacher or school principal. In-service training should include opportunities to further develop skills in these and related areas.

Resources

Students who are print-disabled because of a learning disability may be eligible to receive audiotape material from the Provincial Resource Centre for the Visually Impaired (see Appendices for PRCVI Information).

E.4 Gifted

Definition

A student is considered gifted when she/he possesses demonstrated or potential abilities that give evidence of exceptionally high capability with respect to intellect, creativity, or the skills associated with specific disciplines. Students who are gifted often demonstrate outstanding abilities in more than one area. They may demonstrate extraordinary intensity of focus in their particular areas of talent or interest. However, they may also have accompanying disabilities and should not be expected to have strengths in all areas of intellectual functioning.

Identification and Assessment

Early identification of students who are gifted is an important element in planning and delivering appropriate educational programs for these students. Some gifted students whose abilities are not identified and addressed early may exhibit secondary emotional and behavioural difficulties. District screening and identification procedures should be in place to ensure consistency of access to programs designed to support gifted students. Every effort should be made to ensure that screening and identification procedures are unbiased with respect to language, culture, gender, physical ability, learning or other disability.

No single criterion should be established for access to or exclusion from services for students who are gifted. Rather, identification and assessment should be carried out using multiple criteria and information from a variety of sources, all of which are valid components for identification. These should include several of the following:

- teacher observations including anecdotal records, checklists, and inventories;
- records of student achievement including assignments, portfolios, grades and outstanding talents, interests and accomplishments;
- nominations by educators, parents, peers and/or self;
- interview of parents and students; and
- formal assessments to Level C of cognitive ability, achievement, aptitude and creativity. A student who is talented in areas other than academics should also have an assessment of intellectual abilities, as it is important information for educational planning.

Planning and Implementation

Districts should provide differentiated services to meet the diverse needs of the exceptionally capable learner. Since students who are gifted form a heterogeneous population, their individual needs, experiences, aptitudes and interests vary.

Programs for students who are gifted often require a blend of opportunities available both in the school and in the community. The more extraordinary the abilities of the student, the more necessary it becomes to expand the options beyond the regular

E.4 GIFTED

classroom. Differentiated curriculum opportunities need to be designed and programming needs to be varied and flexible (classroom-based, school-based, district-based). Since no single program modification model can provide strategies that will apply to content, process, product, pacing, and learning environment, teachers of gifted students will need to draw from one or more models in order to provide an appropriate educational program that meets the individual needs of the student. This should be reflected in the student's IEP.

Regardless of how services are delivered, there are some common elements that characterize an individualized program appropriate for a student who is gifted:

- it is different in pace, scope, and complexity, in keeping with the nature and extent of the exceptionality;
- it provides opportunities for students to interact socially and academically with both age peers and peers of similar abilities;
- it addresses both the cognitive and affective domains;
- it incorporates adaptations and/or extensions to content, process, product, pacing and learning environment; and
- it goes beyond the walls of a school and into the larger community.

Supplemental services for a gifted student should contain some of the following elements, but are not limited to these:

- independent guided education;
- specialist teachers in resource centres or resource rooms;
- district and community classes;
- special groupings which provide opportunities for learning with intellectual peers;
- mentorships;
- consultative services to assist teachers in expanding experiences in the regular classroom;
- accelerating/telescoping/compacting some or all of the student's program;
- opportunities to challenge courses when appropriate; and
- opportunities to take enriched courses and to participate in Advanced Placement, International Baccalaureate, or honours courses.

It is important to recognize the individual characteristics of school districts and their communities in designing services for gifted students. For example, students who are gifted may benefit from the use of information technology, which will increasingly facilitate access to information sources not readily available in all communities.

Evaluation and Reporting

It is expected that districts and schools will include gifted students in regular evaluation and reporting. If there are extensive program modifications, evaluation should be based on the degree to which the individual learning outcomes are achieved. Reports of student progress should be based on the instructional objectives and procedures outlined in the student's IEP. Reports should indicate the

E.4 GIFTED

adaptations and modifications made to the student's educational program, as well as performance relative to widely held expectations. All personnel directly involved in the ongoing educational program should report on student progress.

Personnel

Teachers

The ministry expects that with sufficient training and experience classroom teachers will be capable of including most students who are gifted, and providing a program in which they can be successful, provided that specialized support is available when needed. Inservice training opportunities and a collaborative team approach are recommended to support and encourage the development of the necessary skills and understandings which the classroom teacher may require.

Support teachers with specialized training and experience in gifted education may serve as helping teachers/consultants, and may work in resource centres or with specialized cross-school groupings or special courses. Teachers with responsibility for supporting programs for gifted students should fulfill the qualifications described for learning assistance (see Section D.1 Learning Assistance Services).

In addition, these qualifications should include coursework in:

- the nature of giftedness and the needs of gifted students; and
- strategies for meeting the educational and affective needs of gifted students.

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

E.5 Behavioural Needs or Mental Illness

Definitions

Students can experience behaviour, social/emotional, or mental health problems that range from mild to serious. Most students with social/emotional difficulties can be supported in school through regular discipline, counselling, and school-based services. A smaller number of students require more intensive support.

Students who require behaviour supports are students whose behaviours reflect dysfunctional interactions between the student and one or more elements of the environment, including the classroom, school, family, peers and community. This is commonly referred to as behaviour disorders. Behaviour disorders vary in their severity and effect on learning, interpersonal relations and personal adjustment.

Students Requiring Moderate Behaviour Support or Students with Mental Illness

Students who require Moderate Behaviour Support demonstrate one or more of the following:

- behaviours such as aggression (of a physical, emotional or sexual nature) and/or hyperactivity;
- behaviours related to social problems such as delinquency, substance abuse, child abuse or neglect.

Students with Mental Illness are students who have been diagnosed by a qualified mental health clinician as having a mental health disorder. Students with mental illness demonstrate one or more of the following:

- negative or undesirable internalized psychological states such as anxiety, stress-related disorders, and depression;
- behaviours related to disabling conditions, such as thought disorders or neurological or physiological conditions.

To be identified in the category *Moderate Behaviour Support or Mental Illness*, students must also meet the following criteria:

- the frequency or severity of the behaviours or negative internalized states have a very disruptive effect on the classroom learning environment, social relations or personal adjustment; and
- they demonstrate the above behaviour(s) or conditions over an extended period of time, in more than one setting and with more than one person (teachers, peers); and
- they have not responded to support provided through normal school discipline and classroom management strategies.

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

Students Requiring Intensive Behaviour Intervention or Students with Serious Mental Illness

Students identified in this category are those most in need of intensive interventions. They are expected to be less than one percent (1%) of the student population province-wide. These students should have access to co-ordinated school/community interventions, which are based on inter-service/agency assessment processes that are required to manage, educate, and maintain the students in school and in their community.

Students Requiring Intensive Behaviour Intervention are eligible to be reported in this special education funding category if they exhibit:

- ▶ antisocial, extremely disruptive behaviour in most environments (for example, classroom, school, family, and the community); and
- ▶ behaviours that are consistent/persistent over time.

Students with Serious Mental Illness eligible to be reported in this special education funding category are those with:

- ▶ serious mental health conditions which have been diagnosed by a qualified mental health clinician (psychologist with appropriate training, psychiatrist, or physician); and
- ▶ serious mental illnesses which manifest themselves in profound withdrawal or other negative internalizing behaviours; and
- ▶ These students often have histories of profound problems, and present as very vulnerable, fragile students who are seriously 'at risk' in classroom and other environments without extensive support.

In addition to meeting one of the conditions above, to be eligible for special education funding, these behaviour disorders and or illnesses must be:

- ▶ serious enough to be known to school and school district personnel and other community agencies and to warrant intensive interventions by other community agencies/service providers beyond the school; and
- ▶ a serious risk to the student or others, and/or with behaviours or conditions that significantly interfere with the student's academic progress and that of other students; and
- ▶ beyond the normal capacity of the school to educate, provided "normal capacity" is seen to include the typical special education support/interventions such as school-based counselling, moderate behaviour supports, the use of alternate settings, and other means in the school environment.

Reduction in class size or placement in an alternate program or learning environment is not by itself a sufficient service to meet the criteria.

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

Identification and Assessment

The process of identification and assessment of students with behaviour disorders or mental illness sometimes begins at the classroom level, although these students are often identified in the community by mental health professionals. To be identified in this category, the behaviours in question should not be transitory but should generalize to different settings and individuals.

When teachers first notice a problem, they will consult with the parents and attempt alternate strategies to manage the behaviour or support the student in the classroom. If these prove unsuccessful, the teacher may seek assistance from other school-based services or from the school-based team. The teacher's observations should be incorporated into an identification and assessment process for educational purposes, as should the assessments of other professionals.

The school-based team may access other school or district support services, and/or request additional assessment. It may also be appropriate at this stage to involve the family's physician, child and youth mental health services, or other community agencies in the identification and intervention process.

Assessment should:

- analyze the student's functional behaviours in various settings and with different people who regularly are a part of her/his environment (functional behaviour assessment);
- integrate information from the different aspects of a student's life;
- focus on strengths as well as needs;
- rule out or address other conditions which may be precipitating or contributing to the behaviour (e.g., hearing loss, learning disabilities, side-effects of medication);
- clarify the characteristics of the behaviour disorder or mental illness;
- address the possibility of other medical or health impairments;
- contribute to the process of planning and evaluating the student's educational program.

The findings of the assessment should be used to plan support, interventions, and services needed by the student.

Planning and Implementation

In accordance with the process described in these sections, planning is done collaboratively by relevant school and district staff, parents and, when appropriate, relevant professionals, service providers, or agencies and the student.

The Ministry of Education requires that an Individual Education Plan (IEP) be developed for each student included in these categories. The IEP describes:

- current behavioural and learning strengths and needs;
- the goals for the student's program referenced to measurable objectives;

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

- the behavioural strategies used to achieve the goals and measures for tracking student achievement of the goals;
- if applicable, specification of the components of the curriculum that will be adapted and/or modified;
- the resources needed to support the student;
- the names of staff responsible (school, community agencies) for implementing the plan;
- the role of the parents in supporting the plan;
- means of evaluating the efficacy of supports/interventions and a timeline for evaluation;
- decisions regarding where the plan will be implemented; and
- plans for transitions.

In general, these intervention programs should be implemented in the settings in which the behaviours are occurring, rather than through a change in placement. However, integrated approaches should not place the student, his/her peers, or those providing services in an "at risk" position (Appendix H.8.2 Removal Health Safety).

Some of these students may require more specialized services, including part or full-time placement in specialized learning environments (resource room, teaching and evaluation centre, or programs provided in co-ordination with other agencies) until the student can be assisted to re-enter the regular classroom on a full-time basis and/or successfully enter the world of work.

Planning for Students Requiring Intensive Behaviour Intervention or Students with Serious Mental Illness

For students *requiring intensive behaviour intervention or serious mental illness*, there must be one or more of the following additional services provided:

- ▶ direct interventions in the classroom by a specialist teacher or supervised teachers' assistant to promote behavioural change or provide emotional support through implementing the plan outlined in the IEP;
- ▶ placement in a program designed to promote behavioural change and implement the IEP; and/or
- ▶ ongoing, individually implemented social skills training, and/or instruction in behavioural and learning strategies.

These services may be complemented/co-coordinated with:

- ▶ in-depth therapy, counselling and/or support for the student or family in the community; or
- ▶ pharmacological treatment as prescribed and monitored by a physician.

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

In addition to the requirements for moderate support described above, the following are also required:

- ▶ an IEP, which is co-ordinated with intervention/care plans developed by appropriate community service providers or agencies in consultation with the family;
- ▶ evidence of a co-ordinated, cross-agency community planning such as integrated case management or 'wrap-around' planning;
- ▶ documentation that the district has exhausted its own resources and capacity to manage within the typical range of special education support/interventions;
- ▶ evidence of a planned inter-agency or service provider review process, in a stated time frame, recognizing that many behavioural problems will be ameliorated if the interventions are appropriate.

Evidence of inter-agency or service provider involvement, without intensive and collaborative on-going planning and service co-ordination, is not sufficient in itself to warrant funding in this category.

Placement in this special education funding category is not intended to be static from year to year, as it is expected that an intensive and coordinated approach, including in some cases medical intervention, will result in changes. Reviews should be conducted annually and more frequently if warranted. Districts may claim students in subsequent years in this category only if they are justified in doing so because of particular circumstances surrounding the intensity of each student's requirement for services and case management, as reflected in the student's IEP.

Personnel

Teachers

With sufficient training and experience, classroom teachers will be capable of including most students requiring behaviour and mental health supports and providing a program in which they can be successful, provided that support is available when needed. Inservice training opportunities and a collaborative team approach are recommended to support and encourage the development of skills required.

Specialist teachers with responsibilities for supporting students in these categories should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

In addition, boards should ensure that specialist teachers whose responsibilities are primarily concerned with programming for students with behaviour disorders or mental illness have appropriate training. These specialist teachers should possess general training in the area of special education with additional coursework in the education of students with mental illness or behaviour disorders, motivational techniques, and behaviour management.

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

The skill set for specialist teachers in these programs should include:

- behavioural observation, analysis, strategies and management;
- consultative and collaborative skills;
- direction/supervision of behavioural intervention programs;
- adaptation of curriculum to meet a wide range of student learning needs; and
- counselling skills.

Child and youth personnel and teachers' assistants

Child and youth workers or teachers' assistants working with students requiring behaviour supports/ interventions should have sufficient skills and training for the duties they are assigned including:

- an understanding of behaviour disorders;
- observational, motivational, and behaviour management skills; and
- communication, cooperative and collaborative skills.

It should be noted that teachers' assistants work under the direction of a teacher and the general supervision of a teacher or school principal. Inservice training should include opportunities to further develop skills in these and related areas.

Evaluation and Reporting

In most cases students identified in these categories will take part in the regular curriculum although some adaptation may be necessary (e.g., alternate evaluation methods).

Evaluation will be based on the regular standards (i.e., extent to which learning outcomes were attained). The method of evaluation will be consistent with the IEP and with ministry policies in respect to the use of comments and/or letter grades.

Some students may require extensive modifications to parts of their program so that some of their learning outcomes will be substantially different from other students.

In these cases, evaluation will be based on the degree to which the individualized outcomes are achieved.

Reports should be provided in the same format and on the same schedule used for all students. Progress should be reported with respect to all components of the program, and with reference to IEP goals. Reports should indicate the adaptations and modifications made to the student's educational program, as well as performance relative to widely held expectations.

E.5 BEHAVIOURAL NEEDS OR MENTAL ILLNESS

Behaviour Needs or Mental Illness: Quick Guide Table

Category	Students Requiring Moderate Behaviour Supports or Students with Mental Illness	Students Requiring Intensive Behaviour Interventions or Students with Serious Mental Illness (Special Education Funding Supplement)
Assessment Criteria Related to Student	<ul style="list-style-type: none"> • Must have documentation of a behavioural, mental health and/or psychological assessment which indicates needs related to behaviour or mental illness • Demonstrate aggression, hyperactivity, delinquency, substance abuse, effects of child abuse or neglect, anxiety, stress related disorders, depression, etc. • Severity of the behaviour or condition has disruptive effect on classroom learning, social relations, or personal adjustment • Behaviour exists over extended time and in more than one setting • Regular in-class strategies not sufficient to support behaviour needs of student: beyond common disciplinary interventions • Rule out other conditions which may be contributing to the behaviour (for example, side effects of medication, learning disabilities) • For Mental Illness, the diagnosis must be made by a qualified mental health clinician 	<ul style="list-style-type: none"> • Must have documentation of a behavioural, mental health and/or psychological assessment which indicates the need for intensive intervention beyond the normal capacity of the school to educate • Demonstrate antisocial, extremely disruptive behaviour or profound withdrawal or other internalizing conditions in school • Behaviour or mental illness serious enough to be a risk to themselves or others and/or significantly interfere with academic progress of self and others • Behaviour persistent over time in most other settings • Behaviour or mental illness serious enough to warrant extensive interventions beyond the school • For <i>Serious Mental Illness</i>, the diagnosis must be made by a qualified mental health clinician (psychologist with appropriate training, psychiatrist or physician)
Criteria Related Planning and Service	<ul style="list-style-type: none"> • Must develop IEP with goals that address student's behaviour or social/emotional needs and measures for student achievement of the goals • Must provide support services and adaptations/modifications as indicated on the IEP • No requirement for shared planning, implementation, or funding with other service providers or agencies, but does not preclude such arrangements 	<ul style="list-style-type: none"> • Must develop IEP with goals that address student's behaviour or conditions of the mental illness and measures for student achievement of the goals • Must provide support services and adaptations/modifications related to the behaviour or mental illness as indicated on the IEP • Documentation to show that school district has already exhausted resources normally used for moderate behaviour interventions • Requirement that both plan and delivery of service is coordinated with community service provider or agency (i.e. mental health clinician, Ministry of Children and Family Development, Mental Health, First Nations Social Worker). Not enough that another agency or ministry is "involved".

E.6 PHYSICALLY DEPENDENT

E.6 Physically Dependent

Definition

A student with dependent needs is completely dependent on others for meeting all major daily living needs. She/he will require assistance at all times for feeding, dressing, toileting, mobility and personal hygiene. Without such assistance and personal care support, attendance at school would not be possible. The estimated prevalence in British Columbia of school-age students requiring this very intense level of service is .07% of the student population.

Some students are born with conditions or disabilities that make them dependent, while others acquire conditions or disabilities. For some students, increasing independence as they learn and grow is a reasonable expectation. For other students, decreasing independence may occur due to degenerative conditions or terminal illness.

To be eligible for supplemental funding in this category the following conditions must be met:

- The student meets the above eligibility criteria; and
- A current IEP is in place that includes:
 - individualized goals with measurable objectives,
 - adaptations and/or modifications where appropriate,
 - the strategies to meet these goals, and
 - measures for tracking student achievement in relation to the goals.
 - Ongoing special education service(s) must be provided.
- The services being provided are beyond those offered to the general student population and are proportionate to level of need.
- The special education services are outlined in the IEP and these directly relate to the student's identified special needs.
- Reduction in class size is not by itself a sufficient service to meet the definition.

Identification and Assessment

Assessments should integrate current, relevant information related to their intellectual, social/emotional, sensory, physical and communicative abilities, as well as their ability to perform activities of daily living at school. There must be an Individual Education Plan that recognizes the broad range of intellectual abilities of the student, and that addresses the specific educational, health and personal care needs as well as the strategies to address those needs. Developing an appropriate plan for a student with multiple needs frequently requires input from a number of specialists who are not typically part of a school-based team.

Careful documentation and clear procedures are required to address the health needs of these students while in school. Therefore, the following should be

E.6 PHYSICALLY DEPENDENT

incorporated into the planning: available medical assessments; health care plans; and special emergency procedures (see Appendix H.8 Inter-Ministerial Protocols – Provision of Support Services for more information).

Planning and Implementation

In providing services to a student with dependent needs, unique issues around seating, lifting, positioning, movement, feeding, medication, hygiene and safety will have to be addressed by the school-based team. Many of these can be carried out in a classroom environment, but others, for reasons of privacy and dignity, require a more secluded space. The student will also require adaptations to the learning environment to participate in aspects of school life and to maximize independence. The student should have access to as many parts of the school as possible, to increase opportunities for participation. Equipment accessibility in these areas will also have to be addressed. Adaptations to facilities or equipment to allow access to school areas and programs should be made as quickly as possible where physical barriers exist. The Provincial Integration Support program can provide information and strategies to maximize participation by students with multiple disabilities. (Appendices H.1 Accessible School Facilities Planning and H.2 Access to Equipment, Technology & Services)

Recent and ongoing technological advances in adaptive devices related to computer access, environmental controls and augmented communication have greatly enhanced learning opportunities for students with dependent needs. It is expected that specialist staff will stay informed about current developments and introduce new technology as appropriate. The services of the SET-BC program may be appropriate for some of these students (Appendix H.2.5 Special Education Technology-BC (SET-BC)).

A student with a degenerative and/or terminal condition who is or becomes dependent should have normal routines maintained as long as possible. Health care plans will need regular updating and will need to include emergency procedures to meet individual needs and circumstances.

Evaluation and Reporting

It is expected that districts and schools will include students with dependent needs in regular evaluation and reporting. Some students with dependent needs are of average or above average intellectual ability and can meet the learning outcomes identified in the regular curriculum if appropriate adaptations are made to instruction and assessment methods. The method of evaluation will be consistent with the IEP and with ministry reporting policies in respect to the use of comments and/or letter grades.

Some students may require extensive modifications to parts or their entire program so that the learning outcomes will be substantially different from the regular curriculum. In these cases, evaluation will be based on the degree to which the goals and objectives in the IEP are achieved. Evaluation would be referenced to individually set standards.

E.6 PHYSICALLY DEPENDENT

Reports to parents should be provided on the same schedule used for all students. Progress should be reported with respect to all components of the program and with reference to progress in relation to the IEP goals. Reports should indicate the adaptations and modifications made to the student's educational program. All personnel directly involved in the ongoing educational program (e.g., classroom teacher, specialist teacher, speech-language pathologist) should report on student progress.

Student progress should be evaluated using a range of assessment techniques. These may include criterion-based measures, curriculum-based assessments, teacher observations, samples of student work, and the extent to which IEP goals have been achieved.

Personnel

Teachers and other professionals

The Ministry of Education expects that with sufficient training and experience, classroom teachers will be competent in including students with dependent needs, provided that support is available. Inservice training opportunities and a collaborative team approach are recommended to support and encourage the development of the skills required.

Specialist teachers with responsibilities for supporting students with dependent needs should fulfill the qualifications described for learning assistance (see Section D1: Learning Assistance Services). In addition, they should have advanced coursework in:

- the characteristics and needs of students with dependent needs;
- specialized instructional methodologies and technologies; and
- adaptation and modification of programs for students with dependent needs.

There may also be a need for a qualified health professional to monitor the quality of health services on a regular basis.

Districts should ensure that personnel who serve students with chronic and complex health needs are trained and qualified to perform the functions required.

Teachers' assistants

Teachers' assistants who work in classrooms with students with dependent needs should have sufficient skills and training for the duties they are assigned, including:

- an understanding of the social, emotional, and educational implications of dependent needs;
- functional life skills and career development; and
- technological support.

E.6 PHYSICALLY DEPENDENT

It should be noted that teachers' assistants work under the direction of a teacher and the general supervision of a teacher or school principal. In-service training should include opportunities to further develop expertise in these and related areas.

Resources

The Provincial Integration Support Program is an outreach service mandated to assist schools throughout British Columbia in meeting the educational needs of students with multiple/severe disabilities. This program is available to provide information, inservice and teaching strategies to support the classroom teacher and support team to meet the educational needs of the student with multiple/severe disabilities.

Further information may be obtained from:

Coordinator, Provincial Integration Support Program
1525 Rowan Street, Victoria, B.C. V8P 1X4
Phone: (604) 595-2088; Fax: (604) 592-5976

E.7 DeafBlind

Definition

A student with deafblindness has a degree of visual and auditory impairment which, when compounded, results in significant difficulties in developing communicative, educational, vocational, avocational, and social skills.

To be considered deafblind the student's vision and auditory impairments can range from partial sight to total blindness and from moderate to profound hearing loss.

Students who are identified and assessed as deafblind are eligible for supplemental funding when the following conditions are met:

- The student meets the above eligibility criteria; and
- A current IEP is in place that includes:
 - individualized goals with measurable objectives,
 - adaptations and/or modifications where appropriate,
 - the strategies to meet these goals, and
 - measures for tracking student achievement in relation to the goals.
- Ongoing special education service(s) must be provided.
- The services being provided are beyond those offered to the general student population and are proportionate to level of need(s).
- The special education services are outlined in the IEP and directly relate to the student's identified special needs.
- Reduction in class size is not by itself a sufficient service to meet the definition.

Identification and Assessment

Districts should have current information that describes the sensory acuities (vision and hearing), physical development, orientation and mobility (skills and knowledge), social development, academic abilities, educational achievement, and communicative competence of students who are deafblind.

This information is best obtained for students who are deafblind through a multidisciplinary assessment process.

Planning and Implementation

The needs of students who are deafblind are varied. Therefore instruction should be adapted and the curriculum modified to reflect individual needs. Many students who are deafblind have potentially useful hearing and/or vision that enhance their potential for integration into the classroom. However, specific intervention and appropriate support should be available in order for each student to develop and learn. The student's educational requirements and any special measures that are to

E.7 DEAFBLIND

be taken in order to help meet those requirements must be documented in a formal Individual Education Plan.

When an IEP is developed, the following needs should be considered:

- communication skills;
- social skills;
- orientation and mobility skills;
- visual skills;
- auditory skills;
- daily living skills;
- academic skills;
- specialized skills in reading (e.g., braille, large print, closed captioned TV [CCTV]);
- specialized skills in mathematics (e.g., abacus, Nemeth Code);
- access to technology (e.g., tape recorders, microcomputers); and
- study skills and note-taking strategies.

Evaluation and Reporting

Reports of student progress should be based on the goals, strategies and outcomes outlined in the IEP. Some students who are deafblind are able to meet the objectives of the curriculum if appropriate adaptations are made to instruction and assessment methods.

Parents should receive reports on the student's progress for all aspects of the IEP as part of the school's usual reporting process.

Personnel

Specialist teachers with responsibilities for supporting students in this category should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

School districts should use the services of qualified personnel to meet the needs of students who are deafblind, as the educational strategies that are effective for those with a single sensory impairment are frequently ineffective with students with the dual sensory impairment of deafblindness.

If specialist teachers of the deafblind are not available then it is recommended that consultation services for district personnel be sought from other sources such as the Provincial Outreach Program for Deafblind Students (see Resources below).

If the support of an intervenor or a teacher assistant is warranted, the classroom teacher should consult with specialist personnel to assist him or her in developing, directing and monitoring the assistant's or intervenor's activities. Teachers' assistants or intervenors should have sufficient training and understanding of deafblindness for the duties they are assigned.

Resources

Provincial Outreach Program for Deafblind Students

The Provincial Outreach Program for Deafblind Students is available to provide consultative services to school districts enrolling deafblind students.

Consultants work with the team of service providers to help them plan and implement a consistent program designed to meet the needs of the deafblind student in the school, the family and the community. The consultants are educational specialists in the field of deafblindness. Their experience and training has qualified them to provide support to other professionals and parents working with deafblind students.

Provincial School for the Deaf

Referrals to the Provincial School for the Deaf and other Provincial Resource Programs for the Deaf and Hard of Hearing may be made through the Provincial Educational Review Committee for the Deaf and Hard of Hearing (PERCDHH).

Provincial Resource Centre for the Visually Impaired – PRCVI or SET-BC

School districts may borrow learning resources, reference materials and equipment for use with students with deafblindness from the Provincial Resource Centre for the Visually Impaired (PRCVI) and in some instances from Special Education Technology-British Columbia (SET-BC).

Auditory Training Equipment (ATE)

School boards determine whether students who have a hearing loss need auditory training equipment for classroom use. The Ministry of Education makes auditory training equipment available to school districts for the use of deaf and hard of hearing students in public and independent schools and provides for routine maintenance. See Appendix H.2.1 Auditory Outreach Provincial Resource Program.

E.8 PHYSICAL DISABILITIES OR CHRONIC HEALTH IMPAIRMENTS

E.8 Physical Disabilities or Chronic Health Impairments

Definition

A student is considered to have a physical disability or chronic health impairment based on the need for special educational services due to one or more of the following:

- nervous system impairment that impacts movement or mobility;
- musculoskeletal condition; and/or
- chronic health impairment that seriously impacts students' education and achievement.

A medical diagnosis, by itself, does not determine the need for special educational services by students with physical disabilities or chronic health impairments.

Students are only eligible for funding in this category if their functioning and education is significantly affected by their physical disabilities or chronic health impairments.

Two students with the same physical disability may have very different levels of need. For example, one student with cerebral palsy may be seriously impaired in mobility, independence, cognitive ability and using a wheelchair, while another student with the same diagnosis may participate completely independently in a regular education program.

In some cases, students diagnosed through the Complex Developmental Behavioural Conditions (CDBC) Network as children and youth with complex needs may be included in this category. Regionally, the CDBC Network has been established to assess children and youth with complex needs, including children and youth who may have fetal alcohol spectrum disorder (FASD). A clinical diagnostic assessment by the CDBC Network or by qualified specialists (psychiatrist, registered psychologist with specialized training, or medical professional specializing in developmental disorder) is required. The assessment must include and integrate information from multiple sources and various professions from different disciplines that indicates the student with FASD or the complex developmental behavioural conditions is exhibiting an array of complex needs, with two or more domains being impacted (social-emotional functioning, communication, physical functioning, self-determination/independence, and academic/intellectual functioning). If reported in this category, such students might be receiving extensive intervention and support.

To be eligible for supplemental funding in this category the following must be met:

- The student must meet the above eligibility criteria; and
- A current IEP is in place that includes:
 - individualized goals with measurable objectives,
 - adaptations and/or modifications where appropriate,
 - the strategies to meet these goals, and

E.8 PHYSICAL DISABILITIES OR CHRONIC HEALTH IMPAIRMENTS

- measures for tracking student achievement in relation to the goals.
- Ongoing special education service(s) must be provided.
- The services being provided are beyond those offered to the general student population and are proportionate to level of need(s).
- The special education services are outlined in the IEP and directly relate to the student's identified special needs.
- Reduction in class size is not by itself a sufficient service to meet the definition.

Identification and Assessment

Assessments should integrate current, relevant information related to the student's intellectual, social/emotional, sensory, physical and communicative abilities as well as his or her ability to perform activities of daily living at school. Individual Education Plans should take into account specific health care and personal care needs, and outline specific strategies to address those needs. An extended school-based team would typically include medical professionals and consultation with parents in order to develop and implement an effective IEP.

Planning and Implementation

Medical diagnosis, by itself, does not determine the special educational services required by a student with physical disabilities or chronic health impairments. It is the extent and impact of the physical/medical condition on the student's functioning, and the consequent need for services which enable him or her to access an educational program and participate in a meaningful way, that are the determinants.

For some students, increasing dependence is expected due to degenerative conditions or terminal illnesses. It is important that these students be encouraged to maintain normal routines as long as possible. At the same time, it is essential that the educational system affirm the rights of students and families to participate meaningfully in the individualization of the student's educational program. Health care plans will need regular updating and will need to include emergency procedures to meet individual needs and circumstances.

Students with physical disabilities or chronic health impairments should have opportunities to participate in school activities to the greatest extent possible. Adaptations to facilities or equipment to allow access to school areas and programs should be made where physical barriers exist. Refer to Appendix H.1 Accessible School Facilities Planning for more information.

Evaluation and Reporting

In most cases, students with physical disabilities or chronic health impairments will take part in the regular program with the necessary adaptations. Evaluation will be based on the regular standards (i.e., extent to which learning outcomes were achieved). The method of evaluation will be consistent with the IEP and with ministry reporting policies in respect to the use of comments and/or letter grades.

E.8 PHYSICAL DISABILITIES OR CHRONIC HEALTH IMPAIRMENTS

Some students may require extensive modifications to parts of their program so that some of their learning outcomes will be substantially different from the regular curriculum. In these cases, evaluation will be based on the degree to which the individualized outcomes are achieved.

Reports to parents should be provided on the same schedule used for all students. Progress should be reported with respect to all components of the program, and with reference to progress in relation to IEP goals. Reports should indicate the adaptations and modifications made to the student's educational program. All personnel directly involved in the ongoing educational program (e.g., classroom teacher, specialist teacher, speech-language pathologist) should report on student progress.

Personnel

Teachers and other professionals

The Ministry of Education expects that with sufficient training and experience, classroom teachers will be capable of including most students with physical disabilities and chronic health impairments and providing a program in which they can be successful, provided that specialist support is available when needed. In-service training opportunities and a collaborative team approach are recommended to support and encourage the development of the skills required.

Specialist teachers with responsibilities for supporting students with physical disabilities or chronic health impairments should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

In addition, they should have advanced coursework in:

- the characteristics and needs of students with physical disabilities and chronic health impairments; and
- specialized instructional methodologies and technologies; and adaptation or modification of programs for students with physical disabilities or chronic health impairments.

There also may be a need for a qualified health professional to assess the need for health services.

Whenever there is any doubt as to who should provide health care in the school setting, the district staff and the school principal shall consult with the parents, the local health unit or the attending physician. Districts should ensure that staff who serve students with chronic and complex health needs are trained and qualified to perform the functions required.

Recent and ongoing technological advances in adaptive devices related to computer access, environmental controls, and augmented communication have greatly enhanced learning opportunities for students with physical disabilities. Staff will need to stay informed of current developments and introduce new technology as

E.8 PHYSICAL DISABILITIES OR CHRONIC HEALTH IMPAIRMENTS

appropriate. The service of SET-BC may be appropriate for some of these students (see Appendix H.2.5 Special Education Technology-BC (SET-BC)).

Teachers' assistants

Teachers' assistants who work in classrooms with students with physical disabilities or chronic health impairments should have sufficient skills and training for the duties they are assigned.

It should be noted that teachers' assistants work under the direction of a teacher and the general supervision of a teacher or school principal. In-service training should include opportunities to further develop expertise in these and related areas.

E.9 Visual Impairments

Definition

Visual impairment is a generic term that covers a range of difficulties with vision and includes the following categories: blind, legally blind, partially sighted, low vision, and cortically visually impaired.

For educational purposes, a student with visual impairment is one whose visual acuity is not sufficient for the student to participate with ease in everyday activities. The impairment interferes with optimal learning and achievement and can result in a substantial educational disadvantage, unless adaptations are made in the methods of presenting learning opportunities, the nature of the materials used and/or the learning environment. It is not intended to include students described as having visual perceptual difficulties unless they also have a vision loss as described below.

For information pertaining to students who are deafblind, refer to page 67.

To be eligible for supplemental funding as a student with a visual impairment, the following conditions must be met:

In the opinion of an ophthalmologist, optometrist, orthoptist or the Visually Impaired Program at British Columbia's Children's Hospital, the student's functioning may be described by one of the following:

- a visual acuity of 6/21 (20/70) or less in the better eye after correction;
- a visual field of 20 degrees or less;
- any progressive eye disease with a prognosis of becoming one of the above in the next few years; or
- a visual problem or related visual stamina that is not correctable and that results in the student functioning as if his or her visual acuity is limited to 6/21 (20/70) or less; and

The student must meet the above eligibility criteria; and

- A current IEP is in place that includes:
- individualized goals with measurable objectives,
- adaptations and/or modifications where appropriate,
- the strategies to meet these goals, and
- measures for tracking student achievement in relation to the goals.
- The student is receiving special education services that are directly related to the student's visual impairment on a regular basis from a qualified teacher of the visually impaired.
- The special education services being provided are beyond those offered to the general student population and are proportionate to the level of need(s).

E.9 VISUAL IMPAIRMENTS

- The special education services are outlined in the IEP and directly relate to the student's identified special needs.
- Reduction in class size is not by itself a sufficient service to meet the definition.

Identification and Assessment

Schools personnel should recommend to parents that their child see an Optometrist whenever they suspect a student is experiencing difficulties or is having trouble learning which may be due to vision problems.

General health information about school-age children and their eyes is available at the following website: <http://www.bchealthguide.org/healthfiles/hfile53b.stm>

Health Authorities vary in the services they provide in communities to identify vision problems in young children. A case finding approach that identifies children who may be at risk is preferable to annual screenings.

School districts should develop and implement referral procedures to ensure that every visually impaired student is identified, and receives an appropriate educational program.

In order to plan the educational program the teacher of the visually impaired should conduct functional vision and learning media assessment to identify the educational implications of the student's vision loss. In the case of students with a severe visual impairment, a qualified orientation and mobility instructor should also assess the students' skills in orientation and mobility.

Planning and Implementation

A component essential to the establishment of an effective system of delivery of services to students with visual impairment is the availability of qualified, experienced teachers who have regular classroom experience and in addition are competent to adapt materials, teach braille, use visual aids and technological devices and plan, develop, deliver, and monitor all aspects of schooling affected by visual impairment.

With appropriate support services, many students can follow the curriculum with adaptation of learning resources or instructional methods. When necessary, however, the curriculum should be modified to reflect individual needs. The student's educational requirements and any special measures that are to be taken in order to help meet those requirements should be documented in a formal Individual Education Plan.

When an IEP is developed, the following needs should be considered:

- orientation and mobility skills;
- visual skills;

E.9 VISUAL IMPAIRMENTS

- specialized instruction and adaptations for reading and writing (e.g., braille, magnified print, electronic text);
- specialized instruction and adaptations in mathematics (e.g., abacus, Nemeth Code);
- access to technologies (e.g., braille writers and notetakers, audio calculators, computers);
- daily living skills;
- social skills;
- vocational planning and skill development;
- study skills and note-taking strategies; and
- concept development.

Orientation and mobility (O&M) is an essential component of the curriculum for students with severe visual impairments. It provides students with the skills necessary to know where they are in the school or community, where they want to go and how to get there in a safe and efficient manner with as much independence as possible. Orientation and mobility training should not be restricted to the school environment but should include other environments in which the student is required to function at different times of the day.

At the secondary level, school districts may develop and approve orientation and mobility programs or braille programs for visually impaired students as locally developed or independent study courses for credit toward graduation.

A working or instructional area for instruction in specific skill development by the itinerant or resource teacher should also be provided. This instructional area should be conducive to effective instruction (i.e., in compliance with health and safety codes, quiet, adequately lit, ventilated and free from distractions).

Evaluation and Reporting

The student's IEP should outline the specific strategies which will be used to evaluate the student's progress. Parents should receive reports on the student's progress for all aspects of the IEP as part of the school's usual reporting process.

Due to factors such as visual fatigue, slow reading and writing speed, and the visual components of evaluation tools such as video or maps the student may require adaptations to the usual classroom testing situation. Such adaptations could involve additional time, the use of a reader or scribe, the use of specialized equipment, reduction in the volume of work to be completed while retaining the same learning outcomes, the provision of a description of the visual components, such as a video, and the use of an alternate setting for completing the work. These adaptations should be documented in the student's IEP and monitored for their appropriateness and effectiveness.

For students writing provincial examinations, braille, large print, or electronic versions of examinations can be provided if applied for well in advance. See Appendix H.3 Adjudication: Provincial Examinations for more information on

E.9 VISUAL IMPAIRMENTS

procedures for adapting provincial examinations to accommodate students with visual impairment.

Personnel

Teacher of the visually impaired

Specialist teachers with responsibilities for supporting students in this category should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

A specialist teacher of the visually impaired should have:

- a valid B.C. Teaching Certificate, and
- a Master's degree or diploma in the education of the visually impaired.

Where a district is unable to employ a specialist teacher of the visually impaired, this requirement may be met by providing regular services through sharing arrangements with other districts or through a fee-for-service arrangement with qualified specialist teachers of the visually impaired.

Orientation and mobility instructor

To ensure that students have access to appropriate orientation and mobility services, school districts should obtain services from qualified orientation and mobility instructors. The ministry defines a qualified orientation and mobility instructor as one who:

- meets standards established by the Academy for Certification of Vision Rehabilitation & Education Professionals (ACVREP); or
- has a Master's degree in orientation and mobility; or
- has completed post-graduate studies in orientation and mobility which include at least 300 hours of supervised practice in orientation and mobility working with individuals with a variety of visual impairments.

They should have a solid foundation and expertise in the areas of education of students with visual impairment and child growth and development. They should also demonstrate skills in human relations and communication.

Many teachers of the visually impaired have taken additional training and are also qualified as orientation and mobility instructors. In other cases, school districts may find it necessary to contract for specialized orientation and mobility instructors to provide this training.

Teachers' assistants

If the support of a teacher assistant is warranted the teacher of the visually impaired should consult with the classroom teacher to assist him or her in developing, directing, and monitoring the assistant's activities. Teachers' assistants should have sufficient training and understanding of visual impairments for the duties they are

E.9 VISUAL IMPAIRMENTS

assigned, and be able to demonstrate an understanding of the social, emotional and educational implications of vision loss.

Teachers' assistants working with braille-using students should either have, or be working in a timely manner toward completion of, a braille transcribing course (see Appendix H.2.4 Braille Instructional Program (PRCVI)).

Braillists

Districts enrolling braille-using students will need to obtain braille transcription services for tests, examinations and teacher-made materials. A staff braillist should be available to provide these transcription services.

Information about personnel training for braille is available through the Provincial Resource Centre for the Visually Impaired or PRCVI.

Resources

Provincial Resource Centre for the Visually Impaired - SET-BC

School districts may borrow learning resources, reference materials and equipment for the use of students with visual impairments from the Provincial Resource Centre for the Visually Impaired (PRCVI) and Special Education Technology-British Columbia (SET-BC).

E.10 DEAF OR HARD OF HEARING

E.10 Deaf or Hard of Hearing

Definition

A student considered to be deaf or hard of hearing is one who has a medically diagnosed hearing loss that results in a substantial educational difficulty

A student who is deaf or hard of hearing has an audiological assessment by an audiologist that affirms a bilateral hearing loss, a unilateral loss with significant speech/language delay, or a cochlear implant.

Students with a diagnosis of central auditory processing dysfunction are not considered for this category unless there is an additional diagnosis of peripheral hearing loss.

For information pertaining to students who are deafblind, see page 66

To be eligible for supplemental funding as a student who is deaf or hard of hearing, the following conditions must be met:

- A medical diagnosis of a significant hearing loss has been made; and
- A current IEP is in place that includes:
 - individualized goals with measurable objectives,
 - adaptations and/or modifications where appropriate,
 - the strategies to meet these goals, and
 - measures for tracking student achievement in relation to the goals.
- The student is receiving special education services that are directly related to the student's hearing loss on a regular basis from a qualified teacher of the deaf and hard of hearing.
- For students with unilateral hearing loss, there must be significant hearing loss in the affected ear and an annual assessment of impact must be documented.
- Those with a cochlear implantation are receiving services on a regular basis from a qualified education professional with special training.
- The services being provided are beyond those offered to the general student population and are proportionate to level of need(s).
- The special education services are outlined in the IEP and directly relate to the student's identified special needs.
- Reduction in class size is not by itself a sufficient service to meet the definition.

In general, the support needs of students with unilateral hearing loss can be managed by classroom adaptations. A student with a unilateral hearing loss should not be reported for funding unless the hearing loss is moderate to profound (the affected ear has a pure tone average loss of 50 dB or greater for the frequencies 500 Hz to 4000 Hz) and there is evidence of support from a qualified education professional.

A student with educationally significant problems, which are directly attributable to the unilateral hearing loss, may only be reported in this category if qualified

E.10 DEAF OR HARD OF HEARING

personnel conduct an assessment annually to provide evidence that the hearing loss seriously impacts the student's education. The assessment typically includes audiology, speech language, communication, and/or social skills development.

Identification and Assessment

Most children with significant hearing loss will have been identified through an audiological assessment prior to entering the school system.

Any student referred for special education services during his or her school career should be referred for a hearing assessment in order to determine whether an intermittent or chronic hearing loss is the primary cause of any exhibited learning or behavioural problem.

Hearing loss is generally measured in terms of decibel loss using standards agreed on internationally. However, decibel losses do not always correlate with educational implications and are therefore not a sole criterion for determination of need for educational intervention. Following the identification of a student's hearing loss an assessment to determine the strengths and weaknesses of the student in the areas of language development and communication skills may be required. This assessment, usually administered by a teacher of the deaf and hard of hearing, may include the administration of standardized tests in the areas of ability and achievement, as well as curriculum-based assessment and observation and teacher reports. Program planning decisions and recommendations for placement of the student in a specific program should occur only once a full assessment has been completed.

A critical part of the assessment process is determining the method of communication to be used in the educational setting. The Ministry of Healthy Living and Sport and Ministry of Health will select assistive living equipment from a set list of available equipment. The Ministry of Education, through the Auditory Outreach Program, is responsible for maintaining this list and making it available to the health authority audiologist for selection.

Ministry of Healthy Living and Sport and Ministry of Health will provide hearing aid selection, fitting, verification and monitoring services. Ministry of Education, through its boards of education and participating independent school authorities may monitor remote microphone hearing assistance technology in accordance with best practices on the Board of Hearing Aid Dealers.

Planning and Implementation

The educational programs for students who are deaf or hard of hearing typically include specific instruction in:

- language development, auditory management;
- speech development, speech reading;
- sign language as required; and
- deaf culture when appropriate.

E.10 DEAF OR HARD OF HEARING

In addition to addressing the direct effects of hearing loss and language development, the IEP should address the social and vocational needs which arise as a result of the hearing loss and which are known to be significant.

Most students who are deaf or hard of hearing can and should be educated in their local school district. Typically, programming for students with hearing loss involves one or more of the following services:

- a regular class with direct, frequent support from a qualified itinerant teacher of the deaf and hard of hearing;
- a resource room staffed by a teacher of the deaf and hard of hearing;
- a self-contained class staffed by a teacher of the deaf and hard of hearing who has access to the appropriate support services; and/or
- an individual program for students with hearing loss and additional special needs.

The prevalence of hearing loss is low. Therefore, the provision of a full range of services within a single school district is not always feasible. In such cases, school districts are encouraged to collaborate to provide regional programs that serve the needs of students in several districts. In particular, the social and emotional needs of adolescent students who are deaf or hard of hearing may require more than itinerant services.

Where there are a sufficient number of students, local or regional school programs may be developed with qualified staff and the appropriate services to support those who are deaf and hard of hearing.

Further to the above options, when the needs of a particular deaf or hard of hearing student cannot first be met locally or regionally, or where special circumstances prevail, the student may be referred to the Provincial Educational Review Committee for Deaf and Hard of Hearing students for

- recommendations for programming; and/or
- determination of eligibility for Provincial Resource Programs designed for students with hearing loss.

Evaluation and Reporting

School districts are responsible for developing clearly defined policies and procedures which include a mechanism for:

- assessing the effectiveness of local programs for deaf and hard of hearing students;
- monitoring the educational program of a student placed in a regional or provincial setting to ensure continued appropriateness; and
- evaluating student progress specific to the additional service provided by a teacher of the deaf and hard of hearing.

E.10 DEAF OR HARD OF HEARING

- Such evaluation may result in adjustment of communication methodology, recommendations for either additional or reduced service, recommendation for alternate placement, etc.

It is expected that students who are deaf or hard of hearing will follow the regular evaluation and reporting procedures of the district. Specific comments regarding progress in the areas of language development and communication skill, as well as other areas identified on the IEP, should be included in the report.

Personnel

Teachers of the deaf and hard of hearing

Specialist teachers with responsibilities for supporting students reported in this category should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

A specialist teacher of the deaf and hard of hearing should have:

- a valid B.C. Teaching Certificate; *and*
- a Master's degree or diploma in the education of the deaf and hard of hearing; *or*
- certification by the Canadian Association of Educators of the Deaf and Hard of Hearing (CAEDHH).

Where a district is unable to employ a specialist teacher of the deaf and hard of hearing, this requirement may be met by providing services through sharing arrangements with adjacent districts or through a fee-for-service arrangement with qualified specialist teachers of the deaf and hard of hearing.

Visual language interpreters

Where a district determines that a student's program will include the services of a visual language interpreter, often referred to as an interpreter or sign language interpreter, the visual language interpreter should meet standards established by:

- the Registry of Interpreters of the Deaf, Inc. (R.I.D.), or
- the Association of Visual Language Instructors of Canada (AVLIC);
- or be a graduate of the Douglas College Visual Language Interpreter Training Program or an equivalent program from another institution.

Supporting cochlear implant recipients

School boards should ensure that specialist educators have appropriate qualifications to support students who need services after they have had surgery for cochlear implantation.

E.10 DEAF OR HARD OF HEARING

Teachers' assistants

Teachers' assistants working with students who are deaf or hard of hearing should have sufficient training and understanding of hearing loss for the duties they are assigned. Teachers' assistants should be able to demonstrate:

- an understanding of the social, emotional and educational implications of hearing loss; and
- competence in the communication mode of the student(s).

Where the role of the teacher assistant is to facilitate communication between the student and others in the environment the district should ensure the teacher assistant can demonstrate proficiency in the communication mode of the student. In instances where sign communication and/or oral interpretation is required and the individual is not a qualified interpreter, districts are advised to arrange for qualified interpreters to evaluate the communication competency of the teacher assistant.

Resources

Provincial Education Review Committee for Deaf Students

The Provincial Education Review Committee for Deaf Students (PERCD) is a ministry-appointed body which may, upon the request of a district:

- advise a district regarding the educational needs of a student who is deaf or hard of hearing;
- determine eligibility for admission to any of the Provincial Resource Programs for Deaf and Hard of Hearing Students; and
- recommend to the school district a specific Provincial Resource Program that best meets the educational needs of the student.

Auditory Training Equipment

School boards determine whether students who have a hearing loss need auditory training equipment for classroom use. The Ministry of Education makes auditory training equipment available to school districts for the use of deaf and hard of hearing students in public and independent schools and provides for routine maintenance. See Appendix H.2.1 Auditory Outreach Provincial Outreach Program.

Provincial Outreach Program

The Provincial Outreach Program for Deaf or Hard of Hearing Students is available to provide consultative and support services to school districts. See Appendix H.2.6 Provincial Outreach Program for Deaf and Hard of Hearing.

Resource Centre

A resource centre for deaf, hard of hearing and speech materials has been established as part of the outreach program of the Provincial School for the Deaf to permit teachers of the deaf and hard of hearing and other district personnel to

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

E.10 DEAF OR HARD OF HEARING

review recent professional publications, assessment tools and media materials. See Appendix H.2.6 Provincial Outreach Program for Deaf and Hard of Hearing.

E.11 AUTISM SPECTRUM DISORDER

E.11 Autism Spectrum Disorder

Definition

Autism Spectrum Disorder (ASD) is a term used to describe a group of lifelong neurodevelopmental disabilities characterized by the manifestation of behavioural characteristics across multiple areas of functioning. ASD is defined and diagnosed through the observation of behaviours. Characteristics are observed, in varying degrees, in social relationships, communicative competence, pattern and range of interests, and sensory responsiveness. The impact of ASD can range from mild to severe, and may improve or change across an individual's life. Students with ASD exhibit impairments in:

- communication;
- reciprocal social interaction; and
- restricted repetitive patterns of interests and behaviours.

The Ministry of Education uses the definition of ASD as defined in the *Standards and Guidelines for the Assessment and Diagnosis of Young Children with Autism Spectrum Disorder in British Columbia*, produced by the Ministry of Health. ASD includes all of the following *DSM-1V* and *ICD-10* categories:

- Autistic Disorder
- PDD-NOS/Atypical Autism
- Asperger Disorder/Syndrome
- Rett Syndrome
- Childhood Disintegrative Disorder

To be eligible for supplemental funding, the following conditions must be met:

- a diagnosis of ASD must have been made by appropriately qualified professionals (See Identification and Assessment section for further information);
- the ASD must adversely affect educational performance;
- a current IEP is in place that includes:
 - individualized goals with measurable objectives,
 - adaptations and/or modifications where appropriate,
 - the strategies to meet these goals, and
 - measures for tracking student achievement in relation to the goals;
- Ongoing special education service(s) are provided;
- the services being provided are beyond those offered to the general student population and are proportionate to level of need(s);
- the special education services are outlined in the IEP and directly relate to the student's identified special needs; and
- reduction in class size is not by itself a sufficient service to meet the definition.

E.11 AUTISM SPECTRUM DISORDER

Identification and Assessment

On January 1, 2004, the Province introduced *Standards and Guidelines for the Assessment and Diagnosis of Young Children with Autism Spectrum Disorder in British Columbia*, that govern the identification and assessment of students **under the age of six** for a diagnosis of autism. The Ministry of Education adopted these Standards.

The Standards require that a clinical diagnostic assessment, undertaken after January 1, 2004 must be conducted by a qualified specialist (registered psychologist, paediatrician, neurologist or psychiatrist) with broad experience in diagnosing children with autism and developmental disabilities. The assessment must include and integrate information from multiple sources and various professions from different disciplines. Assessment must include psychological assessment of cognitive level and adaptive functioning using standardized norm-referenced instruments; a comprehensive speech-language-communication evaluation using standardized norm-referenced instruments; and a comprehensive medical evaluation by a paediatrician including a detailed physical exam and appropriate laboratory investigations. Additional assessments may include occupational therapy assessment, psychiatric assessment or other specialty assessment as indicated.

*For more information, please refer to the Standards, which can be viewed at:
<http://www.phsa.ca/HealthPro/Autism/default.htm>

For all children and youth diagnosed on or after establishment of provincial guidelines on Jan. 1, 2004 a confirmed BC Autism Assessment Network (BCAAN) Clinical Diagnostic Assessment report documenting diagnosis of ASD should be accepted without further review.

For students with a documented diagnosis of ASD form other than BCAAN, who were **under the age of six** at the date of diagnosis, documentation should be reviewed in terms of meeting the Standards and Guidelines criteria:

A. Components of the Clinical Diagnostic Assessment
<ul style="list-style-type: none">• History from multiple sources• Mental status examination• Evaluation of developmental level• Review of community records and prior assessments• Consultation with other disciplines
B. Clinical History
<ul style="list-style-type: none">• History guided by use of a standardized ASD diagnostic interview with the primary caregiver(s) (ADI-R).• Documentation of use of appropriate tool as well as details of data that the tool generated.

E.11 AUTISM SPECTRUM DISORDER

C. Clinical Observation
<ul style="list-style-type: none">• Administration of a standardized ASD diagnostic observation of the patient (ADOS).• Documentation of use of appropriate tool as well as details of data that the tool generated.
D Supplemental/Prior Assessments Required
<ul style="list-style-type: none">• Paediatrics• Psychology• Speech and Language Pathology

For students with a documented diagnosis of ASD from other than BCAAN, who were **over the age of six** at the date of diagnosis, documentation should be reviewed in terms of meeting the following criteria:

A. Components of the Clinical Diagnostic Assessment
<ul style="list-style-type: none">• Mental Health Review (including history and mental status examination)• Evaluation of developmental level• Review of community records and prior assessments
B. Clinical History
<ul style="list-style-type: none">• History guided by use of a standardized ASD diagnostic interview with the primary caregivers (ADI-R).• Documentation of use of appropriate tool as well as details of data that the tool generated.
C. Clinical Observation
<ul style="list-style-type: none">• Administration of a standardized ASD diagnostic observation of the patient (ADOS).• Documentation of use of appropriate tool as well as details of data that the tool generated.

For all children and youth with a documented diagnosis of ASD from another province in Canada who have moved to British Columbia, a confirmation of diagnosis of ASD by a qualified BC specialist should be accepted, provided the confirmation of diagnosis includes a copy of the original assessment and diagnostic report(s). Qualified specialists include paediatricians, psychiatrists, and registered psychologists with broad experience in diagnosing children with autism and developmental disabilities.

"Grandfathering provisions"

Students of any age who were identified by school boards in the Autism category in the 2005/06 school year will remain eligible for continued placement in this category, provided a previous documented diagnosis of ASD was made by an appropriately qualified professional, a current IEP remains in place and the student continues to receive ongoing special education services. Such students will be "grandfathered" on the basis that they were identified in the autism category at 2005/06, consistent with Ministry of Education requirements for that school year. All students with a documented diagnosis of ASD made by a qualified professional (registered

E.11 AUTISM SPECTRUM DISORDER

psychologist, pediatrician, neurologist or psychiatrist) prior to Jan. 1, 2004 should be deemed eligible.

Planning and Implementation

Individualized goals of each student's education program must be documented in a timely manner in a current IEP. Taking individual needs into account, goals for students with ASD should usually address:

- socially adaptive behaviours and social responsiveness;
- motor development;
- communicative competence; and
- academic performance.

Many children with ASD receive services from other agencies. School personnel should work co-operatively with other agency staff to create services that are as integrated as possible.

Education programs for students with ASD may take place in a regular classroom, but this does not preclude the use of different learning environments such as small group instruction in a resource room, self-contained classes or other specialized settings. The goal of placement should be to meet the student's educational needs.

Career exploration, job skills training and work experience should be an integral part of the secondary school experience for students with ASD.

Procedures and timelines for reviewing intended instructional outcomes should be clearly noted in each student's IEP. The IEP must be reviewed at least once a year.

Evaluation and Reporting

It is expected that districts and schools will include students with ASD in regular evaluations and reporting. Reports of student progress should be based on the goals, strategies, and outcomes outlined in the IEP. When extensive program modifications are required, evaluation should be based on the degree to which the individual goals are achieved.

IEPs should identify any adaptation of student assessment procedures that are required to provide a fair appraisal of the knowledge and skills a student with ASD has acquired. (See: Appendix H.10 Relevant Governing Legislation: School Act – Ministerial Orders for more information about evaluation and reporting).

Reviews of student progress should involve the student, if appropriate, and the parents or guardians. They should determine whether the pre-established goals are being attained, and should identify any adjustments to the instructional program.

Personnel

Specialist staff

Specialist teachers with responsibilities for supporting students reported in this category should fulfill the qualifications described for Learning Assistance teacher (see Section D.1 Learning Assistance Services).

Specialist teachers working with students with ASD should have or acquire skills and training in behaviour management and skill development in social interaction, verbal and non-verbal communication, and social skills. As well, specialist teachers should display those skills necessary to plan, develop, implement, and evaluate functional and realistic individual programs.

These specialist teachers should also have competence in consulting with agencies providing community services, establishing transdisciplinary teams for collaborative planning, and in supervising/co-coordinating the work of teachers' assistants and other relevant personnel.

The need for specialist support personnel for students with ASD varies, depending on the student's situation. Where district support services are required, such as psycho-educational assessment/intervention or speech-language pathology, students with ASD should be granted equitable access to this assistance. Where specialized community services are being provided, collaborative planning among the specialists is recommended.

Teachers' assistants

Teachers' assistants who work in classrooms with students with ASD should have sufficient skills and training for the duties they are assigned, including:

- observing and gathering data about behaviour;
- shaping appropriate behaviour using behavioural techniques;
- stimulating communication;
- developing skills for independent living; and
- facilitating peer interaction and relationships.

Teachers' assistants work under the direction of a teacher and the general supervision of a teacher or school principal. Inservice training should include opportunities to further develop key skills.

Resources

The Provincial Outreach Program for Autism & Related Disorders (POPARD) outreach program is available to provide assessment and consulting services to school district personnel. Persons interested in finding out about these services to school personnel should make their inquiries through the appropriate local district contact, or via the Internet at: www.autismoutreach.ca

E.11 AUTISM SPECTRUM DISORDER

Autism Spectrum Disorder Standards (for children under 6):

The Practice Standards require that a clinical diagnostic assessment must be conducted by a qualified psychologist, paediatrician, or child psychiatrist with broad experience in diagnosing children with autism and developmental disabilities. The diagnosis of ASD is clinical, based on the most current criteria in the DSM or ICD (presently DSM-IV-TR and ICD-10). The assessment must include and integrate information from multiple sources and various professionals from different disciplines. Integration of results from multi-disciplinary assessments is necessary and essential. Final synthesis of the information and the decision regarding the appropriate diagnosis needs to be taken by an individual who has been trained to weigh the evidence, integrate the findings, and deal with the issues regarding differential diagnosis. The clinical diagnostic assessment of a child with suspected ASD should include the following components:

- History from multiple sources, including interview(s) with the caregiver and other involved professionals;
- Consultation with professionals from other disciplines;
- An evaluation of developmental level based on history and examination, or formal measure;
- A standardized ASD diagnostic interview with the primary caregiver(s) with at least moderate sensitivity and specificity for ASD; and,
- A standardized observation of social and communicative behaviour and play.

Assessment must include psychological assessment of cognitive level and adaptive functioning using standardized norm-referenced instructions; a comprehensive speech-language-communication evaluation using standardized norm-referenced instruments; and a comprehensive medical evaluation by a paediatrician including a detailed physical exam and appropriate laboratory investigations. Additional assessments may include occupational therapy assessment, psychiatric assessment or other specialty assessment as indicated. For more information, please refer to the Standards, which can be viewed at:

http://www.healthplanning.gov.bc.ca/cpa/publications/asd_standards_0318.pdf

Autism Spectrum Disorder Standards (for children over 6):

Autism Spectrum Disorder Practice Standards for children and youth over the age of 6 are currently under development by BC Autism Assessment Network and will be posted on this site once developed.

F. PROVINCIAL RESOURCE PROGRAM

F. Provincial Resource Programs

"Provincial resource program" means a program established by order of the minister and operated by a board or a francophone education authority (School Act, section 1(1)).

F.1 Provincial Resource Programs- PRPs

In addition to the regular block of funds allocated to school districts for the provision of public education, the Province also funds a group of education alternatives known as Provincial Resource Programs (PRPs). These programs are intended to assist districts to meet the educational needs of students in exceptional circumstances.

PRPs are operated by host school districts and are located throughout the province to serve approximately 10,000 school-aged individuals. Some of these programs are operated in co-operation with other provincial ministries, including the Ministry of Children and Family Development and the Ministry of Health. PRPs enable students to continue learning while in hospitals, treatment centres or containment centres. Other PRP facilities provide specific services for students with special needs throughout the province, either on an outreach basis or within a provincial centre.

Each year, the Ministry of Education establishes a budget for the operation of PRPs. Districts submit their proposed budgets for the coming school year, including anticipated operating expenditures. A PRP review committee comprising ministry staff considers all budget requests submitted by school boards, on an individual program basis.

Ministry policy for the approval of Provincial Resource Programs is governed by the *School Act*, section 168 (2)(f): The minister may make an order "establishing and causing to be operated Provincial Resource Programs and Provincial Schools in British Columbia and providing in them specialized types of education."

F.2 Eligibility for PRP Status

Educational programs that may be eligible for designation as a Provincial Resource Program are:

Youth Custody Centres and Residential Attendance Centre Programs operated or contracted by other ministries which provide educational programs for youth 19 years of age or younger, and which have been established in accordance with the current protocol agreements signed between the Ministry of Education and the Ministry of Children and Family Development.

Residential Programs for the treatment and/or rehabilitation of children and youth of school age which include an educational program and which have been established with the mutual agreement of the social service ministries and the Ministry of Education in accordance with current protocol agreements.

F. PROVINCIAL RESOURCE PROGRAM

Educational Programs located in hospitals where the majority of students are not ordinarily resident in the school district in which the hospital is located and where the program has been established in accordance with current protocol agreements.

Special Education Technology Centres and provincial outreach services designated by the minister for the purpose of providing support services to school districts to assist them in meeting the needs of students who are technology dependent, have physical disabilities or are visually impaired, beyond what a district can provide.

Unique programs designated by the minister for exceptionally low-incidence or other targeted populations, when it has been demonstrated that the number of such students is so low and the nature of the special needs so severe as to preclude the operation of a suitable program in most school districts. The majority of students in such programs may not be residents of the host district.

School districts may apply to the minister to have a program designated as a PRP if it meets any of the above criteria and the majority of students in the program would not normally be residents of the district.

F.3 Procedures for Designation as a PRP

For a program to be designated under section 168 (2) (f) of the School Act as a Provincial Resource Program, and in order to be funded, the following is required:

1. A board seeking to operate a Provincial Resource Program must (a) apply in writing to the minister, providing all information required by the minister; (b) submit to the minister a proposed budget in an approved form; and (c) provide the minister with a written copy of the criteria for admission of students to the program.
2. A board seeking to renew a designation of a program as a Provincial Resource Program must comply with sub-sections (a), (b), and (c) of section 1 above.
3. The minister will review an application by a board for the designation or the renewal of designation of a program as a Provincial Resource Program and may approve or not approve the application as submitted.
4. Unless the minister orders otherwise, the designation of a program as a Provincial Resource Program will be for one year only.
5. Grants paid to a board for the operation of a Provincial Resource Program must be accounted for as trust funds and must be included in the audited financial statements of the board.
6. The minister may cancel the designation of a program as a Provincial Resource Program at any time if the board operating the Provincial Resource Program fails to admit students in accordance with the written criteria submitted by the board pursuant to section 1(c) above or fails to meet the standards for services articulated in annual agreements with the Ministry.

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

F. PROVINCIAL RESOURCE PROGRAM

F.4 List of Programs

Provincial Resource/Outreach Programs	Host School District
Camp Trapping. Educational program for students in MCFD residential attendance program. http://www.sd57.bc.ca	No. 57 (Prince George)
Headstart. Educational program for students in MCFD custody program. http://www.sd72.bc.ca	No. 72 (Campbell River)
'Am'mut Program. Educational program for aboriginal youth enrolled in addictions treatment program.	No. 33 (Chilliwack)
Fraser Park Secondary (Open) School Program. Educational program for students in MCFD custody program.	No. 41 (Burnaby)
Fraser Park Secondary (Secure) School Program. Educational program for students in MCFD custody program.	No. 41 (Burnaby)
Prince George Youth Custody Centre School Program. Educational program for students in MCFD custody program. http://www.sd57.bc.ca	No. 57 (Prince George)
Victoria Youth Custody Centre School Program. Educational program for students in MCFD custody program. www.sd61.bc.ca	No. 61 (Greater Victoria)
Oasis/Woodside School Program. For students in MCFD attendance program. www.sd72.bc.ca	No. 72 (Campbell River)
Transition Program for Gifted Students. Educational program for academically gifted students. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
PRP for Deaf and Hard of Hearing (Mountain Secondary). Program for secondary students with severe/profound hearing loss. Located in Mountain Secondary School. http://www.sd35.bc.ca	No. 35 (Langley)
BC Provincial School for the Deaf. Educational program for students who are deaf or hard of hearing in an ASL environment, with consultation and support services to school districts. http://sd41.bc.ca	No. 41 (Burnaby)
Provincial Oral Program for the Deaf and Hard of Hearing. Education program for secondary students who are deaf or hard of hearing and require an oral program. http://www.sd41.bc.ca/programs/provincial_oral_program.htm	No. 41 (Burnaby)
POPARD - Provincial Outreach Program for Autism and Related Disorders. Provides consultation, training, and ongoing support to schools to meet the special needs of students with autism spectrum disorder. http://www.autismoutreach.ca	No. 37 (Delta)
Provincial Outreach for Deafblindness. Consultation, training and ongoing support to school districts, including suggestions for IEP development, for students who are Deafblind. http://public.sd38.bc.ca/DeafblindWeb/	No. 38 (Richmond)

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

F. PROVINCIAL RESOURCE PROGRAM

Provincial Outreach Program for Deaf & Hard of Hearing. Provides consultation, training, and ongoing support to schools to meet the special needs of students who are Deaf. http://www.sd41.bc.ca/programs/provincial_outreach_program.htm	No. 41 (Burnaby)
Provincial Outreach for Cochlear Implants & Auditory Training Program. Consultation, training and ongoing support to schools to meet the special needs of students with cochlear implants and ATE needs. http://www.sd47.bc.ca/auditoryoutreach/Pages/default.aspx	No. 47 (Powell River)
Provincial Outreach for Students with Fetal Alcohol Spectrum Disorder. Provides consultation, training, and ongoing support to schools to meet the special needs of students with fetal alcohol spectrum disorder. http://www.fasdoutreach.ca	No. 57 (Prince George)
PISP - Provincial Integration Support Program. Provides support to school teams in the inclusion of students with sever/profound multiple physical and cognitive disabilities. http://www.pisp.ca/	No. 61 (Greater Victoria)
Adolescent Day Treatment School Program. For adolescents attending the mental health day treatment program. Located at Surrey Memorial Hospital. www.sd36.bc.ca	No. 36 (Surrey)
Adolescent Psychiatric Unit. Educational program for students attending the psychiatric residential program at Surrey Memorial Hospital. www.sd36.bc.ca	No. 36 (Surrey)
BC Children's Hospital Eating Disorders In-Patient Program. Educational program for adolescents attending day treatment program at BC Children's Hospital. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
Simon Fraser Youth Day Treatment School Program. For adolescents attending the mental health day treatment program at Eagle Ridge Hospital.	No. 43 (Coquitlam)
Victoria General Hospital School Program. For students who are admitted to VGH. www.sd61.bc.ca	No. 61 (Greater Victoria)
BC Children's Hospital School Program. Providing an educational program to inpatients, siblings of inpatients, outpatients attending clinic. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
BCCH - Child Psychiatric School Program. For elementary students attending residential psychiatric program. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
BCCH - Adolescent Psychiatric Assessment Unit School Program. For adolescents attending psychiatric program. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
Maples Student Assessment School Program. Educational assessment, consultation and planning support for students who require intensive behaviour interventions, and transition planning with their community schools. http://sd41.bc.ca	No. 41 (Burnaby)
Maples Regular School Program. Individualized education programs for those with behavioural needs attending Maples Adolescent Centre. http://sd41.bc.ca	No. 41 (Burnaby)
Interior Health Adolescent Psychiatry Unit School Program. For adolescents attending psychiatric program at Kelowna General Hospital.	No. 23 (Central Okanagan)
Prince George Regional Hospital Program. For adolescents attending day treatment programs at PGRH. http://www.sd57.bc.ca	No. 57 (Prince George)

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

F. PROVINCIAL RESOURCE PROGRAM

Ledger School Program. Educational assessment, consultation and planning support for students who require intensive behaviour interventions, and their community schools which may need transition planning support. http://www.sd61.bc.ca	No. 61 (Greater Victoria)
Nenqayni Wellness Centre School Program. For adolescents enrolled in addictions treatment program.	No. 27 (Cariboo Chilcotin)
Daughters & Sisters School Program. Educational program for adolescents enrolled in addictions treatment program.	No. 36 (Surrey)
Waypoint School Program. Educational program for adolescents enrolled in addictions treatment program.	No. 36 (Surrey)
Peak House School Program. For adolescents enrolled in addictions treatment program. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
Kackaamin Family Development Centre School Program. For adolescents enrolled in addictions treatment program.	No. 70 (Alberni)
GF Strong Rehabilitation Centre School Program. Providing an educational program to those with cognitive impairments while participating in rehabilitation at G.F. Strong. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
Sunnyhill Hospital School Program. Transition planning program for students with brain injury, and students who are dependent, medically fragile. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
Canuck Place School Program. Education for terminally ill children and their siblings when they are no longer able to be at home. http://www.vsb.bc.ca/programs	No. 39 (Vancouver)
PRCVI – Provincial Resource Centre for the Visually Impaired. Information, training and consultation to support school districts in meeting the needs of students with visual impairments. http://www.prcvi.org	No. 39 (Vancouver)
Abbotsford Regional Hospital Adolescent Psychiatric Unit School Program. For adolescents attending psychiatric program at Abbotsford Regional Hospital.	No. 34 (Abbotsford)
Provincial Outreach Program for Early Intervention. Consultation, training and ongoing support to schools to meet the special needs of students with learning disabilities.	No. 38 (Richmond)
SET-BC - Special Education Technology - BC (Provincial Centre). Providing provincial co-ordination and support for all programs, services and resources offered by SET-BC. http://www.setbc.org	No. 39 (Vancouver)
SET-BC - Special Education Technology - BC (Vision Services). A provincial service providing technology, technical assistance and training to school district's supporting students with visual impairments. http://www.setbc.org/contacts/default.html	No. 39 (Vancouver)
SET-BC - Special Education Technology - BC (Region One). Provides technology, technical assistance, equipment loan, training and resources to school/district's supporting eligible students. http://www.setbc.org/contacts/default.html	No. 61 (Greater Victoria)
SET-BC - Special Education Technology - BC (Region Two). Provides technology, technical assistance, equipment loan, training and resources to school/district personnel supporting students. http://www.setbc.org/contacts/default.html	No. 39 (Vancouver)

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

F. PROVINCIAL RESOURCE PROGRAM

SET-BC - Special Education Technology - BC (Region Three). Provides technology, technical assistance, equipment loan, training and resources to school/district's supporting eligible students. http://www.setbc.org/contacts/default.html	No. 22 (Vernon)
SET-BC - Special Education Technology - BC (Region Four). Provides technology, technical assistance, equipment loan, training and resources to school/district personnel supporting students. http://www.setbc.org/contacts/default.html	No. 6 (Rocky Mountain)
SET-BC - Special Education Technology - BC (Region Five). Provides technology, technical assistance, equipment loan, training and resources to school/district's supporting eligible students. http://www.setbc.org/contacts/default.html	No. 57 (Prince George)
SET-BC - Special Education Technology - BC (Region Six). Provides technology, technical assistance, equipment loan, training and resources to school/district's supporting eligible students. http://www.setbc.org/contacts/default.html	No. 52 (Prince Rupert)
SET-BC - Special Education Technology - BC (Region Seven). Provides technology, technical assistance, equipment loan, training and resources to school/district's supporting eligible students. http://www.setbc.org/contacts/default.html	No. 59 (Peace River South)

G. QUICK REFERENCE – INTERNET RESOURCES

G. Quick Reference - Internet Resources

G.1	<u>Accessible School Facilities Planning</u>
G.2	Access to Equipment & Technology: <ul style="list-style-type: none"> • <u>Auditory Training Equipment (ATE) & Cochlear Implant Supp</u> • <u>Provincial Resource Centre for the Visually Impaired (PRCVI)</u> • <u>Special Education Technology-BC (SET-BC)</u>
G.3	<u>Adjudication: Provincial Examinations</u>
G.4	<u>Appeals</u> <u>Resolution of Conflicts</u>
G.5	<u>Braille Instructional Program (PRCVI)</u>
G.6	<u>Child Abuse Prevention</u>
G.7	<u>Classification of Educational and Psychological Tests - Information Standards</u> – APA (American Psychological Association): <ul style="list-style-type: none"> • <u>www.apa.org/science/standards.html#overview</u> • <u>www.apa.org/science/testing.htm</u>
G.8	<u>Deaf or Hard of Hearing Programs</u>
G.9	<u>Distributed Learning for Students with Special Needs</u>
G.10	<u>Full Day Kindergarten (Reference: Form 1701 Instructions, p. 6)</u>
G.11	<u>Funding Special Education Programs</u>
G.12	<u>Graduation Requirements</u>
G.13	Health and Safety Information: <ul style="list-style-type: none"> • <u>Infectious Disease, Health Act</u> • <u>Needle Stick Injury Information</u> • <u>Universal Precautions</u> • <u>Blood and Body Fluids</u>
G.14	<u>Independent Schools and Students with Special Needs</u>
G.15	<u>In-School Nursing Support Services</u> <u>Support for Students with Special Needs</u>
G.16	<u>Integrated Case Management Information</u>
G.17	Resources for Learning Resource Documents - Special Education, Diversity, ESL, etc. <ul style="list-style-type: none"> • <u>www.bced.gov.bc.ca/specialed</u> • <u>www.bced.gov.bc.ca/diversity</u> • <u>www.bced.gov.bc.ca/esl</u>
G.18	Relevant Governing Legislation: <ul style="list-style-type: none"> • <u>School Act</u> • <u>Ministerial Orders</u>
G.19	Student Records: <ul style="list-style-type: none"> • <u>Examination of Records</u> • <u>Maintenance of Records</u>
G.20	<u>Freedom of Information and Protection of Privacy</u>
G.21	Summary Policy Documents: <ul style="list-style-type: none"> • <u>Distributed Learning</u> • <u>Funding Special Needs Policy</u> • <u>Special Education Policy</u>

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

G. QUICK REFERENCE – INTERNET RESOURCES

G.22	Transition Planning: • <u>Graduation Requirements</u> • <u>Career Development</u>
G.23	<u>Transportation and Housing</u>
G.24	<u>Work Experience</u>

BRITISH COLUMBIA MINISTRY OF EDUCATION

Special Education Services: A Manual of Policies, Procedures and Guidelines

Appendices

H. Appendices

H. Appendices

H.1 Accessible School Facilities Planning

School boards are responsible for providing facilities that allow equality of access to educational programs for students with special educational needs, and should use their annual capital allowance of the block for small renovation projects to make schools accessible. A practical and student-centred approach is to address the facility's needs when new construction or renovations are planned and approved, and to complete those changes to existing buildings that are possible and reasonable as students' needs are identified. This is a long-term planning process that should, wherever possible, anticipate student arrivals and any exceptional facility needs.

The ability of students with special educational needs to access school facilities affects the inclusion of these students in the overall school environment. Planning for those with special needs should ensure that they have access to the school facilities and all aspects of the school program. This access should be as seamless as possible; that is, there should not be an obvious distinction that some feature is only for students with disabilities.

When new construction or renovations to existing spaces are approved, facilities that will meet the requirements of students with special needs should be included in the planning. It is far less costly to design accessibility features at the outset, ensuring that they or an infrastructure are in place, than to retrofit at a later date.

For up to date information and details about *Planning* refer to the Ministry's web pages for "Area Standards"

<http://www.bced.gov.bc.ca/capitalplanning/areastandards.pdf>

H.2 Access to Equipment, Technology & Services

H.2.1 Auditory Outreach Provincial Outreach Program: <http://www.sd47.bc.ca>

Auditory Training Equipment (ATE), often referred to as personal FM systems, and sometimes as Remote Microphone Hearing Assistance Technology is managed by the Auditory Outreach Provincial Resource Program hosted School District No. 47 (Powell River).

Mandate and purpose

Ministerial Order 149/89, the Support Services for Schools Order, states in section 2:

- (1) Each board is responsible for referring any of its students who are hearing impaired to the Ministry of Health for a needs assessment to determine if the student requires auditory training equipment for classroom use.
- (2) On request of a board, the minister shall loan to the board auditory training equipment for each student who has been assessed under subsection (1) as needing the equipment.
- (3) The minister is responsible for routine maintenance of auditory training equipment loaned to a board.

FM Services

Qualified audiologists assess FM equipment needs for use by individual students. Audiologists complete needs assessments, determine equipment required by students, and make referrals from a pre-determined list. Referrals are sent to school districts/ Group1 and 2 independent schools. Once approved by the school districts/ Group1 and 2 independent schools, referrals are forwarded to the Auditory Outreach PRP.

The Auditory Outreach administrator loans the equipment that has been selected from the predetermined list to the school district/ Group1 and 2 independent school for use by an individual student.

Audiologists fit the equipment, adjust it to individual student requirements, and collaborate with school districts/ Group1 and 2 independent schools and the Auditory Outreach PRP to instruct classroom teachers, hearing resource teachers and students on the use and care of the equipment.

The provision of FM services should be aligned with the *Best Practices for the Fitting of Remote Microphone Hearing Assistance Technology to Children in an Educational Setting* standards set by the College of Speech and Hearing Professionals in British Columbia.

Repair and maintenance

The school/district, in consultation with the referring audiologist, is responsible for maintaining the equipment and monitoring the student's needs for FM systems. If

H. Appendices

any problem arises the teacher or principal should contact the hearing resource teacher immediately. If unable to resolve the problem, the hearing resource teacher should contact the local audiology support or Auditory Outreach staff. Equipment in need of more extensive investigation or repair has to be sent to Auditory Outreach Technical Support Centre.

Teachers should review the use and functioning of auditory training equipment on a regular basis. Teachers can request training from the local audiology support or from ATE program staff to be able to do routine checks.

Returns

School districts and independent schools are responsible for the proper care of auditory training equipment on loan to them and for the return of all items when they are no longer required. The equipment remains the property of the B.C. Government (Ministry of Education) and must be returned to the Auditory Outreach Technical Support Centre, if the student leaves the district or no longer requires the equipment.

Liability

Loss or damage of items must be reported immediately to the ATE program administrator. The school/ district is responsible for auditory training equipment on loan to its students and should ensure that all equipment is listed in the school inventory for insurance purposes.

When major (serial-numbered) school-assigned equipment is lost or intentionally damaged beyond use, the school/district will be expected to cover the cost of the replacement.

Schools/districts may elect to loan auditory training equipment to students outside of regular hours of instruction. In those instances districts are advised to develop policies to ensure liability issues are stated.

For current information about ATE procedures, fitting criteria and technical questions please contact:

Director of Auditory Outreach
School District No.47 (Powell River)
Direct phone: (604) 485-6283; toll free: 1-866-430-4327 fax: (604) 485-2886

H.2.2 Cochlear Implantation Support

The Auditory Outreach PRP also provides support for cochlear implantation. Cochlear implants are now accepted as an effective prosthesis for students with severe to profound hearing loss. As a result of increased funding to the two implant centres in the province (St. Paul's Hospital and B.C. Children's Hospital) the total number of school aged children with cochlear implants in British Columbia has changed significantly and so have the demographics and needs of this population. At this time, providing appropriate support for these low incidence students is a challenge for families and for schools/districts, especially those in more remote areas of the province. The Provincial Outreach Program – Cochlear Implants (POP-CI) is available to provide services to B.C. school districts, group 1 and 2 independent schools and families with children who are recipients or candidates for a cochlear implant.

Mandate

The mandate of the Auditory Outreach PRP with respect to cochlear implantation support is to provide consultation to school districts, group 1 and 2 Independent Schools, and where necessary support families in the provision of effective education and oral habilitation programs for students with cochlear implants. The goal for the program is to identify and/or develop capacity to meet the students' needs within their communities and to assist students to maximize the effectiveness of their cochlear implants.

Services Provided

POP-CI staff members have expertise in audiology, speech and language pathology, and education of the deaf and hard of hearing and are available to consult throughout the province. A provincial resource network of speech and language pathologists and hearing resource teachers has been established to address local needs related to assessment and development of the students' auditory and oral language skills. A list-serve and other telecommunication means are used to keep these professionals connected and informed.

Access to Services

A principal, a school/district administrator, an implant centre, a parent or the student if over the age of 18 can initiate request for support from POP-CI. Requests for support should be directed to:

Director of Provincial Programs,
School District No.47 (Powell River)

Direct phone: (604) 485-6283; toll free: 1-866-430-4327 fax: (604) 485-2886

For individuals registered at independent schools or public schools outside of School District No. 47, permission to share information must be obtained from a

H. Appendices

parent/legal guardian, or the student if over the age of 18 before services can be provided. All information collected by School District No. 47 (Powell River) in the process of providing service to students with cochlear implants is subject to school district policy on student records and legislative provisions in effect.

H.2.3 Provincial Resource Centre for the Visually Impaired (PRCVI): <http://www.prcvi.org>

Terms of reference

The Ministry of Education has established a central pool of essential specialized and adapted learning resources which may be borrowed at no cost by school districts and Group 1 and 2 independent schools enrolling students with visual impairment. In addition, PRCVI is able to access resources held in all other educational resource centres for the visually impaired in Canada, through a national interlibrary loan agreement.

It is expected that schools will supply commonly available items, such as minor aids and larger items required by the student. Loan periods are for the duration for which the student requires the resource and the student is enrolled in the school. For information regarding services to students with a print disability, see below (Referrals to PRCVI - Students with a Print Disability).

Services provided by PRCVI

- The loan of alternate format instructional materials (e.g., braille; electronic text; talking and enhanced print versions of provincially recommended learning resources) will be made available as resources and production capacity allow
- Long-term loan of specialized equipment (e.g., braille writers; talking calculators; recorders)
- Short-term loans of professional literature and videos on Visual impairment and deaf blindness to teachers
- Outreach services
- Consultation services on the use and choice of materials and equipment
- In-service training
- Alternate format digital resources and learning resources for students who have been identified as print disabled

Referrals to PRCVI - students with visual impairments

To be eligible for loan services from PRCVI, a student must be certified as visually impaired by an ophthalmologist, optometrist or orthoptist. The requesting school district or independent school must submit a completed "Certification of Eligibility for Vision Resources" to PRCVI to establish eligibility. Services, materials and equipment will only be provided for students for whom PRCVI has an approved copy of the

H. Appendices

"Certification of Eligibility for Vision Resources". Loans are requested by completing the consignment sheet, "Request For Loan of Alternate Format Instructional Materials", and forwarding it to PRCVI. Loans are for the school year and renewals can be requested.

Inquiries should be addressed to:

The Provincial Resource Centre for the Visually Impaired
106 - 1750 West 75th Avenue, Vancouver, B.C. V6P 6G2
Phone: (604) 266-3699 Main Fax: (604) 261-0778; Orders Fax: (604) 269-0495

For a full listing of services for students with visual impairments go to the following website: <http://www.prcvi.org/>

The Vision Services area of the website contains an on-line catalogue of all alternate format materials currently available from PRCVI and is updated on a monthly basis. All order and certification forms can be downloaded from "Forms" and leisure reading lists can be downloaded from "Lists".

Returns

School districts or independent schools are responsible for the proper care and storage of the materials, equipment, packing materials and shipping cartons borrowed, and for the return of all items when they are no longer required. Loss or damage of items must be reported to the PRCVI immediately. The school district or independent school will be assessed the replacement cost of damaged or lost items.

Referrals to PRCVI - students with a print disability

To be eligible for PRCVI print disability services, a student must be certified as print disabled on the appropriate PRCVI form by the School District Superintendent or designate or the designated authority of an independent school. Print disability students are students who, because of a sensory, physical or neural disability, cannot effectively use print materials.

PRCVI maintains both an accessible data base and a production capacity for digital or alternative format alternatives to print based on the BC K-12 curriculum. PRCVI works in consultation and partnership with BC school districts, other alternate format producers, and publishers to provide recommended and requested materials in a timely manner. The materials are available in a range of electronic formats including electronic text, talking books, braille and tactile graphics.

Access to the database is limited to registered users only. Registration is available to those individuals in participating BC school districts and independent schools who are educators supporting students with a perceptual disability who are currently enrolled in a BC public or independent K-12 school.

Copyright regulations require the restriction of the use of these materials to students who are print disabled. It is the responsibility of the ordering agency to ensure compliance with the copyright restrictions. When materials are ordered the student's

H. Appendices

name must be indicated on the purchase order. Copies of audiotapes and e-text will only be provided for students for whom PRCVI has a certificate of eligibility for print disability services. Orders may be sent to the above address.

Detailed information on the various aspects of the database can be found on the following website: http://setbc.org/setbc/curriculum/arc_main.html

H.2.4 Braille Instructional Program (PRCVI)

At the request of the school district, the Ministry of Education, through PRCVI, will fund the course fees for teachers' assistants or other district personnel who provide direct brailling services to students with visual impairment in the public or Group 1 and 2 Independent schools. Due to the nature of braille, it has been found that individuals with a good understanding of English grammar and a tendency to pay close attention to detail are most successful in developing competency in braille.

The Course Information Package and Forms for registration are available at <http://www.prcvi.org/> or call (604) 266-3699.

Students are responsible for the purchase of text books, supplies and certification fees. The required materials can be ordered through PRCVI. If the school district is not able to provide a brailler, then PRCVI will lend the course participant one until the course is completed or for 15 months maximum. The district is then expected to provide their transcribers with the necessary equipment for their position.

Applicants who have been funded previously by the Ministry of Education for the CNIB Braille Course, will not be eligible for new funding if they have dropped out of the course. Applications will be considered only for employees of a school district who will be required by the district to utilize braille on a regular basis.

H.2.5 Special Education Technology-BC (SET-BC): <http://www.setbc.org>

Mandate and purpose

Special Education Technology-British Columbia (SET-BC) is a Provincial Resource Program established to assist school districts and group 1 or 2 independent schools in supporting educational programs of students through the use of technology. School districts receive services for students who demonstrate restricted access to the curriculum primarily due to the following:

- physical disability;
- autism spectrum disorder
- moderate to profound intellectual disability
- and/or visual impairment.

Districts base requests for service on the following criteria:

- how the disability restricts the student's access to the curriculum;

H. Appendices

- the student's current academic/cognitive level;
- educational goals established for the student; and
- the student being enrolled in a public setting.

Services provided by SET-BC

The SET-BC program is implemented through a provincial centre in the Lower Mainland and eight regional centres throughout the province. Staff at eight regional sites assist local school districts in identifying and screening students for SET-BC services. They work with school-based teams to develop collaborative action plans involving the use of technology to meet educational goals, and monitor and follow up students within the region. Regional offices serve as preview and demonstration centres for special education technology and provide training in technology applications for educational purposes.

services provided by the SET-BC program include:

- assistance with the assessment of students' abilities and needs for technology;
- assistance in program planning and transition planning, where technology is used to support learning outcomes;
- equipment loans and technical support of loan equipment; and
- inservice and workshops to train teachers and other staff in the use of the equipment.

Service and Maintenance

Technical difficulties with equipment should be referred to the SET-BC staff in the regional site. When staff in the regions require assistance with technical difficulties, they may forward equipment to the provincial site, which employs technical staff to deal with more complex service and maintenance problems.

Loss or damage of items should be reported immediately. The school district maintains primary responsibility for equipment on loan, and should ensure that it is listed in the school inventory for insurance purposes.

Returns/Transfers/Transitions

Equipment on loan remains the property of SET-BC. Accordingly,

- If the student leaves the province or if the equipment is no longer needed or appropriate, it should be returned to the SET-BC centre from which it was obtained.
- For students in their final year of secondary school who will be continuing their education at a B.C. post-secondary institution or who plan to become clients of Vocational Rehabilitation services after graduation, the school-based team should contact the SET-BC Regional Co-ordinator so that transition planning with SET-BC Adult Services can begin.
- When students are planning to transfer to another school district within the province, the school districts in which they initially reside should contact their SET-BC regional centre to determine standard transfer procedures. Equipment should be

H. Appendices

temporarily returned to SET-BC for transfer and should not be transported by the parents.

SET-BC Regional Centres

Requests for SET-BC service should be directed to the regional site by the SET-BC district contact. Information regarding access to services may be obtained from regional sites located online at:

<http://www.setbc.org/contacts/default.html>

SET BC Provincial Centre
105 – 1750 West 75th Avenue, Vancouver, BC V6P 6G2
Tel: (604) 261-9450; Fax: (604) 261-2256

H.2.6 Provincial Outreach Program for Deaf and Hard of Hearing: <http://www.deafoutreachbc.ca/>

The Provincial Outreach Program for deaf or hard of hearing students is available to provide consultative and support services to school districts. Further information may be obtained from:

Outreach Consultant, Provincial School for the Deaf
5455 Rumble Street, Burnaby, B.C. V5J 2B7
Phone: (604) 664-8560, Fax: (604) 664-8561, TTY: (604) 664-8563

H.2.7 Provincial Outreach Program for Autism and Related Disorders: <http://www.autismoutreach.ca/>

The Provincial Outreach Program for students with autism spectrum disorder is available to provide consultative and support services to school districts. Further information may be obtained from:

Provincial Outreach Program for Autism and Related Disorders
4746 – 57th Street, Delta, B.C. V4K 3C9
Phone: (604) 946-3610, Fax: (604) 946-2956

H.2.8 Provincial Outreach Program for Deafblindness: <http://public.sd38.bc.ca/DeafblindWeb/>

The Provincial Outreach Program for students with deafblindness is available to provide consultative and support services to school districts. Further information may be obtained from:

Provincial Outreach Program for Deafblindness
10300 Seacote Road, Richmond, B.C. V7A 4B2
Phone: (604) 668-7810, Fax: (604) 668-7812

H. Appendices

H.2.9 Provincial Outreach Program for Fetal Alcohol Spectrum Disorder:
<http://www.fasdoutreach.ca/>

The Provincial Outreach Program for students with fetal alcohol spectrum disorder is available to provide consultative and support services to school districts. Further information may be obtained from:

Provincial Outreach Program for Fetal Alcohol Spectrum Disorder
3400 Westwood Drive, Prince George, B.C. V2N 4V7
Phone: (250) 564-6574, Fax: (250) 563-5487

H.2.10 Provincial Integration Support Program: <http://www.pisp.ca/>

The Provincial Integration Support Program for students with severe/profound cognitive and multiple physical disabilities is available to provide consultative and support services to school districts. Further information may be obtained from:

Provincial Integration Support Program
1525 Rowan Street, Victoria, B.C. V8P 1X4
Phone: (250) 595-2088, Fax: (250) 592-5976

H.2.11 Provincial Outreach Program for Early Intervention

The Provincial Outreach for Early Intervention (POEI) is a British Columbia Ministry of Education Provincial Resource Program (PRP) with an outreach focus. The mandate of the program is to increase educators' capacity to provide early intervention for students with learning disabilities. Further information may be obtained from:

Provincial Outreach Program for Early Intervention
Woodward Elementary School
10300 Seacote Road, Richmond, B.C. V7A 3J2
Phone: (604) 668-6093, Fax: (604) 233-0150

H. Appendices

H.3 Adjudication: Provincial Examinations

Adjudication policy is reviewed on a regular basis. Current information is found online in the Handbook of Procedures' chapter about examinations adjudications:

<http://www.bced.gov.bc.ca/exams/adjudication/>

Adjudication is a process to determine the ability to modify the administration of Provincial Examinations. Modifications to the content of the examination papers are not allowed. Adjudication is intended only for students who are able to achieve the intended learning outcomes for the course to be examined. Adjudication is required when the student is unable to write the examinations as they are usually administered due to either predictable (a pre-existing condition or situation) or unpredictable circumstances (an unforeseen situation or condition).

A "Predictable Circumstance" is a situation in which a student who has historically been identified as a special needs student requires adaptation to the administration of the Provincial Examination in order and to demonstrate his or her knowledge or skills on the examination.

An "Unpredictable Circumstance" is an unforeseen event such as an injury, illness or death in the family which adversely affects a student's ability to write a Provincial Examination.

Further information about the adjudication process is available from:

Coordinator, Adjudications
Student Assessment Branch
Ministry of Education
Victoria, BC V8W 9H1
Phone: (250) 387-5011, Fax: (250) 356-8334

References

Handbook of Procedures for the Graduation Program (Student Certification Branch, Ministry of Education)

H. Appendices

H.4 Appeals: Resolution of Conflicts

Under section 11(2) of the *School Act*, if parents are not satisfied with decisions made by school officials that significantly affect the education, health or safety of a student, they may appeal to the local board of education. Every board of education is required to establish, by by-law, a procedure for hearing appeals. The Office of the Superintendent is able to provide information with regards to the local appeal process.

The complete text of the *School Act* can be found at:
<http://www.bced.gov.bc.ca/legislation/schoollaw/>

Once a section 11 appeal to the board of education has been concluded, under section 11.1 of the *School Act*, the board's decision in that appeal may be appealed to a Superintendent of Achievement at the Ministry of Education, if the subject matter falls within the grounds for appeal set out in the appeals regulation. See the appeals regulation at:

http://www.bced.gov.bc.ca/legislation/schoollaw/d/bcreg_024-08.pdf

If you wish to appeal such a decision, please submit to the Registrar, Student Appeals at the Ministry of Education a completed Notice of Appeal and a copy of the board of education's decision in the section 11 appeal. The Notice of Appeal form and information about the appeal process is available on the student appeals website:
<http://www.studentappeals.gov.bc.ca/>

According to the Special Needs Students Order, a board must ensure that a principal, vice principal or director of instruction offers to consult with a parent of a student with special needs regarding the placement of that student in an educational program.

According to the Individual Education Plan Order, a board must offer a parent of the student, and where appropriate, the student the opportunity to be consulted about the preparation of an IEP.

References

School Act: Section 11 "Appeals", Special Needs Students Order, and Individual Education Plan Order.

H. Appendices

H.5 Classification of Educational and Psychological Tests (Levels A-C)

These guidelines relate to the use of psychological tests and the training of persons in testing and assessment practices. The guidelines focus on distinctions among levels of tests and their related restrictions; test user's qualifications and responsibilities; and restrictions for the purchase of tests. The guidelines are a summary of the *B.C. College of Psychologists' Guidelines for Educational and Psychological Testing: A Report of the Educational Policy Advisory Committee (May, 1994)*. The ministry is grateful to the College for the permission to use its document.

Standards for testing are set by the American Psychological Association and Canadian Psychological Association. Revised significantly from the 1985 version, the 1999 *Standards for Educational and Psychological Testing* has more in-depth background material in each chapter, a greater number of standards, and a significantly expanded glossary and index.

Level A Tests

These are tests which can be adequately administered, scored and interpreted with the aid of the manual, a familiarity with the client population, orientation to the kind of setting within which the testing is done, and a general knowledge of measurement principles and of the limitations of test interpretations. This category includes most interest inventories, group or individual, and multiple-choice tests that employ a simple metric as the main avenue of interpretation (e.g., occupational clusters).

Administration of test (Training standards)

No training beyond advanced level course (senior undergraduate or graduate) in testing from an accredited college or university, or equivalent training under the direction of a qualified supervisor or consultant.

Interpretation of test

Minimum Training Standard: no training beyond advanced level course (senior undergraduate or graduate) in testing from an accredited college or university, or equivalent training under the direction of a qualified supervisor or consultant.

Best Practice: minimum standard plus regular consultation for quality assurance with someone who has Level B or Level C training.

Purchaser eligibility

Depends on publisher, but generally no restrictions except that the test must be ordered by the employee of the company directly responsible for administration of the tests or an individual qualified to purchase Level B or Level C tests.

H. Appendices

Level B Tests

These are tests that require specific training for administration, scoring and interpretation. These tests are more complex than Level A tests and require sophisticated understanding of psychometric principles, the traits being measured, the client population and clinical issues involved in the setting within which the testing is done. This category would generally include most individual or group tests of achievement or interest, screening inventories and personnel tests.

Administration of test (Training standards)

Advanced level (senior undergraduate or graduate) course in testing from an accredited college or university, or equivalent training under the direction of a qualified supervisor or consultant. Minimum preparation includes training in psychometric principles (reliability, validity, test construction) and supervised experience in administering, scoring and interpreting tests.

Interpretation of test

Minimum Training Standard: advanced level (senior undergraduate or graduate) course in testing from an accredited college or university, or equivalent training under the direction of a qualified supervisor or consultant including training in psychometric principles (reliability, validity, test construction), and direct supervised experience in administering, scoring and interpreting tests.

Best Practice: minimum standard plus regular consultation/supervision for quality assurance with someone with Level C qualifications.

Purchaser eligibility

These tests are available to individuals meeting the above training standards and to agencies where qualified test users are employed.

Level C Tests

Tests that require advanced (graduate level) training for interpretation in the specific professional field to which the tests apply (e.g., clinical psychology, counselling psychology, school psychology, industrial/organizational psychology). Some of these tests may also require this level of training for competent administration and scoring. These tests are more complex than Level A and B tests. They require an in-depth understanding of psychometric principles, the traits and constructs being measured, the client population, and the clinical issues involved in the setting within which the testing is done. In addition, these tests require a high degree of professional skill and judgement for their interpretation. This group would generally include any aptitude or language or personality or clinical diagnostic test, group or individual.

H. Appendices

Administration of test (Training standards)

In situations where a person qualified to use the test closely and regularly supervises the person administering the test, some of these tests can be administered by someone with a minimum of a bachelor's degree in psychology or a related discipline. Academic or supervised clinical experience must include:

- training in the theoretical constructs underlying the specific test instruments;
- training in the administration, scoring, and interpretation of these instruments;
- training in psychometric principles; and
- direct supervision of administration and (if appropriate) scoring.

Interpretation of Test

Minimum Training Standard: a minimum of a master's degree in psychology or a related discipline and registration as a psychologist, or certification by the provincial school psychologists' association. Academic and supervised clinical experience must include:

- training in the theoretical constructs underlying the specific test instruments;
- training in the administration, scoring, and interpretation of these instruments;
- training in psychometric principles; and
- supervised administration, scoring and interpretation of these instruments.

Best Practice: minimum standard plus ongoing consultation/supervision for quality assurance with someone with Level C qualifications.

Purchaser Eligibility

These tests are restricted to individuals who meet the training standards above and who are members of qualified professional organizations, and to agencies who have Level C qualified test users overseeing the testing program.

H. Appendices

H.6 Distributed Learning for Students with Special Needs

Students wanting to learn any time, any place or at any pace may choose distributed learning. It is an alternative to classroom-based instruction for kindergarten to grade 12 students, which can be delivered using paper-based print material, electronic delivery, face-to-face communication or combinations of these.

To qualify for supplemental funding for those with special needs participating in distributed learning, boards must meet specific requirements documented in the sources below.

Instruction and learning resources should be provided in a format that meets the student's identified needs in accordance with the IEP.

There should be evidence that frequent opportunities are provided for individualized and timely interactions between teachers and students and among students.

Options and requirements for students with special needs participating in distributed learning are found in the following sources:

Distributed Learning Legislation: www.bced.gov.bc.ca/legislation/schoollaw/

Distributed Learning Policy (July 1, 2004):
www.bced.gov.bc.ca/policy/policies/distance_ed.htm

Guidelines for Students with Special Needs taking a Distributed Learning Program:
www.bced.gov.bc.ca/policy/policies/spneed_distance_ed.htm

H. Appendices

H.7 Full Day Kindergarten

As of the 2011/12 school year, Kindergarten will be delivered as a full school day program in public schools in the province. Students with special needs participate in the full day Kindergarten program as any other student.

To ensure continuity when a child has been in a special needs preschool or child development centre program, districts are advised to co-ordinate the entry of the child to school and the planning of the Kindergarten program with programs or services which have been offered in the preschool years.

H. Appendices

H.8 Inter-Ministerial Protocols - Provision of Support Services

Services for school-aged children are supported and/or funded by the Ministries of Children and Family Development, Education, Health Services and Public Safety and Solicitor General, but are delivered through the Ministry of Children and Family Development regions, Boards of Education and independent school authorities, Health Authorities or by local agencies.

At times school-aged children receive services that cross the jurisdiction of more than one Ministry or Ministry-funded service. In these circumstances inter-ministry protocols are required so that services are provided in an accessible, understandable and co-ordinated manner.

Inter-ministry protocols are intended to support and guide the co-ordinated delivery of effective-services to school-aged children by:

- establishing an agreed-upon range of services;
- clarifying the roles and responsibilities;
- establishing a process for the regular review of the protocols; and
- identifying a dispute resolution process.

Some if the Inter-Ministerial Protocols are under review.

Pending revision, the remaining 1989 Protocols are considered "active" until replaced or deleted.

The protocols apply to services, funded and/or delivered by the Government of British Columbia, that support school-aged children at school or in their homes and communities. For the purposes of the protocols, school-aged children are defined in the *School Act*.

In October 1989, participating ministries reached agreement on a set of inter-ministry protocols agreements, describing how ministries would work together to provide coordinated services to school-aged children and youth.

As of September, 2010, six protocols were updated and agreed to by participating ministries.

- Audiological Services.
- Generalized School Health Services
- School Environment and Health Inspection of Schools
- Nursing Support Services for Children and Youth with Special Health Care Needs
- Speech and Language Therapy
- Educational Programs in Youth Custody Services Centres, the Maples Adolescent Treatment Centre and Court Ordered Residential Attendance Programs

See the complete text of these protocols at: *School Act* can be found at:
<http://www.bced.gov.bc.ca/specialed/docs/interministerialprotocols.pdf>

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

H. Appendices

In addition, the following protocols are in the process of being updated during the Spring of 2011.

- Educational Programs in Hospital or Residential Treatment Programs
- Psychological Assessment Services for School-aged children
- Services for Children and Youth with Mental Health Problems and Disorders and/or Substance Use Problems
- Safe Schools

The following are some key elements of the agreements that can provide direct benefits to students:

- sharing information (within provisions of freedom of information legislation).
- co-ordinating service responses such as interventions in cases of abuse and neglect.
- providing specialized services.
- avoiding duplication of services.
- shortening response time.

It is intended that the agreements form the framework for ongoing discussion and service development at the local level.

References

Ministerial Order 149/89, the Support Services for Schools Order
Family and Child Services Act
Inter-Ministerial Protocols for the Provision of Support services to Schools (1989)

H. Appendices

H.9 Removal Health Safety

British Columbia's School Act makes the following provision for the removal of a student from school:

91 (4) If a teacher, principal, vice-principal or director of instruction suspects a student is suffering from a communicable disease or other physical, mental or emotional condition that would endanger the health or welfare of the other students, the teacher, principal, vice-principal or director of instruction, must report the matter to the school medical officer, to the school principal and to the superintendent of schools for the district and may exclude the student from school until a certificate is obtained for the student from the school medical officer or a private medical practitioner permitting the student to return to school.

Local policies and procedures should focus on proactive preventative measures rather than giving sole attention to reactive processes.

Local agreements with employee groups may determine or influence the procedures adopted.

The board must continue to make available an educational program for any student removed or excluded from school for health or safety reasons. It is therefore recommended that boards establish policies and procedures related to the provision of educational programs to excluded students.

References

School Act, sections 85, 89 - 91

H. Appendices

H.10 Steps for Protection against Germs and Disease

(Ministry of Health: Health File #29, May, 2008)

Blood and Body Fluids - If you come into contact with blood and body fluids (except sweat), *always* treat them as potentially infectious. Clean up spills quickly using absorbent material first, such as paper towels. Then clean more thoroughly with soap and water. Finally, disinfect with household bleach.

Gloves - Use clean, disposable gloves when handling any body fluids or cleaning cuts, scrapes or wounds. Wash hands after removing gloves, and dispose of the gloves in a plastic bag. Add gloves to your first aid kit so you prepared.

Needle Stick Injuries - Wash the area with warm soapy water. Do not squeeze the wound or soak it in bleach. Go to the nearest health unit or hospital emergency department immediately for care.

Sharp Objects - Place needles and syringes in a sealed puncture-proof metal or plastic container with a lid. *Never re-cap, bend or break off used needles. Dispose of them according to local bylaws.*

Personal Articles - Never share toothbrushes or razors. They can transmit small amounts of blood from one user to the next. Dispose of razors carefully. Handle bedding or clothing soiled with body fluids cautiously, and wash in hot soapy water. Hand washing is the best way to prevent the spread of germs from one person to another. Wash hands thoroughly with soap and water for at least 15 to 20 seconds. Waterless alcohol-based hand rinses can be used as long as hands aren't heavily soiled. Cover your mouth with your arm, when you cough or sneeze, and then wash your hands. Don't pass your germs onto others.

How can you keep yourself safe?

The guidelines outlined here are important to follow to keep yourself protected from germs. Blood or body fluids splashed on your skin are very unlikely to cause infection unless you have fresh cuts or raw chapped areas. If you are exposed to blood or other body fluids, protect yourself by wearing disposable gloves. If this is not possible, continue to help the person, and then wash immediately afterwards. Remember, it is important to always wash your hands carefully after touching any body fluids, even if you have worn gloves.

How can you safely clean up spills of blood or other body fluids?

1. Protect yourself by wearing disposable gloves or rubber work gloves. If there is a risk of splashing, use protective eye wear.
2. Use disposable absorbent material, such as paper towels, to clean most of the spill. Place these in a plastic bag and put in the garbage.
3. Clean the surface using soap and water to remove any remaining blood or body fluids.
4. Wipe contaminated surfaces with a disinfectant solution. Mixing one part household bleach to 50 parts of water makes a good solution. This type of bleach solution should be made freshly before use, or it may lose its strength.

H. Appendices

- For carpets or upholstery that may be damaged by bleach, other household germicides or disinfectant agents can be used. Soak mops or cloths used for cleaning in a disinfectant for 20 minutes, or wash in hot water and detergent.
5. When you are finished, wash your hands thoroughly with soap and warm water.

What should you do if you find a used needle or condom?

A needle that someone else has used may contain a small amount of his or her blood, which could carry HIV, hepatitis B or hepatitis C virus. Used condoms can also contain infectious body fluids. **NEVER** touch needles, syringes or condoms. If you find a used syringe or condom, especially in a park, school or playground, it is important to dispose of them promptly and carefully.

1. Use a pair of tongs, pliers, or a pair of sturdy strong gloves, to pick up these items.
2. Discard condoms in a plastic bag.
3. Discard syringes or needles in a puncture-proof container, preferably one intended for such purposes. Any plastic or metal container with a lid, such as a coffee can, will also do. Do not place these containers in your recycling bin.
4. When you have finished, wash your hands carefully with soap and warm water.

While the risk of infection from used condoms and syringes is very low, it is best to limit this risk as much as possible.

What should you do if you accidentally prick yourself with a dirty needle?

If possible, put the pricked area low to the ground to promote bleeding. Do not squeeze. Wash the area well with soap and water. Do not soak the wound in bleach. Go to the nearest local health unit or hospital emergency department immediately for care.

Remember - the blood and all body fluids (except sweat) of every person are potentially infectious.

H. Appendices

H.11 Integrated Services & Case Management

To provide an effective service to children, youth and their families, it is becoming increasingly recognized that the co-ordination of a variety of services from various agencies is required.

This model uses a team approach to develop and monitor a plan. The team is composed of representatives from all agencies who are providing services to the individual and is managed by the individual student, a parent, or one of the other team members. Among other advantages, this approach provides for sustained continuity of service for an individual with complex needs should team membership change.

Documents from a student's file should be disclosed to members of the integrated case management team on a 'need to know' basis that is consistent with freedom of information and protection of privacy legislation. Procedures should be put in place to protect the security and confidentiality of the case management files.

Once a case manager or key worker has been identified, the team should gather and pool information as soon as possible to generate a complete picture of the case circumstances and identify strengths and problems. This information will provide material on which to build an integrated case plan. (Note: provisions of the Freedom of Information and Protection of Privacy Act govern the exchange of information).

Where the child or youth moves to a new location, the case manager or key worker should assist the individual or family to make contacts in the new community. School districts are encouraged to transfer student information to the new location in a timely manner. Evaluation of the process allows the team to analyze the success of the plan and identify issues and barriers that may be useful in future planning.

The following government website provides more detail on the development and implementation of an integrated case management approach:

http://www.mcf.gov.bc.ca/reports_publications.htm

A copy of the Ministry of Children and Family Development's *Integrated Case Management User's Guide* is currently (June, 2005) available for review at:

http://www.mcf.gov.bc.ca/icm/pdfs/icm_user_guide_2006.pdf

H. Appendices

H.12 Children & Youth with Special Needs (CYSN) Framework for Action

The cross-ministry CYSN Framework for Action is a joint initiative of the Ministry of Children and Family Development, the Ministry of Education and the Ministry of Health Services.

The Framework provides a foundation for coordinated, collaborative action among people working in the health, education and social service sectors in B.C., and a platform of common values, principles and overarching strategies to guide the work. Participation and action from all sectors and from families will be required to help us reach the goal of better supporting children and youth with special needs.

Provincial, regional and community efforts to create an integrated continuum of quality services will be guided by the vision, mission, values and principles of the Framework and by the six strategies for action:

1. Placing children's and families' needs first:
Functionally-based and accessible services
2. Supporting our people:
Training, recruitment and retention
3. Ensuring quality and performance:
Improving quality measurement and accountability
4. Building and using the evidence base:
Promoting evaluation and research
5. Simplifying the pathway to services:
Providers, agencies and ministries coordinating, collaborating and integrating
6. Planning together:
Instituting a province-wide integrated planning mechanism

For more information, see Children and Youth with Special Needs – A Framework for Action: www.mcf.gov.bc.ca/spec_needs/cysn_framework.htm

H. Appendices

H.13 Relevant Governing Legislation: School Act - Ministerial Orders

H.13.1 Special Needs Students Order

<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m150-89.pdf>

This Minister's order defines students with special needs, describes the obligation of Boards of Education to consult with parents in the placement of students with special needs and describes policy regarding integration.

H.13.2 Individual Education Plan Order

<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m638-95.pdf>

This Minister's order sets out the requirements for Boards of Education to design and implement individual education plans for students with special needs.

H.13.3 Student Progress Report Order

<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m191-94.pdf>

This Minister's order describes reporting requirements for students who have special needs.

H. Appendices

H.14 Student Records: Use and Management

A student record is defined in legislation as any record of information in written or electronic form pertaining to (a) a student, or (b) a child registered with a school but receiving a home education. Under the *Freedom of Information and Protection of Privacy Act*, a student record includes any written record regarding a student.

Section 79 of the School Act requires that boards shall establish and maintain a record for each student and each child registered with the board's school. This section also requires a board to permit a person providing health services, social services or other support services to obtain from the records information that is required to carry out those services.

Written procedures regarding storage, retrieval and appropriate use of student records must be established by boards, with provisions to ensure confidentiality and privacy for students and their families. In the case of students with special needs this section is particularly important because clinical reports are often made available to school districts with the consent of the students' parents/guardians. Districts should ensure that practices for the collection, use and disclosure of personal student information comply the Freedom of Information and Protection of Privacy Act.

Section 9 of the School Act entitles a student and his or her parents "to examine all student records kept by a board pertaining to the student while accompanied by the principal or a person designated by the principal to interpret the records." Individuals through the Freedom of Information and Protection of Privacy Act, subject to the exceptions allowed by the Act, may also request information.

Records maintained for students with special education needs will typically include information related to identification and assessment, an Individual Education Plan and relevant follow-up and review data and information related to monitoring of progress or placement.

School districts should maintain records of those students resident in the district who have been placed by the board in Provincial Resource Programs or in programs in other districts. Districts should also monitor the appropriateness of these placements.

For your consideration: A sample *independent school* student record "set of best practices" is available for review online at:
http://www.bced.gov.bc.ca/independentschools/is_resources/welcome.htm

References

School Act, sections 9, 79

Ministerial Order 14/91, the Student Records Disclosure Order

Freedom of Information and Protection of Privacy Act (1992):

http://www.qp.gov.bc.ca/statreg/stat/F/96165_01.htm#part3_division2

H. Appendices

H.15 Summary: Distributed Learning Policy

Requirements and Guidelines for Students with Special Needs Taking a Distributed Learning Program:

http://www.bced.gov.bc.ca/policy/policies/spneed_distance_ed.htm

Policy Statement

These requirements and guidelines apply to Boards of Education and authorities that have signed Distributed Learning (DL) Agreements with the Ministry. Distributed learning is one option for instructing students with special needs. This policy also applies to students with special needs in a dual enrolment situation. These guidelines are not for students who are home schooled.

When a distributed learning student in Grades 10, 11, or 12 who has special needs is enrolled with more than one board or authority, the Ministry will fund a single board or authority. The board or authority that identifies itself as responsible for a student's special needs services, is responsible for the IEP. All boards or authorities where a student is enrolled must be consulted regarding services and meeting IEP requirements.

Distributed learning students in K-9 with special needs may enrol with only one board or authority. However, school districts may take their own arrangements to provide students with access to distributed learning.

Rationale

As of July 1, 2006, students in Grades 10, 11, or 12 who enrol in distributed learning courses may also enrol in other public or independent schools. This policy allows special needs students to have the same educational program options as other students while avoiding the complexity of multiple IEPs. The funding model also retains funding equity for special needs because all students in a category, in all delivery combinations, will generate the same supplementary funding support.

Legislation/regulations

See Ministerial Order 638/95, the Individual Education Plan Order, Ministerial Order 150/89, the Special Needs Students Order and the Educational Standards Order (Independent Schools).

Policy & procedures

The **Policy** section, below, includes **Requirements** that must be followed. The **Guidelines** are considerations for planning a program for students with special needs. The requirements and guidelines both apply to new programs as well as existing distributed learning programs.

H. Appendices

Requirements

If a student with special needs in Grades K-9 wishes to receive part of an educational program through DL, boards or authorities may make their own arrangements to coordinate this. All students in Grades 10-12 that enrol in a distributed learning school may also enrol in other schools, and generate course-based funding for their DL school.

To qualify for Level 1, 2 or 3 special needs funding, school boards must meet the following requirements:

1. Students with special needs must be included in accountability processes.
2. Ministry of Education guidelines found in *Special Education Services: A Manual of Policies, Procedures and Guidelines*, which contain requirements for assessment and provision of services for students with special needs, must be followed.
3. For students with special needs in Grades 10-12 who enrol with more than one board or authority, school districts/authorities will be expected to deem which is responsible for supplementary services. In all cases, the Board of Education/authority receiving supplementary funding is expected to develop the student's IEP and to provide and/or coordinate supplemental services. It will also be responsible for coordinating the student's transcripts and examinations. The Ministry of Education will fund a single board or authority with special needs supplementary funding.
4. Individual Education Plans (IEPs) must follow Ministry of Education guidelines found in *Special Education Services: A Manual of Policies, Procedures and Guidelines*.
5. The distributed learning program provided for a student with special needs must comply with provincially prescribed outcomes of British Columbia K-12 curriculum or the achievement of goals in a student's IEP.
6. When more than one Board of Education or authority provides services, one Board of Education or authority must take responsibility for identification of a student with special needs and consulting with parents on the student's IEP. Each of the boards or authorities must have a copy of the IEP in the student's file and cooperate with the funded board or authority to meet the student's special needs.
7. Only a qualified teacher* can deliver instruction through distributed learning schools. School boards or authorities are responsible for ensuring appropriate technical support is available.
8. A board or authority must have a policy that addresses roles and responsibilities, including custodial care, for a student engaged in distributed learning. Neither a Board of Education nor an authority is responsible for providing custodial care,

H. Appendices

personal care or behaviour management for a student taking distributed learning, while the student is at home.

9. Students whose primary educational setting is at home may have the option, according to school policy, of participating in a school setting and with school-based support as the need arises.
10. Each student enrolled in a distributed learning program must have access that is equitable to other district or authority students to school-based, non-categorical resource services, such as learning assistance services, counselling, school psychology services, speech-language pathology, physiotherapy/occupational therapy, and hospital services with the exception of hospital/homebound services.
11. In the event that services are provided by more than one Board of Education, authority or service provider, a written agreement led by the Board of Education or authority that receives funding must be in place, identifying the roles and responsibilities of each party. Planning such services must be part of the IEP development and the parents must be consulted. Service providers must be under supervision of a qualified teacher* or principal.
12. Documentation must be kept on file recording the frequency and duration of student/program and/or service provider contact as a measure of student participation.

***qualified teacher: In reference to a public school, a teacher certified by the BC College of Teachers. In reference to an independent school, a teacher certified is either by the BC College of Teachers or by the Inspector of Independent Schools.**

Guidelines

The following are considerations for Boards of Education and authorities as they plan distributed learning programs for students with special needs:

1. The organization of the Board of Education's or authority's program should be consistent with the role and mission of the board or authority.
2. The board or authority should have in place clear policy and procedures for electronic communications, including an acceptable code of conduct and expectations for participation in electronic communications.
3. When students with special needs require specialized instruction, assessment and/or assistive technologies, this should be done in consultation with a school or district/authority team, the parents, and, when appropriate, the student.
4. In considering the appropriateness of a program delivered at a distance, the school board should:
 - a) assess the learning needs and familiarity with technology of each student; and

H. Appendices

- b) inform the student/parent of:
 - (i) required access to technologies;
 - (ii) technical competence required by the student in the program;
 - (iii) the components and expectations of the program; and,
 - (iv) the learning and support services available through the program and/or the school board.
- 5. Instruction and learning resources should be provided in a format that meets the needs in accordance with the IEP.
- 6. Frequent opportunities should be provided for individualized and timely interactions between teachers and students and among students.

References/ Resources

Distributed Learning – Active Policy:

http://www.bced.gov.bc.ca/policy/policies/active_learning_distance_ed.htm

H.16 Summary: Funding Special Needs Policy

Policy statement

Students with special needs may require additional support and accommodations to enable them to access and participate in educational programs. The Basic Allocation, a standard amount of money provided per school age student enrolled in a school district, includes funds to support the learning needs of students who are identified as having learning disabilities, mild intellectual disabilities, students requiring moderate behaviour supports and students who are gifted. Additional supplementary funding recognizes the additional cost of providing programs for students with special needs in the following categories: dependent handicapped, deafblind, moderate to profound intellectual disabled, physically disabled/chronic health impaired, visually impaired, deaf/hard of hearing, autism spectrum disorder, and intensive behaviour interventions/serious mental illness.

Rationale

In order to provide an inclusive education system in which students with special needs are fully participating members of a community of learners, additional support may be required by means of additional staff, specialized learning materials, physical accommodations or equipment, and assessments to enable them to meet their educational and social needs.

Legislation/Regulations

Section 106.3 (5) of the *School Act* provides the legal authority for special needs funding. See also Ministerial Order M150/89, the Special Needs Students Order.

Levels and categories:

Level 1	Level 2	Level 3
Dependent Handicapped (A)	Moderate to Profound Intellectual Disabilities (C)	Intensive Behaviour Interventions or Serious
Deaf/Blind (B)	Physically Disabled or Chronic Health Impairment (D)	Mental Illness (H)
	Visually Impairment (E)	
	Deaf or Hard of Hearing Impairment (F)	
	Autism Spectrum Disorder (G)	

Policy

In order for a student to qualify for Special Needs funding, the student must be appropriately assessed and identified, and have an Individual Education Plan (IEP) in place. School districts that report students on the Form 1701 as one of the three

H. Appendices

levels identified above, and who are provided with special needs supports, will receive supplemental Special Needs funding, which is provided in addition to the Basic Allocation. These funds are not targeted to specific students; however, are provided to school districts to support the needs of students within their district.

As part of the funding formula school districts will receive:

Level 1 supplementary funding- \$36,600 per full time equivalent (FTE).

Level 2 supplementary funding- \$18,300 per FTE.

Level 3 supplementary funding- \$9,200 per FTE.

The Basic Allocation provided for all students includes funds to support students with other special needs, including students with Mild Intellectual Disability, Learning Disability, Moderate Behaviour Support/Mental Illness, and students who are Gifted. The Basic Allocation also includes funds to support Boards of Education in providing learning assistance, speech-language pathology services, hospital homebound services, and assessment services. A student with special needs may also be eligible to receive funding for Aboriginal Education or English as a Second Language if the requirements of these programs are also met. Students with special needs may be enrolled in Distributed Electronic Learning (DEL) programs. To qualify for funding, Boards of Education must adhere to program requirements and procedures as outlined in "Requirements and Guidelines for Students with Special Needs Taking an Distributed Learning Program".

Procedures

Students should be reported on Form 1701 in the appropriate category. School boards will be funded for each eligible FTE student at the corresponding per FTE amount listed above. Documentation to support the claim for Level 1, 2 and 3 students must include:

- Assessment and identification in relation to the criteria for that category
- Current Individual Education Plan (IEP) containing appropriate goals for category of student
- Support services outlined in the IEP related to the student's needs
- Evidence that a parent has been offered the opportunity to consult on the IEP
- Evidence of learning activities offered in accordance with the IEP
- Methods for measuring the student's progress.

Students claimed in Levels 1 through 3 must be receiving special education services on a regular basis, other than Learning Assistance, Speech/Language Pathology, Counselling, Physiotherapy, Occupational Therapy, Psychology, and Hospital/Homebound Instruction.

Provincial Resource Program (PRP) Grants

Under the provisions of section 115 of the School Act, grants are provided to school districts that administer Provincial Resource Programs. The ministry provides funding to the host district to meet its costs for operating the Programs, within the guidelines

H. Appendices

for various components of a program. Budget proposals are submitted for special purpose grants annually. Section F of this manual describes the programs' funding procedures and criteria for eligibility.

For some Provincial Resource Programs that are not residential programs in which students are placed by another ministry, the Ministry of Education reimburses districts for the approved costs of the student's transportation.

Specialized Equipment Grants

Funds are provided on an annual basis to assist school boards in providing the specialized equipment required by students reported to the ministry for Level 2 and 3 funding.

References/ resources

Funding Allocation System: <http://www.bced.gov.bc.ca/k12funding/welcome.htm>

K-12 Form 1701 Instructions:

<http://www.bced.gov.bc.ca/datacollections/september/public.htm>

H. Appendices

H.17 Transition Planning

Students experience significant transition points throughout their education, from home or day-care to kindergarten, from class to class, school to school, from school district to school district, and from school to post-secondary or work situations. These transitions almost always involve changes in:

- locations, expectations, rules, services;
- peer groups, staff; jurisdiction; and/or life-style.

The transition process for a student with special educational needs requires especially careful planning to ensure that the elements of the Individual Education Plan and the support services required to carry it out are not disrupted or lost in the process. In establishing procedures for transition points, school district personnel should keep in mind that transition goals:

- are continuous;
- occur as part of a planned education program;
- involve preparation, implementation and evaluation;
- should be articulated in the Individual Education Plan; and that
- school teams should be aware of and use the services available for the transition process.

Transition planning involves individual transition goal development, student follow-up studies, and long-range planning. It is essential that school district and individual schools establish procedures to support collaborative consultation in the transition into and from the school system. Collaboration in transition planning should involve school personnel, district staff, and representatives from community services such as pre-schools and post-secondary institutions, professionals from other ministries, parents and the students themselves. Students with special needs are at risk of being uninvolved in decision making, uninvolved in their community life, under-employed and unemployed, unable to access further education or training, and generally unable to lead fulfilling lives.

For most transitions the roles and responsibilities will need to be formalized. A carefully developed and co-ordinated transition plan will specify the supports and services necessary to enable the student to be successful at school and in the community. IEP transition planning should begin at least one year before school entry, one year before the transition to another school, and two to three years before school leaving. Planning should be specific to individual student needs and should address the specifics in meeting those needs. Plans should include the actions needed, the initiator for each action, and approximate date for the action and completion or follow-up dates.

In addition to the Ministry of Education's document (1) *Career/Life Transitions for Students with Diverse Needs: A Resource Guide for Schools* (2001), two other recommended sources of information are the Ministry of Children and Family Development's (2) *Your Future Now: A Transition planning & Resource Guide for Youth with Special Needs and their Families* (2005) and (3) *Transition Planning for Youth with Special Needs: A Community Support Guide* (2005)

SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES

H. Appendices

- (1) http://www.bced.gov.bc.ca/specialed/docs/moe_clt_resource_rb0144.pdf
- (2) http://www.mcf.gov.bc.ca/spec_needs/pdf/your_future_now.pdf
- (3) http://www.mcf.gov.bc.ca/spec_needs/pdf/support_guide.pdf

H. Appendices

H.18 Transportation

Local school districts set student transportation policy. In their planning, districts are advised to develop procedures related to transportation of students with special needs.

Transportation activities may involve bus scheduling, communications with schools and parents, the conveyance of students to and from school on a regular basis, and supervision of busing. The method of transportation may be bus, water taxi, ferry, train, etc.

In developing procedures, boards should consider the following:

- Unless it is in the educational interests of the student to do otherwise, regular transportation services should be provided as a first option.
- Transportation routes and schedules should be designed to ensure that students with special needs do not have their instructional time shortened.
- Students with special needs who require supervision should not be left unattended at transportation drop-off or pick-up points.
- For students with special health or behavioural concerns, districts should consider assigning support staff to accompany and supervise these children on the bus; these staff should have appropriate training to deal with the student's needs while in transit.
- Where a student requires complex (Level III) health care procedures on a continuous or unpredictable basis, a qualified staff member should accompany the student while in transit.
- Guidelines are set for walk limits and for maximum time in transit which allows provision for the individual needs of students with disabilities.
- Where appropriate, travel-training programs for students with special needs (including orientation and mobility programs) should be provided as part of the Individual Education Plan.
- Whenever feasible, the use of public transit by the student should be considered to enhance student independence and growth.

Reference

School Act, section 85 (2)(iv)

H. Appendices

H.19 Work Experience

Revised August 2002. Further information at:

http://www.bced.gov.bc.ca/policy/policies/work_experience_req_sec2.htm

The career paths for students with special needs will be as varied as for other students. While some students will wish to enter a university or a community college, others may want an apprenticeship program.

For some, perhaps because of their interests or the challenging nature of their special needs, an approach that includes extensive on-site training and the provision of technical aids may be required. Some students may require pre-job preparation and extensive simulation and practice.

Districts are encouraged to develop strategies for supporting the career and life transitions of all students, including those who have special needs.

Students participating in Career Preparation, Co-operative Education, Career Technical programs, and Secondary School Apprenticeship Programs should be reported each year on the 1701 enrolment form, under Career Program Enrolment.

Each work experience course a student completes should be reported to the Ministry's transcript service (TRAX).

Individual Education Plan

As in other areas of the curriculum, work experience activities should be individualized for students with special needs. Such adjustments and support services should be documented in the IEP.

Training Experience for Students who have Special Needs

Students with special needs should have access to all career education opportunities available to students in the school that they attend, including job shadowing, career preparation, co-operative education and any other career program or activity offered to students.

Within the regular curriculum, accommodations for students with special needs may include:

- increased time for vocational training;
- appropriate on-site supervision and support in the workplace; and
- specific and direct opportunities to increase work-related skills such as appropriate communication, hygiene and dress, transportation and money skills.

H. Appendices

Developing a Transition Plan

Elements that help to make the transition process successful are:

- one or more career objectives identified in a student's IEP for the current year;
- job exploration in a variety of real work sites in the community;
- student and parental input; and
- collaborative planning with community partners.

References

Ministerial Order 282/04 Work Experience Ministerial Order
B.C. OIC 406/08, Workers' Compensation Coverage Order

