



# SCHOOL DISTRICT 46 SUNSHINE COAST

## Inclusive Education Learning Services Handbook

*Belonging | Diversity | Equity | Inclusion*

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**Inclusion Support Services**

Created July 2023  
Updated January 2025

“ Education is not just about teaching minds, but about nurturing hearts. Inclusive education opens the doors of opportunity, compassion, and understanding, creating a world where we celebrate the uniqueness and diversity of every learner.

Author Unknown

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## **VISION STATEMENT, GOALS OF INCLUSIVE EDUCATION AND THE MOST ENABLING ENVIRONMENT**

### **Vision**

Our vision is to provide inclusive and responsive learning environments that recognize the value of diversity and provide equity of access, opportunity and outcome for all students including students with disabilities and diverse abilities.

“Inclusion is not just about students with disabilities or exceptionalities. It is an attitude and an approach that encourages all students to belong. It is an approach that nurtures the self-esteem of all students; it is about taking account of diversity in all its forms, and promoting genuine equality of opportunity for all students in the district” (A. Wayne MacKay-Professor of Law, Dalhousie University)

### **What we value**

- Students with special needs are participating members of our learning community, and have access to all facilities and services in the most enabling environment possible.
- Students and their parents or guardians, feel welcome, safe, valued, and respected, and are part of the educational team that design, implement and assess programs and services for their child.
- Students are honoured for their uniqueness; their strengths are used to promote their self-esteem.
- Programs and services enable students to be successful in their intellectual, social, emotional, physical and academic growth and career development.
- Students with special needs receive quality services and support based on best practices.
- Students receive programs and services that are based on thorough, current assessments of their needs by appropriately qualified professionals.
- Students, parents, guardians and staff are aware of the spectrum of services and supports available.
- Programs and services have continuity to ensure effective transitions.

### **What we do**

- Provide collaboration, consultation, assessment, direct instruction, material resources necessary to allow schools to program effectively for all students.
- Advocate for students with special needs.
- Develop necessary policies, procedures, guidelines and supports to assure appropriate educational programs.
- Assist in the development of curriculum adaptations/modifications and specialized materials for students.
- Provide leadership and consultation in the improvement of standards of practice in the programs that support the spectrum of students.
- Provide experienced interdisciplinary teams of specialized professionals to support schools in providing effective programs.
- Act as liaison with community agencies and organizations
- Service the needs of all students.

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## INFORMATION FOR PARENTS, TEACHERS, SUPPORT STAFF AND ADMINISTRATORS

This handbook is intended to be a guide for all staff (Administration, teachers, allied and para-professionals) to deliver a quality inclusive educational program for all students in our school district. It is based on best practice, inclusionary strategies and is complementary to the Ministry of Education's Special Education Manual. Our service delivery model is based on the four-level triangle of intervention.

It is meant to promote consistent practice in all schools for special education and additional specialized support for the most enabling environments for students, as well as support a three-tiered approach for early intervention and learning support for pupils with academic, social and emotional needs. This document is also the guiding work to support Administrative Regulation 2800: Special Education-May 1997

The original work is a compilation of thirteen committees, compiled by the overview committee in the spring of 1996. This handbook is revised and updated annually. The district thanks all those involved in the revision process in the past, and looks forward to continual growth in the field of learning services.

This resource outlines policies, procedures and guidelines that support the delivery of inclusive education services in School District 46. These policies and procedures reflect those outlined in the BC Ministry of Education Special Education Services Manual of Policies, Procedures and Guidelines.  
<http://www.bced.gov.bc.ca>

The purpose of this resource is to provide a single point of reference regarding BC Ministry of Education and School District 46 policy and best practices, to assist schools with the development of Inclusive Education. The information is intended for use by parents, principals and school based teams. It may also be of interest to local community agencies. The aim is to ensure that all school district staff and the local community are aware of the inclusive education services available.

### **This includes:**

- procedures used to identify, assess and plan for students
- procedures used to include parents and other service providers
- reporting procedures and monitoring of student progress using IEPs
- a description of district services

School District 46 promotes an education system that fosters inclusivity, ensuring that every student is an active participant in a community of learners. Studies indicate that the majority of students (80%) will not require inclusive education services, while up to 20% may need targeted instructional support at some point during their schooling. A small percentage of students (1% - 5%) will require more intensive interventions throughout their academic journey.

Although inclusive education is often associated with integrating students with special needs, it is not solely a matter for Special Education. It encompasses all students and adults. Achieving successful learning outcomes for all students cannot be accomplished by isolated groups of professionals. It necessitates genuine collaboration at every level of the organization, promoting mutual respect and learning among all individuals involved.

## WHAT IS INCLUSIVE EDUCATION?

Inclusive Education encompasses specially designed learning opportunities to meet the unique needs of exceptional learners. These services aim to provide equitable access to learning opportunities and help students achieve the goals outlined in their Inclusive Education Plans. These plans cover various aspects of education, including academics, social skills, emotional well-being, and behavior management.

According to the BC Ministry of Education, students with special needs can have disabilities of different natures or possess exceptional gifts or talents. In BC, students with significant exceptionalities receive a Ministry Special Education identification and have an Inclusive Education Plan (IEP). The IEP may include modified learning standards, support services, and adapted instructional materials and assessment methods.

Before a student receives a Ministry identification, they may have a Student Support Plan in place to address their specific needs and adaptations to the regular curriculum. While the emphasis is on educating all students in local schools with their peers of the same age, resource rooms and district-based programs can be utilized when appropriate. The goal is to maximize each student's participation in a classroom setting while addressing their unique requirements.

### **Inclusive Education services are designed to:**

- complement regular education services
- support a diverse range of students
- provide effective assessment and intervention
- identify students' strengths,
- promote collaborative decision-making among teachers, parents, and other involved parties.

Collaborative decision-making involves democratic and interactive practices that focus on enabling students to achieve success. Students and their parents are integral members of this collaborative team.

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## ASSESSMENT INTERVENTION AND REVIEW OF STUDENT PROGRESS

Assessment is an ongoing process of collecting data to guide teaching instruction and to evaluate student learning. Assessment is a collaborative process that can involve the student, parents, school staff, and community agencies. Assessments help teachers identify strengths and needs for the purposes of determining what educational interventions would be most appropriate for a student.

Information from assessments enable teachers to differentiate instruction and to develop Student Support Plans or Inclusive Education Plans (IEPs). Sometimes a Teaching to Diversity checklist is used to record adaptations implemented to support student success. For some students assessments may involve Inclusion Support Teachers or School Psychologists. The assessment process may include:

conducting classroom observations to determine student strengths and challenges

- interviewing the student, teachers, parents, and others involved to determine multiple perspectives on the students' strengths and challenges
- planning with the classroom teacher and/or school staff to decide which assessments will be used to identify students who are at risk, or who may need interventions for learning and/or behaviour reasons;
- planning with the classroom teacher, and/or school staff to decide which assessments will be used to monitor students' progress and gauge the effectiveness of research based practices and interventions;
- planning with the classroom teacher and/or school staff to decide which curriculum based measurement (CBM) will be used. These help teachers to assess a student's skill level in reading, math, spelling, and written expression, to monitor students' response to interventions, and to make informed instructional decisions;
- administering, gathering and/or synthesizing information from a variety of sources to determine the complexity and and severity of students' learning needs. This typically results in a file review that may include:
  - information from report cards
  - student observation summary
  - work samples, informal tests and checklists
  - diagnostic tests
  - Early Literacy Skills (DIBELS),
  - Functional Behaviour Assessment (FBA)
  - standardized assessments
  - summary of reports from other agencies
- using norm-referenced (where students achievements are measured against the "average" student for their age) or criterion-referenced assessments as appropriate to answer questions about how best to provide instruction or support

## ASSESSMENT TERMS

<b>Assessment</b>	The systematic gathering of information about students' learning.
<b>Assessment for learning (Formative Assessment)</b>	Assessment that occurs throughout the learning cycle that gives teachers information to differentiate teaching and learning activities. Educators use results to determine not only what students know, but also to gain insights into how, when, and whether students apply what they know. Teachers use this information to adjust their instruction and provide targeted feedback to students.
<b>Assessment as learning</b>	Assessment that involves students in setting personal goals for learning and monitoring their progress through self-assessment practices. It occurs when students monitor their own learning and use the feedback to make adjustments, adaptations, and even major changes in what they understand.
<b>Assessment of learning (Summative Assessment)</b>	Assessment that is summative in nature is generally done at the end of a unit of learning to document achievement. These assessments are designed to provide information for confirming the knowledge, skills and understanding that has been attained by the student.
<b>Baseline</b>	Data collected prior to the initiation of an intervention that is used for comparison with data collected during or after intervention implementation.
<b>Classroom observation</b>	Information about how the student responds to instruction, and of the match between the curriculum, instruction and the student's learning.
<b>Curriculum-based assessment</b>	Assessment that mirrors instructional procedures related to the curriculum, resulting in ongoing monitoring of progress through adjustments in instruction, remediation, adaptations, or modifications provided to the students.
<b>Curriculum-based measurement</b>	A standard procedure to track and record student progress in a specific area (e.g. reading, mathematics, spelling, written expression). Teachers use brief, simple, timed tests that are determined by the school curriculum.
<b>Standardized testing</b>	An objective test that is given and scored in a uniform manner. Tests have a manual giving complete guidelines for administration and scoring. The administrative conditions are consistent. Scores are norm-referenced.



## FORMALIZED ASSESSMENT

Test	Description	Who Administers?	Who's it for?
FSA	Foundation Skills Assessment	Grade 4 and 7 Teachers	All Elementary Schools
DIBELS	Dynamic Indicators of Basic Early Literacy Skills	Teachers with training	All Elementary Schools
K NUMERACY	Curriculum Based Screening Assessment	Teachers	All Elementary Schools
WJ IV Level B	Woodcock – Johnson IV Tests of Achievement	Inclusion Support Teachers/School Psychologist	Inclusion Support Services
BASC	Behaviour Assessment System for Children	School Counsellors/ School Psychologists	Inclusion Support Services
BRIEF	Behavior Rating Inventory of Executive Function	School Counsellors/ School Psychologists	Inclusion Support Services
Conners	Behaviour assessment for suspected ADHD	School Counsellors/ School Psychologists	Inclusion Support Services
SRS-2	Social Responsiveness Scale	School Psychologists	Inclusion Support Services
ABAS-3	Adaptive Behaviour Assessment System	School Psychologists	Inclusion Support Services

## PSYCHO-EDUCATIONAL ASSESSMENT

### What is a Psycho-educational Assessment?

A psycho-educational assessment is the systematic investigation of a student's strengths and stretches in various domains (e.g., cognitive ability, achievement, information processing, language and behaviour).

### The Assessment Process:

- The goal of assessment is to gather specific and new information to better understand and improve the student's current functioning or learning.
- Assessment is accomplished through the use of interviews, rating scales, observations, standardized assessment tools, curriculum based measurement, history taking and measurement of responsiveness to intervention.
- The assessment process may require the District school psychologist to work, for a period of time, with the referred student in a one to one situation outside the regular classroom, but within regular school hours.
- At the end of the assessment process, a written report is shared with the parent or guardian and with school personnel concerned about the student. Parents and guardians are given an opportunity to ask questions and to make suggestions about the report at that time. The report becomes part of the student's confidential file record.

### Benefits of Assessment Generally, assessment seeks to answer questions about a student's learning or behaviour. It may help:

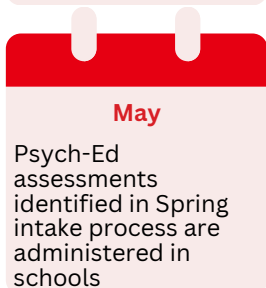
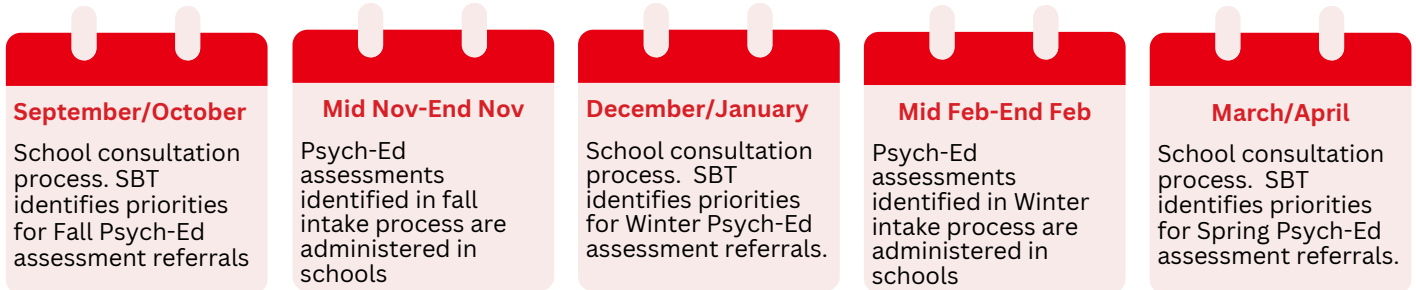
- develop insights into needed changes as well as develop new strategies, accommodations and adaptations that may be necessary to improve the student's learning.
- school personnel to gain a better understanding of a student's learning strengths and challenges.
- School Based Team members to develop education interventions and programs to improve the level of success that a student will have in school.
- lead in part, to a student's meeting the assessment component of the education code criteria assisting school personnel in the process to access additional services that might benefit the student.

### What is the purpose of the psycho-educational assessment?

The purpose is to answer the referral question(s). The District school psychologist hopes to be able to provide further insight into the child's learning difficulties to complement information already known about the child. It is hoped that the information reported by the school psychologist will be of benefit to parents and teachers in the educational planning and programming process.

## Psycho-Educational Assessment Prioritization and Planning

School District 46 has access to approximately 35 psycho-educational assessments per school year allocated across the district.



### Student's are prioritized by:

1. Students in Grades 10-12 who qualify for CLBC support and need an assessment for Adult CLBC support.
2. Students in grade 11-12 who require an assessment for Post-Secondary Education
3. Students in grade 4-7

\*Assessments are not performed for students in grades K-3

\*LD Diagnosis may be completed through academic achievement testing (WJ)

## FUNCTIONAL BEHAVIOUR ASSESSMENT

A Functional Behaviour Assessment provides an evaluation of how a student functions within the school environment. The assessment may include interviews with parents/guardians, interviews with school staff, a file review, direct observations, and data collection. The results of the Functional Behaviour Assessment will inform the development of the Positive Behaviour Support Plan; this document will be shared with the parents/guardians and school staff and placed in the student's school file.

The Positive Behaviour Support Plan outlines strategies aimed at enhancing the student's behaviour and participation in learning throughout the school day. The plan will include ecological/setting, preventative, teaching, and reinforcement strategies designed to decrease challenging behaviour and increase positive behaviours and learning. The plan will also be feasible for, and a good fit with, the school team supporting the student.

The success of an intervention hinges on:

- understanding why the student behaves in a certain way
- replacing inappropriate behaviour with a more socially acceptable behaviour
- recognizing the links between academic and behavioural learning
- working in partnership with community agencies when appropriate

The FBA and Positive Behaviour Support Plan will inform the development of the IEP.

## COLLABORATIVE SUPPORT AND CASE MANAGEMENT

Each classroom teacher has overall responsibility for all students in their class. Classroom Teachers work in partnership with Inclusion Support Teachers to support the needs of all learners within the classroom.

Using a Universal Design for Learning (UDL) framework the Inclusion Support Teacher becomes partners with classroom teachers by co-planning, co-teaching and co-assessing instructional programs.

In addition to school-based Inclusion Support Teachers and school-based Counsellors, schools have access to a district-based team consisting of:

- Deaf and Hard of Hearing Teacher (DHH)
- English Language Learner Teacher(s) (ELL)
- Vision Teacher
- District Inclusion Support Team:
  - Family Support Navigator(s)
  - District Inclusion Support Teacher
  - District Inclusion Support Coordinator of ASD
  - District Inclusion Support Coordinator - Inclusive Education
  - District Inclusion Support Education Assistant(s)
- Speech and Language Pathologist
- Occupational Therapist
- Physical Therapist
- Complex Technology Teacher(s)
- School Psychologist
- School Psychiatrist

Responsibility of Classroom Teacher	Responsibility of Inclusion Support Teachers
<ul style="list-style-type: none"> <li>• planning, implementation, assessment of students' educational program</li> <li>• all students in the class including those with IEPs</li> <li>• all students in an area of assessed need that is collaboratively determined by staff</li> <li>• targeted groups of students identified through assessment and collaborative dialogue</li> <li>• individual students and groups of students who need intensive intervention</li> </ul>	<ul style="list-style-type: none"> <li>• additional assessment and observation</li> <li>• co-planning and coordinating initiatives</li> <li>• working with the administrator and SBRT to coordinate support</li> <li>• helping classroom teachers to differentiate instruction</li> <li>• sharing information about research based practices</li> <li>• providing small group instruction in/ out of class</li> <li>• modeling strategies for EAs</li> <li>• liaising with community supports/ agencies</li> <li>• collaboratively developing Individual Education Plans</li> </ul>

### Case Manager

The teacher who coordinates a student's inclusive education program is identified by the School Based Team (SBT). This teacher is known as the Case Manager. The Case Manager, in collaboration with the classroom teacher, liaises with parents and others involved, ensures adaptations are used, writes the IEP and monitors student progress. Principals have the authority to determine the most appropriate case manager for a student with diverse needs.

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**CASE MANAGEMENT YEAR AT A GLANCE**

<b>September</b>	<ul style="list-style-type: none"> <li>• New student observations and assessments</li> <li>• Intake meetings, class review meetings</li> <li>• First School Based Team meeting to prioritize services (WJIV &amp; Psycho-Ed referral list)</li> <li>• EA scheduling support and EA meetings</li> <li>• EA training for medically supported students</li> <li>• Completion of new student CB-IEP's by 30th of the month in MyEd</li> <li>• Create support schedule, assessment, and meeting schedule for IST's, SBT meeting</li> <li>• File reviews, new student designation process</li> <li>• 1701 list review (additions, deletions, change of category, ELL, ESD)</li> <li>• Book CB-IEP meeting times for new CB-IEP's</li> <li>• Level B/Assessment refresher in-service</li> <li>• IST in-service and meeting</li> <li>• Review Care Plans and other medical supports for students/Evacuation plans</li> <li>• Schedule space for itinerant teaching staff</li> <li>• Evergreens entered in MyEd</li> </ul>
<b>October</b>	<ul style="list-style-type: none"> <li>• CB-IEP Meetings and assignment of case managers</li> <li>• Transition planning for adult services (MCFD &amp; CLBC)</li> <li>• Start intervention programs</li> <li>• Kindergarten surveys occur</li> <li>• Monthly IST meeting</li> <li>• Update children in care list (SBT), review progress</li> <li>• Ordering materials for student support</li> <li>• Prepare packages for psych assessments (if chosen for this round)</li> <li>• EA in-service request sent to Inclusion Support Services</li> </ul>
<b>November</b>	<ul style="list-style-type: none"> <li>• Assessment of progress for interventions</li> <li>• CB-IEP meetings</li> <li>• Continue intervention programs</li> <li>• Completed CB-IEP's signed by administrator</li> <li>• File CB-IEP's in student's permanent file/MyEd</li> <li>• Monthly IST meeting</li> </ul>
<b>December</b>	<ul style="list-style-type: none"> <li>• Monthly IST meeting</li> <li>• Materials clean up</li> <li>• Review behaviour data</li> <li>• CB-IEP reviews</li> </ul>
<b>January</b>	<ul style="list-style-type: none"> <li>• New student designations, change of category for February recount</li> <li>• Monthly IST meeting</li> <li>• CB-IEP reviews</li> <li>• Review for hospital homebound students if applicable</li> <li>• Review students in care progress at SBRT</li> <li>• Review POPARD, Inclusion BC, SETBC need for services</li> <li>• Course selection (secondary)</li> </ul>

## CASE MANAGEMENT YEAR AT A GLANCE

<p><b>February</b></p>	<ul style="list-style-type: none"> <li>• Assessment of progress</li> <li>• Parent meetings/Student led interviews</li> <li>• 1701 mid-year check</li> <li>• Monthly IST meeting</li> <li>• Kindergarten registration</li> <li>• CB-IEP reviews</li> </ul>
<p><b>March</b></p>	<ul style="list-style-type: none"> <li>• Transition planning to adult services review meeting</li> <li>• Monthly IST meeting</li> <li>• Update children in care list (SBT)</li> <li>• CB-IEP reviews</li> <li>• Referrals to Alternate programs</li> </ul>
<p><b>April</b></p>	<ul style="list-style-type: none"> <li>• Incoming Kindergarten parent introduction meetings</li> <li>• Incoming Kindergarten community services/supports sharing meeting at District level</li> <li>• Monthly IST meeting</li> <li>• Specialized equipment review</li> <li>• Review students in care progress</li> <li>• Grade 7-8 Transition preparation and articulation meetings</li> <li>• CB-IEP reviews</li> </ul>
<p><b>May</b></p>	<ul style="list-style-type: none"> <li>• Kindergarten transition team planning meetings</li> <li>• Incoming Kindergarten observations</li> <li>• Grade 7-8 Transition preparation and articulation meetings</li> <li>• Monthly IST meeting</li> <li>• Class review meeting</li> <li>• Year-end assessments</li> <li>• CB-IEP reviews</li> <li>• SETBC requests to Inclusion Technology Coordinator</li> <li>• Evergreen certificates &amp; 13th year requests</li> <li>• Timetabling Secondary students and teacher consultations</li> </ul>
<p><b>June</b></p>	<ul style="list-style-type: none"> <li>• K screening year-end beginning of June</li> <li>• Assessment of progress</li> <li>• CB-IEP reviews</li> <li>• Class review meeting</li> <li>• Monthly IST meeting</li> <li>• Secondary students and teacher consultations</li> <li>• Materials clean up and update/filing of reports</li> <li>• Grade 7 files to high school for preparation</li> <li>• WJIV's for file</li> <li>• 1701 year-end review</li> <li>• Print all Inclusive Education Documentation for student filing.</li> </ul>

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## TRANSITION PLANNING

Over the course of the school year, particular care needs to be taken when students transition from home or daycare to Kindergarten, from grade to grade, school to school, from school district to school district, and from school to post-secondary or work situations.

### Key Transition Points are:

- **Entry to Kindergarten**
- **Elementary to Secondary**
- **Exit from Secondary**

School principals and Learning Services Teachers will follow transition planning guidelines as follows:

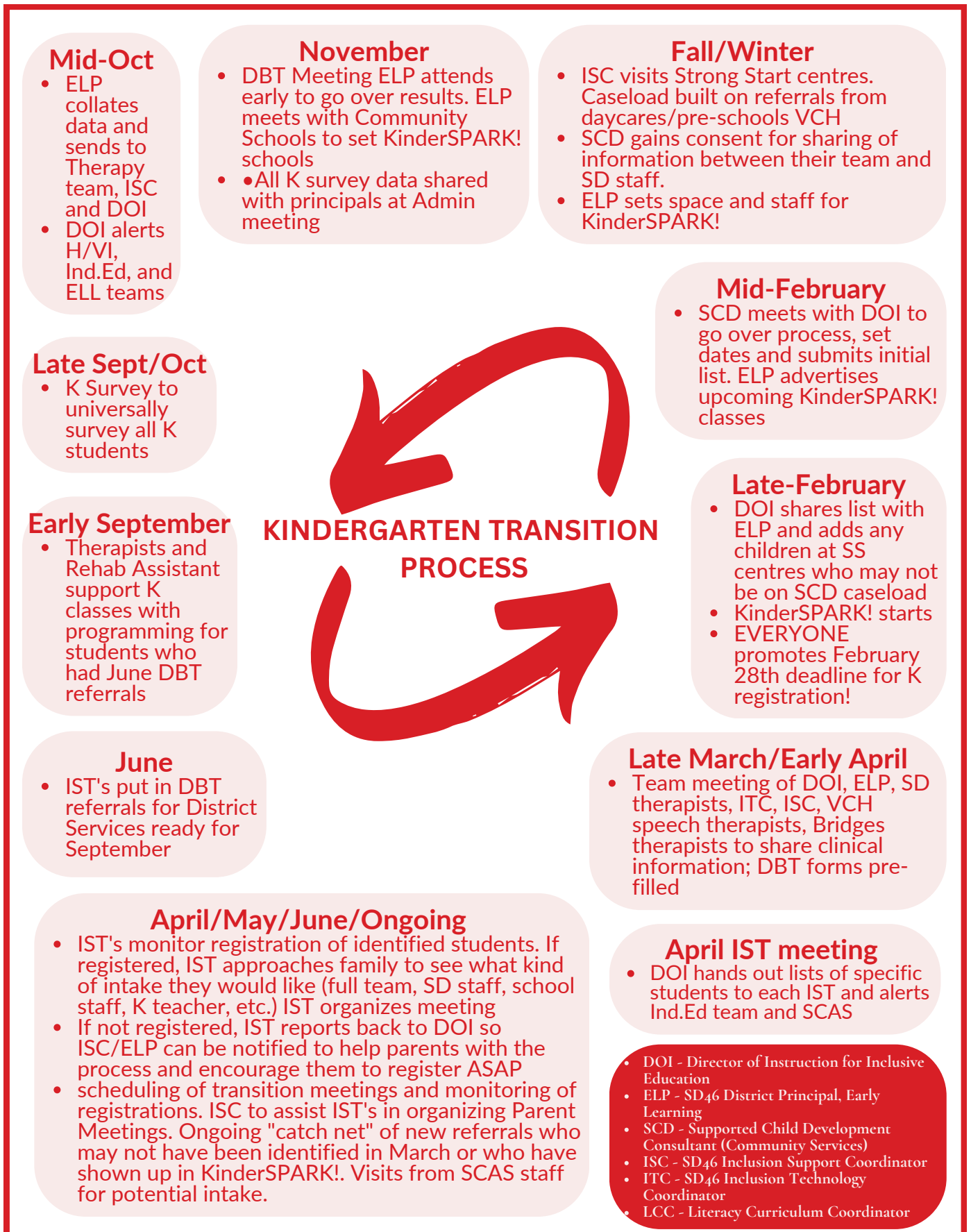
- upon receiving notification that a student with diverse needs is enrolling in the school, the administrator has a preliminary discussion with parents
- the school administrator shares information with the School Based Team (SBT)
- the SBT requests and gathers information about the student including records, previous placement, and educational needs. An observation of the student in his or her current setting is arranged for the Classroom Teacher or Case Manager (if known), a member of the SBT, Inclusion Support Teacher, and/or appropriate support personnel (e.g. Speech Language Pathologist, School Psychologist, Autism Support Worker). This is particularly important for students who have complex needs as it enables more effective planning
- the Principal or Case Manager, if known, coordinates an intake meeting. The intake meeting is an opportunity for professionals and parents/guardians to share vital information to support a smooth transition of services

The school district website provides information about specific dates for Kindergarten registration, school transfer requests, visits and parent meetings.

### Key Document:

- Roles and Tasks Timeline for Transition Planning Team
  - [https://www2.gov.bc.ca/assets/gov/family-and-social-supports/roles\\_tasks\\_transition.pdf](https://www2.gov.bc.ca/assets/gov/family-and-social-supports/roles_tasks_transition.pdf)

**KINDERGARTEN TRANSITION PROCESS**





## **REQUEST FOR ADDITIONAL YEAR**

The School Act provides for the possibility of an educational program until the end of the school year in which a student reaches the age of 19. This discussion will take place at the School Based Team with the Director of Instruction for Inclusive Education.

For each student, there are unique considerations and requirements for coordinated cross ministry transition planning. However, provisions for enrolment of a student with special needs for a grade 13 school year is not automatic and is dependent upon a number of factors including the following:

- The student was reported in the educational count for the grade level from the previous year (Grade 12 for example)
- The student needs to continue to work on the IEP goals in the current setting or with community partnerships (transitions to adult services, work/vocational experience, social skills training etc.)
- The Grade 12 IEP goals cannot be completed in an adult transition context
- IEP transition goals are best supported by the use of partnerships between schools or adult services
- There is space and staff available within the inclusive education supports at the student's current school

To request an additional year the parent must write a letter or email to the school administrator by the beginning of spring break. The principal will take the request to the next School Based Team and invite the Director of Instruction for Inclusive Education.

The principal will inform the parent in writing (along with the other members of the School Based Team and Director of Instruction for Inclusive Education) once a decision has been made by April 15th of that year. The decision may be one of three options:

- Further IEP review meetings are in order before a decision can be made
- The team has considered the options and the student should transition to the next grade or to adult services (no additional year)
- The team has considered information and agrees that an additional year is appropriate to support the student's learning.

It remains the decision of the board to extend a student's enrolment beyond the age of 19.

### **Grade 13 Year for Students with Complex Developmental Disabilities**

For a very few students with the most complex special needs, remaining in school for a further year (the year in which they turn 19) may be beneficial. The decision to provide a Grade 13 year is made by the SBRT and community partners (typically the CLBC Facilitator). Schools must consult with the Director of Instruction by Spring Break if the plan is to retain any student for a Grade 13 year. During the last year of schooling, students may be in the community for an increasing amount of the school day.

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## **BRITISH COLUMBIA CERTIFICATE OF GRADUATION (DOGWOOD DIPLOMA)**

A student who meets the applicable graduation requirements is entitled to receive a British Columbia Certificate of Graduation. In order to graduate with a Dogwood, every student in the Graduation Program has to pass certain required courses, electives, and graduation transition courses.

## **BRITISH COLUMBIA SCHOOL COMPLETION CERTIFICATE (EVERGREEN CERTIFICATE)**

The School Completion (“Evergreen”) Certificate is intended to celebrate success in learning that is not recognized in a Certificate of Graduation (Dogwood Diploma).

It is used to recognize the accomplishments of students with special needs and an Inclusive Education Plan, who have met the goals of their education program, other than graduation (not all students with special needs should be in an Evergreen Certificate Program.)

The Evergreen Certificate is not a graduation credential; students who receive an Evergreen have not graduated. It is important that students and their parents clearly understand that the Evergreen represents the completion of personal learning goals but does not represent graduation.

Some students may be unable to meet graduation requirements due to their special needs. However, the decision to put a student on an Evergreen Program should not be made prior to Grade 10, and should include the informed consent of the student’s parent(s)/guardian(s).

All students of school age are entitled to an education program, whether or not that program leads to graduation. For students pursuing an Evergreen Certificate, their education program should enable them to meet their individual learning goals. Accordingly, they should have an Inclusive Education Plan (IEP) that indicates their personal education goals, how the goals will be achieved, and on-going monitoring and assessment to know when the goals have been met and an Evergreen Certificate should be issued. Parents and, wherever appropriate, the student are to be provided an opportunity to be consulted about the preparation of the IEP.

When supporting students on adapted programs, it is often helpful for Classroom Teachers to work in close partnership with Case Managers in reviewing the effectiveness of curricular, instructional and assessment practices as outlined in the IEP. ADAPTED students may have an IEP and an identification.

Adaptations include teaching, instruction and assessment strategies designed to accommodate a student's needs so he or she can achieve the learning outcomes in a subject or course and to demonstrate mastery of concepts.

## **BRITISH COLUMBIA ADULT GRADUATION CERTIFICATE**

Some students with diverse needs may take longer than usual to meet the graduation requirements. Students who completed some modified courses may also wish to return to school at a later date to follow an adult graduation course. Note that all students can access differentiated examinations e.g. have extra time, separate setting, using a computer. Students do not require Ministry Designation and an IEP to access these. Credit can also be given for courses previously credited on the School Completion Certificate. The following link provides more information on graduation requirements.

<https://www2.gov.bc.ca/gov/content/education-training/k-12/administration/legislationpolicy/public-schools/adult-graduation-program?keyword=graduation>

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## ROLES WITHIN INCLUSIVE EDUCATION

### INCLUSION SUPPORT TEACHER

According to BC Ministry of Education guidelines, specialist teaching services are school based, non-categorical resource services designed to support classroom teachers and their students who have difficulties in learning and behaviour. These teachers provide a co-ordinated and integrated set of support services that include school based consultation, collaborative planning and co-ordination with the School Based Resource Team, and instruction. Learning Services 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.

Inclusion Support Teachers work with a number of classroom teachers to provide support for all students in their classroom. Unlike the more traditional model where different Inclusion Support Teachers worked with differently diagnosed students, 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 students.

#### **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 actors in the classroom which may facilitate learning for a student or a group of students;
- consulting with parents and students regarding learning strategies and organization skills; and
- consulting with district and community resource personnel

#### **Assessment and Instruction services include:**

- criterion-referenced or norm-referenced assessment as appropriate to answer questions about how best to provide instruction or support;
- undertaking Level B assessment such as to provide baseline information from which to monitor student progress;
- undertaking Functional Assessments of Behaviour and/or supporting other staff in taking on this responsibility;
- 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;
- in-depth interviews with students to determine their knowledge of the learning process and/or thinking strategies
- direct teaching of individuals, small groups and whole classes as appropriate
- modelling of differentiated instruction for instruction for classroom teachers and EAs
- writing Individual Education Plans (IEPs)

#### **3 key questions for all Inclusion Support Teachers, include**

- **What is my role - is this clearly communicated to staff and parents?**
- **What is the focus of my instruction - how is this linked to classroom practice?**
- **How do I support classroom teachers with the differentiation of instruction in the classroom?**

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## COUNSELLORS

Every school has a counsellor who provides consultation and counselling services for students with academic, social, emotional, behavioural or mental health concerns. Success in the classroom is their primary goal. They collaborate with teachers, parents and additional specialist personnel including personnel from other Ministries and agencies to promote consistency.

Secondary School Counsellors also provide educational planning and career counselling. This may involve consideration of alternative program/school placement as part of the School Based Resource Team decision making process.

### **The role of the Counsellor dealing with student's social, emotional, behavioural and mental health needs is to:**

- provide individual and small group counselling on issues such as: academic progress, transitions and change, social skills, communication skills, self-esteem, emotional difficulties, depression, and grief and loss
- consult with parents to facilitate communication between students, their parents, the school, and community resources
- consult, support, and collaborate with classroom teachers
- act as Case Managers or Co-Case Managers for students with social, emotional and/or behavioural special needs
  - facilitate IEP meetings, write IEPs and conduct IEP reviews
- undertake Functional Assessments of Behaviour in order to plan appropriate interventions
- support the implementation of specific programs to enhance students' Social Emotional Learning
- administer behaviour assessments to support a student's social emotional learning
- provide coordination of resources within the district and facilitate the provision of community services within our schools
- facilitate and assist in staff development initiatives that focus on social and emotional needs within the school community
- assist schools with student behaviour issues
- be part of the District Flight Team to assist in critical response in emergent circumstances
- conduct the Suicide Risk Assessment (SRA) and Violent Threat Risk Assessment (VTRA) when necessary, or called upon.
- Support the referral process to the School Psychiatrist

Counsellors are routinely involved in the delivery of school-wide prevention programs such as EASE, Second Step, Roots of Empathy and Mind Up.

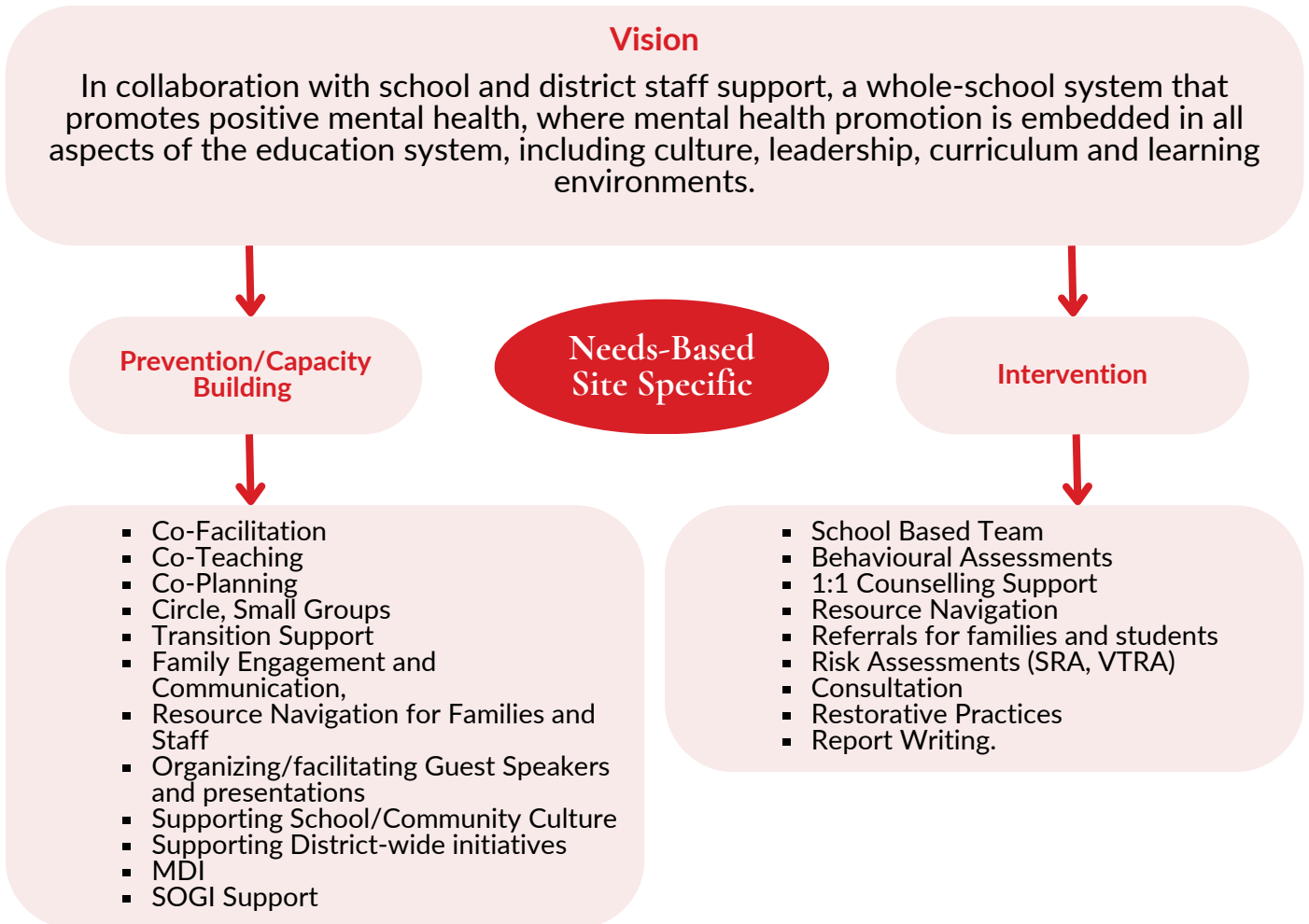
#### **Visit our Counselling Site for more information:**

- <https://sd46.bc.ca/schools-and-services/inclusive-education/counselling-supports/>

#### **Child and Youth Mental Health and Substance Use Resource Hub**

- <https://sd46.bc.ca/resources-and-supports-for-child-youth-mental-health-and-substance-use/>

## ELEMENTARY COUNSELLING MODEL



## **ENGLISH LANGUAGE LEARNING TEACHER**

The role of an ELL teacher in School District 46 is multifaceted. They work closely with ELL students, providing individualized instruction and tailored support to meet their unique language needs. ELL teachers employ a variety of instructional strategies to help students develop their English language skills, including listening, speaking, reading, and writing.

In addition to working directly with students, ELL teachers collaborate with classroom teachers, administrators, and other specialists to create an inclusive and supportive learning environment for ELLs. They provide guidance on best practices for differentiated instruction and help develop appropriate accommodations and modifications to ensure ELL students can access the curriculum.

ELL teachers in School District 46 also play a vital role in fostering cultural understanding and appreciation within the school community. They promote diversity, inclusivity, and respect for different cultures, helping to create a welcoming and supportive atmosphere for ELL students and their families.

Annual assessments are a Ministry requirement and are completed each Spring using a variety of assessment tools at the school level.

ELL Teachers must have specialized education and training in ELL methodology.

### **ELL Teacher's Role:**

- Welcome new students and provide orientation to the school
- Identify and assess new students
- Create and update as necessary the Annual Instruction Plan (AIP) for ELL students
- Coordinate with school office staff to ensure students are correctly identified and included on the \*1701 list before September 30th
- Coordinate with Inclusive Education to ensure ELL students are identified in MyEd BC.
- Follow monthly checklist of tasks as outlined in timeline
- Provide support to Direct and Indirect students and work collaboratively with classroom teachers.

## EDUCATION ASSISTANTS

Education Assistants (EAs) are an important part of the educational team in School District 46. EA supports are of significant value to students with diverse needs and often play a considerable role in facilitating student inclusion.

EAs work under the direction of teachers and under the general supervision of a teacher or school principal. Teachers are responsible for the planning, design, implementation and assessment of the educational program for students with diverse needs while, under the teacher's direction, EA's contribute to student program planning and implementation, and participate in the process of collecting data for the purpose of evaluating student progress. Teachers evaluate student progress and report to parents.

Some EAs have additional training and skills in the areas of: Sign Language (Visual Language/Signing EA); Intervenor- An intervener is a person who regularly works one-to-one with an individual who is deaf-blind; Autism; Behaviour and more.

Decisions regarding EA resource allocation are based upon thorough assessments of individual student needs as they manifest within particular classroom environments and during specific school activities.

### **Key Considerations:**

- **A student's educational plan determines the type of resource required to most appropriately support independence / interdependence. The allocation of EA support should be secondary and as a result of quality educational planning.**
- **District and school actions must support the primacy and capacity building of the school and classroom environment.**

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## DISTRICT BASED SERVICES AND PROGRAMS

### District Inclusion Support Team

- District Inclusion Support Coordinator
- District Inclusion Support Coordinator- Autism Spectrum Disorder (ASD)
- District Inclusion Support Teacher
- Family Support Navigator
- Inclusion Education Assistant

## FAMILY SUPPORT NAVIGATOR

### Who are FSNs?

- FSNs are social workers. Social work training and education generally includes: case management; working with marginalized populations; anti-racism and anti-oppression theory and approach; Indigenous studies; therapeutic approach; trauma informed practice; child welfare; systems theory and approach and critical analysis.

### FSNs are useful to families and schools in the following ways:

- Parenting support – FSNs can help parents and caregivers polish, develop and create new approaches to discipline and parenting
- Further understanding of development and expected behaviour and challenges with each age and stage
- Right relationship – helping parents and caregivers take the lead in their child/youth's life
- FSNs are trained in positive discipline; attachment theory and trauma informed practice
- They have extensive training and education in complex neurodevelopmental conditions (including FASD; ADHD; Sensory/language processing problems/disorders and attachment disorders).
- FSNs can provide explanations for complex behaviour and develop plans for addressing it
- They can help parents better understand their child/youth's assessments and diagnosis
- FSNs are well informed and connected to community resources - we can help families get where they need to be for support
- FSNs help bridge connection between home and school – becoming a great resource to staff for developing and facilitating plans that fit well with family culture and capacity

### What else do FSNs do?

- We facilitate positive discipline training (with Neufeld approach woven in) and use it to build capacity for challenging behaviour and wounded kids in schools
- When needed we can facilitate parent support groups and develop networks for mutual support



## **SPEECH AND LANGUAGE PATHOLOGIST**

Speech and Language Pathologists (SLPs) provide a continuum of services to schools. This includes assessment, consultation, and direct therapy for students who have difficulties expressing themselves due to speech problems or due to weaknesses for language understanding and/or expression, including social language.

Priorities for SLP services are determined by the severity of the student's expressive, receptive and/or social language deficits, intelligibility, fluency and voice. SLP services are accessed through the School Based Team.

The role of the Speech-Language Pathologist is to:

- assess the communication skills of individual students following discussion with the school team
- interpret assessment results and suggest recommendations to parents, classroom teachers, and School Based Teams
- develop goals and strategies for students who have an Individual Education Plan in collaboration with Case Managers and Classroom Teachers
- provide appropriate programming and materials for students with language, learning, articulation, voice, or fluency disorders
- provide direct intervention individually or in small groups sometimes within and sometimes out of the classroom
- collaborate with school staff, parents, and community agencies
- attend School Based Team meetings to participate in discussion of teacher referrals and to collaborate with other team members
- provide resource materials for teachers, EAs and/or parents

## **PHYSICAL THERAPIST**

Physical therapists in School District 46 are highly trained professionals who specialize in helping students improve their physical abilities. Physical therapists work closely with students who have physical disabilities, injuries, or conditions that affect their mobility, strength, or coordination.

The role of a physical therapist in School District 46 is to assess, diagnose, and develop personalized treatment plans for students with physical challenges. They work collaboratively with students, their families, and other members of the educational team to address specific goals and enhance their physical functioning.

Physical therapists utilize a variety of techniques and interventions to help students improve their strength, flexibility, balance, and motor skills. They may provide therapeutic exercises, stretches, and activities that target specific areas of concern. They also utilize specialized equipment and assistive devices to support students in their physical development.

In addition to direct intervention, physical therapists in School District 46 provide education and support to students, families, and teachers. They may offer guidance on proper body mechanics, ergonomics, and strategies to prevent injuries. They also collaborate with classroom teachers to ensure that students with physical challenges can participate fully in educational activities and access the curriculum.

## **OCCUPATIONAL THERAPIST**

Occupational Therapists are specially trained professionals who have earned a Bachelor's or Master's degree and are registered with the College of Occupational Therapy of BC.

### **What We Do**

Occupational therapists aim to enable the student to actively engage in learning, participate in all aspects of school life and ultimately, achieve their potential. OTs do this by:

- Assessment, planning and goal development in relation to a student's fine motor development, visual perceptual skills, sensory processing abilities and activities of daily living skills
- Evaluation of the environment and making recommendations to improve the fit for greater access and participation
- Recommendation of assistive technology and equipment to support student success
- Collaboration with teachers and other educational professionals
- Providing education and resources on motor abilities and development as well as sensory processing.

### **Services can vary depending on students' needs:**

- Evaluation and recommendations
- Ongoing consultation for students with significant motor/sensory needs
- Program planning in collaboration with the school-based team for students with significant motor/sensory needs

## **SCHOOL-AGED THERAPY PROGRAM (SATP)**

The School-Aged Therapy Program provides occupational therapy and physiotherapy services to school-aged children and youth with special needs to assist them in meeting their educational goals and to help them achieve their highest level of independent functioning within their home, school and community settings.

The SAT Program is jointly funded and administered by the Ministries of Education and Ministry of Family and Children Development, in partnership with the board of education and MCFD's Service Delivery Areas (SDAs).

## TEACHER OF THE DEAF AND HARD OF HEARING

Teachers of the Deaf and Hard of Hearing (TDHH) are specially trained professionals who have earned a Master's degree in Deaf Education in special education. They are active members of the Canadian Association of Educators of the Deaf and Hard of Hearing (CAEDHH).

### Teachers of the Deaf and hard of hearing (TDHH) in schools:

- Implement/support curriculum for students who are Deaf and Hard of Hearing (DHH)
- Support designated students with their speech and language goals
- Work with students who use hearing aids, FM systems, and cochlear implants
- Help students and train staff to use equipment properly
- Create opportunities to connect students who are DHH both in and out of district
- Develop and implement IEP's
- Collaboration with teachers and other professionals
- Advocacy for teaching practices
- Help develop self-advocacy for DHH students
- Kindergarten hearing screenings and referrals

### Some of the ways TDHH support students in the classroom:

- Support reading and writing
- Support social-emotional issues especially regarding hearing levels
- Increase students' understanding of texts, lessons, and oral language
- Increase students' self-advocacy skills
- Build capacity about the anatomy of the ear, how the ear works, and how to protect hearing.
- Integrate classroom objectives
- Help students understand their hearing loss, their equipment, and teach strategies that help all learners, both hearing and hard of hearing.

### Services Can Vary Depending on Student's Needs:

- Individual or small group sessions
- Classroom-based services
- Collaboration and consulting
- Monitoring or periodic screening

### Resources:

- [Auditory Outreach, Provincial Outreach Program](#)
- [BC Early Hearing Program](#)
- [Canadian Association of Educators of the Deaf and Hard of Hearing \(CAEDHH\)](#)
- [BC Family Hearing Resource Society](#)
- [CANADIAN ASSOCIATION OF SIGN LANGUAGE INTERPRETERS](#)
- [The Canadian Hard of Hearing Association](#)
- [Children's Hearing & Speech Centre of BC \(CHSC\)](#)
- [Deaf Children's Society of BC \(DCS\)](#)

## VISION TEACHER

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. (SPECIAL EDUCATION SERVICES: A MANUAL OF POLICIES, PROCEDURES AND GUIDELINES, 2016 p.74).

SD46 provides support to students who have a diagnosed visual impairment through services from a Teacher of the Visually Impaired & Orientation and Mobility Specialist.

### What We Do

The Teacher of Students with Visually Impairments (TSVI) is trained in working with students who are blind, Deafblind or who have low vision along with students who have a visual impairment with additional disabilities. The TSVI is an important member of the student's educational team and provides direct and indirect services in many different settings including the school and community.

Orientation and mobility (O&M) services provide students with visual impairment with the skills necessary to travel safely and efficiently in a variety of indoor and outdoor environments with as much independence as possible. Students work directly with their O&M specialist.

### Possible Reasons for Referral:

- Documented observations of vision difficulties at school: holds materials too close or too far; head tilt, excessive blinking, squinting; covers eye with hand or rubs eyes; eyes tear excessively; frequently bumps into or drops things; headaches, nausea, double vision and
- A trial of simple classroom adaptations such as preferential seating and access to larger print or adapted materials and
- Current documentation from the student's eye-care specialist is required to be submitted with a referral to the district TVI.

### Eligibility for Services from the Teacher of the Visually Impaired:

A documented report from an ophthalmologist, optometrist, orthoptist or the Visually Impaired Program at the BC Children's Hospital that states one of the following:

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

### Resources:

- [Provincial Resource Centre for the Visually Impaired](#)
- [Children's Low Vision Project of BC](#)

## **SCHOOL PSYCHOLOGISTS**

School Psychologists provide consultation to Inclusion Support Teachers and support for students who demonstrate diverse learning needs. The Psychologist will collaborate and consult with school personnel to assess the learning situation for a referred student and make recommendations for appropriate programming.

Occasionally a Psycho-educational assessment is required and the School Based Team will prioritize referrals for full assessments.

Allocation of Psychologist time is done through the Inclusive Education department. It is important for each school to prioritize referrals through SBT. As each assessment will take between 2 and 4 days to complete (includes file review, observation, assessment and follow up meetings) schools need to ensure that no time is lost waiting for parental consent to be agreed.

### **The role of the School Psychologist is to:**

- undertake comprehensive Psycho-educational assessments for students referred by the SBT to gain further understanding of their cognitive, psychological, academic, social-emotional, and behavioural functioning, and to identify barriers to student achievement
- diagnose and/or identify specific learning difficulties, when appropriate
- recommend interventions such as adaptations, modifications, and/or accommodations that may be implemented by students, parents, teachers and/or district staff to the benefit of the referred student
- interpret assessment results for students, parents, and teachers by means of a written report accompanied by a post-assessment consultation
- provide in-service opportunities for Inclusion Support Teachers and district staff to build capacity on assessment.
- maintain current knowledge of best practice in School Psychology

## COMPLEX TECHNOLOGY TEACHER

Complex Technology teachers work with students with complex communication needs by implementing Augmentative and Alternative Communication (AAC) systems. They support students, school staff, and families find the right tools and technology to support and develop each student's communication competence.

AAC can include but is not limited to, sign language, gestures, pictures, text-to-speech software, and voice output communication systems.

They focus is on:

- Introducing AAC early, especially to promote receptive language development and provide immersion in the AAC system
- Ensuring an AAC system is designed to meet the student's immediate communication needs and also to facilitate further linguistic development
- Acting on the knowledge that AAC does not inhibit natural speech
- Ensuring the student has abundant opportunities to observe proficient use of an AAC system. This will ensure that the student using AAC, like their typically developing peers, benefits from observing fluent communication in their own expressive modality.
- Working in conjunction with a student's family, teacher, and other professionals to ensure that AAC recommendations are consistent with language, learning and other goals. These goals are often identified in a student's individualized education plan.
- Analyzing the communication and participation skills and patterns of the student's peers to inform vocabulary and implementation planning
- Considering core vocabulary needs to ensure a combination of developmental, environmental and functional vocabulary is included in the student's system
- Support a student's communication partners in knowing how to use the AAC system and how best to interact with the student using the system.

## SET-BC

SET-BC is a BC Ministry of Education Provincial Resource Program established to work with school districts to support students who require or would benefit from using technology to access their educational programs. SET-BC services to school districts include consultation and collaboration; Professional Development and training; classroom and student resources; and technology loans.

**What does SET-BC do in SD46:**

- collaborates with district teams to provide professional development activities focused on the use of technology to support diverse learners in the classroom
- assists school districts in training district and school teams on specific technologies used to support their students' access to educational programs
- lends technologies to school districts to support their students' access to their curriculum.

**Reference:**

<https://www.setbc.org/>

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## SOGI EDUCATION

SOGI stands for sexual orientation and gender identity. Since we all have a sexual orientation and gender identity, it includes all of us. Every student understands and expresses their gender differently, with interests and choices that are common or less common for their gender. Some students may be unsure of their sexual orientation or gender identity. Others may identify specifically as lesbian, gay, straight, bisexual, queer, two-spirit, transgender, cisgender, non-binary, or other. A SOGI-inclusive school means all of these experiences and identities (of students and their families) are welcomed, embraced, and never cause for discrimination.

SOGI is one of many topics about diversity discussed regularly in schools, such as when educators speak about race, ethnicity, religion, and ability. SOGI-inclusive education simply means speaking about SOGI in a way that ensures every student feels like they belong. There is no separate and distinct SOGI program or curriculum. Sexual orientation and gender identity are important topics that are interwoven through several curriculum areas and school activities. How the topics are introduced to students is dependent on the age and stage of their development. These topics may also be discussed as they arise in the daily lives of students.

In July 2016, Bill 27- Human Rights Code Amendment Act was passed to include “gender identity or expression” among the protected grounds covered by the **BC Human Rights Code**. The B.C. Ministry of Education and Child Care followed in September 2016 with its own directive asking that explicit references to sexual orientation and gender identity be added to the policies and codes of conduct in each school district. The Ministry of Education and Child Care has produced a SOGI Policy Guide that includes three goals for supporting diverse sexual orientations, gender identities and expressions:

- 1. Visibility:** The diversity of sexual orientations, gender identities and expressions are recognized and valued.
- 2. Protection:** The dignity of all people across the sexual orientation and gender identity (SOGI) spectra is intended to be preserved, as well as protected from harm.
- 3. Inclusion:** Equitable treatment and inclusion are a reality for people of all sexual orientations, gender identities and expressions.

Hence, schools have the legal responsibility to proactively create safe, inclusive learning environments for all students. Some students face physical barriers, while other barriers, like sexual orientation and gender identity, are not so visible.

SD46 follows the Ministry of Education and Child Care’s SOGI Policy manual, as well as the SOGI 1 2 3 model of implementation. This model guides us in developing policies and procedures, creating inclusive environments, and providing appropriate and relevant classroom resources for SOGI. You can read SD46’s SOGI policy [here](#) and our administrative regulations for SOGI [here](#). These regulations outline how our district is supporting students and staff to create SOGI-inclusive schools that value and celebrate diversity here on the unceded and traditional lands and waters of the Skwxwú7mesh Úxwumixw and the shíshálh Nation.

### For more information:

- [School District 46 ~ SOGI Information Page](#)
- [SOGI FAQs for Parents and Guardians](#)



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## OVERVIEW OF THE MINISTRY SPECIAL EDUCATION DESIGNATION PROCESS

The purpose of this section is to guide School Based Resource Teams in understanding the BC Ministry of Education's process of designation of students with diverse needs and funding allocation for the specific categories. It also explains the designation process used in School District 46.

Funding categories are established to assist school districts in identifying the needs of students and providing appropriate resources and educational 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, Fetal Alcohol Spectrum Disorders (FASD), or intellectual impairment, it is the intensity of the disability and the interventions provided that dictate the category in which the student is reported for funding purposes.

**For example** not all students with an FASD diagnosis will be identified as category D - Chronic Health Impairment and not all students with a diagnosis of Learning Disability (LD) will need to be identified in a Ministry Category at all. As noted in the BC Ministry of Education guide, "Supporting Students with LD – A Guide for Teachers", most students with LD can have their needs met without a Ministry identification as the supports and services they require are already in place at the school.

**For more information on learning disabilities, see the following link:**

[https://www2.gov.bc.ca/assets/gov/education/administration/kindergarten-to-grade-12/inclusive/inclusive\\_ed\\_policy\\_manual.pdf](https://www2.gov.bc.ca/assets/gov/education/administration/kindergarten-to-grade-12/inclusive/inclusive_ed_policy_manual.pdf)

**Students will be identified according to the following general guidelines as outlined in the Ministry Special Education Manual:**

- 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 for funding purposes 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 for funding purposes in the educational category that best reflects the type and intensity of educational interventions documented in the IEP
- students who have an identifiable ability, disability or diagnosis, whose needs are addressed through the support of the regular classroom teacher and/or the typical school based services of learning support, counselling should not be reported in a category that generates funding.

## MINISTRY IDENTIFICATION CATEGORIES AND CRITERIA

Students with a significant level of additional needs are assessed and categorized as follows:

LEVEL 1	
A	Physically Dependent
B	Deaf/Blind
LEVEL 2	
C	Moderate to Profound Intellectual Disability
D	Physical Disability/Chronic Health Impairment
E	Visual Impairment
F	Deaf or Hard of Hearing
G	Autism
LEVEL 3	
H	Students Requiring Intensive Behaviour Interventions or Students with Serious Mental Illness
LEVEL 4	
K	Mild Intellectual Disability
P	Gifted
Q	Learning Disability
R	Students Requiring Moderate Behaviour Support or Students with Mental Illness

Categories A, B, C, D, E, F, G and H are commonly referred to as Low Incidence categories.

Categories K, P, Q and R are referred to as High Incidence categories.

More detailed information regarding the above categories and criteria for designation in each category can be found on the BC Ministry of Education website at:

<http://www.bced.gov.bc.ca/specialed/ppandg.htm>

**The BC Ministry of Education Category Checklists can be found at:**

[http://www.bced.gov.bc.ca/independentschools/is\\_resources/se\\_cat\\_chklst.pdf](http://www.bced.gov.bc.ca/independentschools/is_resources/se_cat_chklst.pdf)

Parents need to be aware that a medical or educational diagnosis in itself does not determine the identification. The purpose of the identification is not to label a student, but rather to ensure that additional resources and support arrangements are made available to meet the students' needs.

The BC Ministry of Education special education identification and funding system is a formula funding mechanism. School Districts establish their own arrangements for distributing additional inclusive education resources in ways that are effective and efficient for all students. These arrangements will vary and change over time according to the changing needs of students and schools.

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## **SPECIAL CONSIDERATIONS / SCENARIOS RE: DESIGNATED STUDENTS**

### **PHYSICALLY DEPENDENT – MULTIPLE NEEDS (1701 CODE A)**

- At present, the ministry requires evidence that the student is dependent in all areas.
- As such, a student who is able to use his or her hands to eat yet requires someone to open a container, would not be considered dependent for eating/feeding.
- A student who has food in front of them and requires an EA to stand nearby in case of choking, or to cut the food up/take it out of a back pack, would not be considered dependent for eating/feeding.
- A student who is able to use a walker to take a few purposeful steps (i.e., the student knows where he is going, how to get there, and what to do when they get there) is not dependent for mobility.
- A student who has mobility issues concurrent with a profound intellectual disability, is able to take a few steps unaided, (i.e., he is mobile), yet does not know where he is going, how to get there, or why they are going there could be considered dependent on others for mobility.
- Ensure that goals relating to each of the five areas (i.e., Feeding/Eating, Dressing, Toileting, Mobility, and Personal Hygiene) are embedded in the IEP.
- Where an IEP indicates that a student is able to perform a task that suggests that they are not dependent, there needs to be further clarification (i.e., How does this mean that the student meets criteria?)

### **DEAFBLIND (1701 CODE B)**

- The student may have partial sight to total blindness, however, they require a moderate to profound hearing loss. That is to say, a student who has total blindness and a mild hearing loss would generally not meet Ministry criteria.
- The student must have a degree of impairments, that when compounded, results in significant communicative, educational, vocational, and social skills difficulties.

### **MODERATE TO PROFOUND INTELLECTUAL DISABILITIES (1701 CODE C):**

- A psycho-educational assessment must have been conducted, and be updated as would be reasonable (i.e., there is no need to update every 2 to 3 years unless there is some reason to believe that the student's cognitive abilities have changed), however, where a grade 8 student scored just below the range leading to a designation as having a moderate intellectual disability on measures administered when he/she was in preschool, an updated psycho-educational assessment should occur.
- The student may be designated as having a moderate to profound intellectual disability in accordance with the DSM-IV, the DSM-IV-TR, or the DSM-5.

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## **SPECIAL CONSIDERATIONS / SCENARIOS RE: DESIGNATED STUDENTS**

### **PHYSICAL DISABILITY / CHRONIC HEALTH IMPAIRMENT (1701 CODE D):**

- Complex Developmental Behavioural Conditions (e.g., Fetal Alcohol Spectrum Disorder): There must be a diagnosis and evidence of significant difficulties in multiple areas of function.
- Developmental Coordination Disorder (DCD): Where a student has a DCD diagnosis, to be considered as having a Physical Disability / Chronic Health Impairment, the needs must be extensive and warrant considerable intervention. Where a student has a DCD diagnosis, along with multiple other diagnoses, they may be considered as having a Physical Disability / Chronic Health Impairment.
- Diabetes: As with other chronic health conditions, the impact must have a significant negative affect on the student's ability to access education. Supports must be "above and beyond" what other students require.

#### **Questions to ask and document:**

1. *Is there a diagnosis and is that diagnosis negatively affecting the student's learning (e.g., the student is pulled out of each PE class for blood sugar level testing, to rest and have juice)?*
2. *Is the student receiving EA support to address the health condition and is this documented in the Summary of Student Support services (e.g., delegated NSS support plan)?*
3. *Does the IEP only reference academic goals and related support? The student will only meet criteria for a designation if the goals and objectives are aligned with the diagnosis (i.e., diabetes) that led to the category in which they were claimed.*
4. *Are there social emotional needs? If so, the student will only meet criteria for the chronic health designation if the goals and objectives are indicative of diabetes having a direct or indirect negative impact on learning, and if the student is receiving documented specialized support (e.g., the student misses considerable class time and refuses to attend PE to test blood sugar level because he does not want his peers to know he has diabetes/participates in Type 1 diabetes support group once/week).*

As noted above, supports must be above and beyond what a student with no designation would be eligible to receive. As such, if the intervention was related to child or youth care worker support, for example, you would need to show that the amount of support that this student is getting is over and above what other students are getting - and demonstrate the linkage to the original diagnosis (i.e., diabetes).

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## SPECIAL CONSIDERATIONS / SCENARIOS RE: DESIGNATED STUDENTS

### SEIZURE DISORDER

- As with other chronic health conditions, the IEP must demonstrate a direct link between the seizures and the negative impact on achievement at school - that is, the goals must relate to the medical condition (i.e., “John has Generalized tonic clonic seizures that lead to loss of consciousness. When this occurs, John falls, his body stiffens [tonic] and then his muscles become jerky [clonic]. John’s breathing is often shallow, causing his lips and complexion to look grey/bluish. There is usually excess saliva in John’s mouth and blood if he has bitten his tongue. Once, John lost bladder control. Following the seizures, John is confused, agitated and generally falls asleep. A Nursing Support Care Plan outlines the protocol for administering recovery medication when a seizure lasts more than 2 minutes).
- Also include information related to seizures occurring at home.
- Children who have seizures, are at risk for having attention problems, learning disabilities, as well as difficulty with memory or problem solving. Where a student has learning challenges and a history of seizures (currently controlled), seizures that do not require administration of recovery medication (for example); or has seizures that do not directly impact the student at school, the student should be considered for a special education designation (if appropriate) that best reflects his or her needs.

#### *Questions to ask and document:*

1. *Are the seizures controlled by medication?*
2. *When was the last seizure?*
3. *How long did the seizure last?*
4. *Where did the seizure occur?*
5. *How often are seizures occurring?*
6. *What is the nature of the seizure?*
  - a. *Lapse of awareness/responsiveness*
  - b. *Muscle stiffening*
  - c. *Loss of muscle tone that causes falling*
  - d. *Body jerks*
  - e. *Loss of bladder control*
  - f. *Other*

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## **SPECIAL CONSIDERATIONS / SCENARIOS RE: DESIGNATED STUDENTS**

### **ACQUIRED BRAIN INJURY**

- As with other chronic health conditions, the IEP must demonstrate a direct link between the brain injury and the negative impact on achievement at school - that is to say, the goals must relate to the medical condition.
  - The file should include evidence pertaining to:
    - Severe concussion, Cerebrovascular accident (stroke), surgery;
    - Hospitalization;
  - When designating D, ensure there is data regarding a medical diagnosis to support the chronic health condition, with IEP goals and objectives aligned accordingly.

#### **Questions to ask and document:**

1. *Does the student's needs and associated IEP fit better with a Learning Disability Designation or need for Positive Behaviour Intervention or Support? If so, designate accordingly.*

### **HEART ISSUES OR OTHER CONDITIONS DURING INFANCY, OFTEN RELATING TO PREMATURE BIRTH**

- As with other chronic health conditions, there must be a current diagnosis. A history of diagnosis(es) associated with conditions (e.g., jaundice, heart condition, cleft palate) that have been resolved, would not meet criteria for a chronic health designation. In addition, circumstances such as premature birth, would not be considered a chronic health condition.
- The above noted, the student whose cleft palate has resulted in severe articulation problems, may be eligible for a special education designation, and a student who was born premature and has visual or hearing impairment, intellectual or social-emotional difficulties, may be eligible for designation as a student with special needs.

### **CANCER**

- As with other chronic health conditions, the IEP must demonstrate a direct link between the issue/condition and the negative impact on achievement at school - that is, the goals must relate to the medical condition.

#### **Questions to ask and document:**

1. *Is the student attending school? Frequently absent? Hospitalized?*
2. *Are they missing school because they are at home because of a suppressed immune system?*
3. *Is there a Hospital Homebound teacher involved?*
4. *Are they under a Provincial Resource Program (PRP) hospital program? Were they previously under the PRP hospital Program and if the PRP claimed the student, then the Surrey school district must demonstrate services above and beyond - even though they did not claim the student.*

## **SPECIAL CONSIDERATIONS / SCENARIOS RE: DESIGNATED STUDENTS**

### **VISUAL IMPAIRMENT (1701 CODE E)**

There must be evidence of:

- Visual acuity of 6/21 (20/70) or less in the better eye after correction. That is to say, that a student who has visual acuity of 20/70 without correction, would not meet criteria.

### **DEAF OR HARD OF HEARING (1701 CODE F)**

#### **Unilateral Hearing Loss:**

- Annual audiograms are required for a student who has a unilateral hearing loss.
- There must be evidence of language /communication needs and associated speech-language support.

#### **Bilateral Hearing Loss:**

- Assessment information indicates that the student has substantial educational difficulty due to the hearing loss.

### **AUTISM SPECTRUM DISORDER (1701 CODE G):**

- Where an autism diagnosis was proffered out of the province (or Canada), the Autism Programs Confirmation of Previous Diagnosis of Autism Spectrum Disorder must be completed and submitted to Student Support.

### **INTENSIVE BEHAVIOUR INTERVENTION OR STUDENTS WITH SERIOUS MENTAL ILLNESS (1701 CODE H):**

- There must be clear documentation of ongoing intensive behaviour/mental health needs in the file (to demonstrate that this is occurring in multiple environments over time); Integrated Case Management meetings must occur at least once/year and more often as required in accordance with the student's needs.

## RATIONALE FOR PLACEMENT

### (Category D-Chronic Health/Physical Disability and Category H -Intensive Behaviour Intervention/Severe Mental Illness only)

- In order to support the student's placement into these two categories, the Inclusion Support Teacher or Administrator shall write a Rationale for Placement statement to accompany the request for ministry designation form. This information is extremely helpful for placement, ongoing information and in support of a Ministry of Education Special Education audit.

Chronic Health or Physical Disability	Intensive Behavioural Intervention or Severe Mental Illness
<ul style="list-style-type: none"> <li>Diagnosis from a medical practitioner and date of Diagnosis.</li> <li>Background information about the diagnosis relating to the domains in the IEP planning tools (see IEP section of Practice Handbook)</li> </ul>	<ul style="list-style-type: none"> <li>Background Information: History of behaviour across time and settings (increase in frequency, intensity or severity).</li> <li>Any diagnosis from a Mental Health Professional.</li> <li>Behavioral Assessment used (BASC, Connors, FBA or Functioning Level-IEP Planning Tool)</li> </ul>
<ul style="list-style-type: none"> <li>Educational impact of the disorder(s) that adversely affects the student's ability to learn and access the curriculum like other students in the class.</li> <li><b>Give examples of how student is not able to access education</b></li> </ul>	<ul style="list-style-type: none"> <li>Educational impact of the behaviours that adversely affects the student's ability to learn and access the curriculum like other students in the class, or interferes with the learning of others.</li> <li><b>Give examples of how student is not able to access education or is disruptive</b></li> </ul>
<ul style="list-style-type: none"> <li>What services beyond regular education are in place to assist the student in accessing his educational program?</li> <li><b>To fully access the educational program, the student needs (list strategies and service levels from EA and IST etc.). "These education interventions exceed the ability of the enrolling classroom teacher to implement on their own and require additional support"</b></li> </ul>	<ul style="list-style-type: none"> <li>What services beyond regular education are in place to assist the student in accessing his educational program?</li> <li><b>To fully access the educational program, the student needs (list strategies and service levels from EA and IST etc.). "These education interventions exceed the ability of the enrolling classroom teacher to implement on their own and require additional support"</b></li> </ul>
<p>Summary Statement:</p> <ul style="list-style-type: none"> <li>Student's diagnosis (name) and the intensity and extent of their difficulties has elicited the need for supplemental service that enable them to access an appropriate educational program in the least restrictive environment, allowing them to participate in a meaningful way that best suits their specific and unique needs.</li> <li><b>The intensity of these needs and services required to access an educational program are best reflected by the Chronic Health designation.</b></li> </ul>	<p>Summary Statement:</p> <ul style="list-style-type: none"> <li>Student's diagnosis/behavioural concerns (name or list behaviours) and the intensity and extent of their difficulties has exhausted the resources and capacity to manage the behaviour in the classroom setting without support and interferes with the learning of others.</li> <li><b>The intensity of these needs and the planning, coordination and cross agency support services required to access an educational program in the least restrictive environment are best reflected by the Intensive Behaviour Intervention designation.</b></li> </ul>



## ALLOCATING ADDITIONAL INCLUSIVE EDUCATION RESOURCES

### Funding for Students

The BC Ministry of Education funds students with diverse needs in two ways. In addition to general enrolment funding, the Ministry provides school districts (not individual students) with supplemental funding for students with diverse needs identified in categories A, B, C, D, E, F, G, and H. These students are considered “low incidence” (typically <1% of the student population).

Funding for these categories is as follows (Updated for the 2024-2025 School Year):

Level	Category	Description	Funding
1	A B	Physically Dependent Deaf/Blind	\$50,730.00
2	C D E F G	Moderate to Profound Intellectual Disability Physical Disability/Chronic Health Impairment Visual Impairment Deaf or Hard of Hearing Autism	\$24,070.00
3	H	Students Requiring Intensive Behaviour Intervention or Students with Serious Mental Illness	\$12,160.00

School Districts have the flexibility to utilize this funding in ways that best serves all students with diverse needs. The district uses a formula based on the level of student need in the school, to allocate additional resources to schools.

Students considered in “high incidence” categories are identified as follows

- K - Mild Intellectual Disability
- P - Gifted
- Q - Learning Disability
- R - Students Requiring Moderate Behaviour Support or Students with Mental Illness

There are some students whose special needs could be considered in two or even three different categories e.g. Gifted and Learning Disabled. However, for Ministry identification and funding purposes a single category is identified. However, the IEP will include goals from other aspects of the student’s learning profile.

Funding to support these students and other inclusive education services (e.g. counselling, learning support) is included in the general student enrolment funding.

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## SCHOOL-BASED TEAM

### What is a school-based team?

A school-based team is a core group of staff within a school who meet on a regular basis to problem solve, make suggestions, and plan interventions for students who are struggling within the classroom.

A school-based team's structure may differ from school to school depending on the school's population and the needs of the students within.

A school that may have a higher number of referrals, may have a school-based team "referral" process as well.

The team will ensure that a case-manager is in place for each referred student and may suggest initial intervention strategies for the student, teacher, or other school-based staff. When the case manager feels that more in-depth problem solving is necessary, the student will be brought forward to the school-based team meeting.

A school-based team meeting will focus on ensuring that every referred student is being monitored and has a key support person within the school. The school-based team meeting will also provide an opportunity for additional team members to participate in the planning process for the student.

*"A school-based team is an ongoing 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"*

*Special Education Services: A Manual of Policies, Procedures and Guidelines (BC Ministry of Education, 2016, Glossary)*

### School-Based Team Members

The ability of a school-based team to support a student who is struggling is greatly enhanced when it can draw on the collective knowledge and experience of multiple professionals within the school and the district, as well as those individuals supporting the student outside of the school.

Each member of a school-based team brings with them a unique perspective, specialized training, and a multitude of experience specific to their role within the district. Parents and guardians, and others who support a student outside of the school, are often able to assist the team when problem solving and brainstorming supports.

#### School-based team membership usually includes:

- The school Principal and/or Vice Principal
- An Inclusion Support Teacher
- At least one Classroom Teacher (often the referring teacher)
- A School Counsellor
- When applicable, Additional school staff:
  - Indigenous Education Teachers
  - Child Care Workers
  - Educational Assistants
- When applicable, District Staff:
  - District Inclusion Support Teacher
  - Autism Support Teacher
  - Inclusive Technology Support Teacher
  - English Language Learner Teacher
  - Deaf or Hard of Hearing Teacher
  - Vision Teacher
  - Family Support Navigator
  - Therapy team: Occupational Therapist, Physical Therapist, Speech and Language Pathologist
- When applicable, Outside Agency Staff

## SCHOOL-BASED TEAM

### Roles and Responsibilities

A well-functioning school-based team assigns roles and responsibilities among team members in order to ensure that:

- supports and interventions/adaptations are provided to students as soon as possible
- team members and key members of the student's support team are notified of on-going plans to support the student
- meetings are run efficiently and on-time
- meeting minutes, interventions/adaptations and action items are documented in the clevr referral system

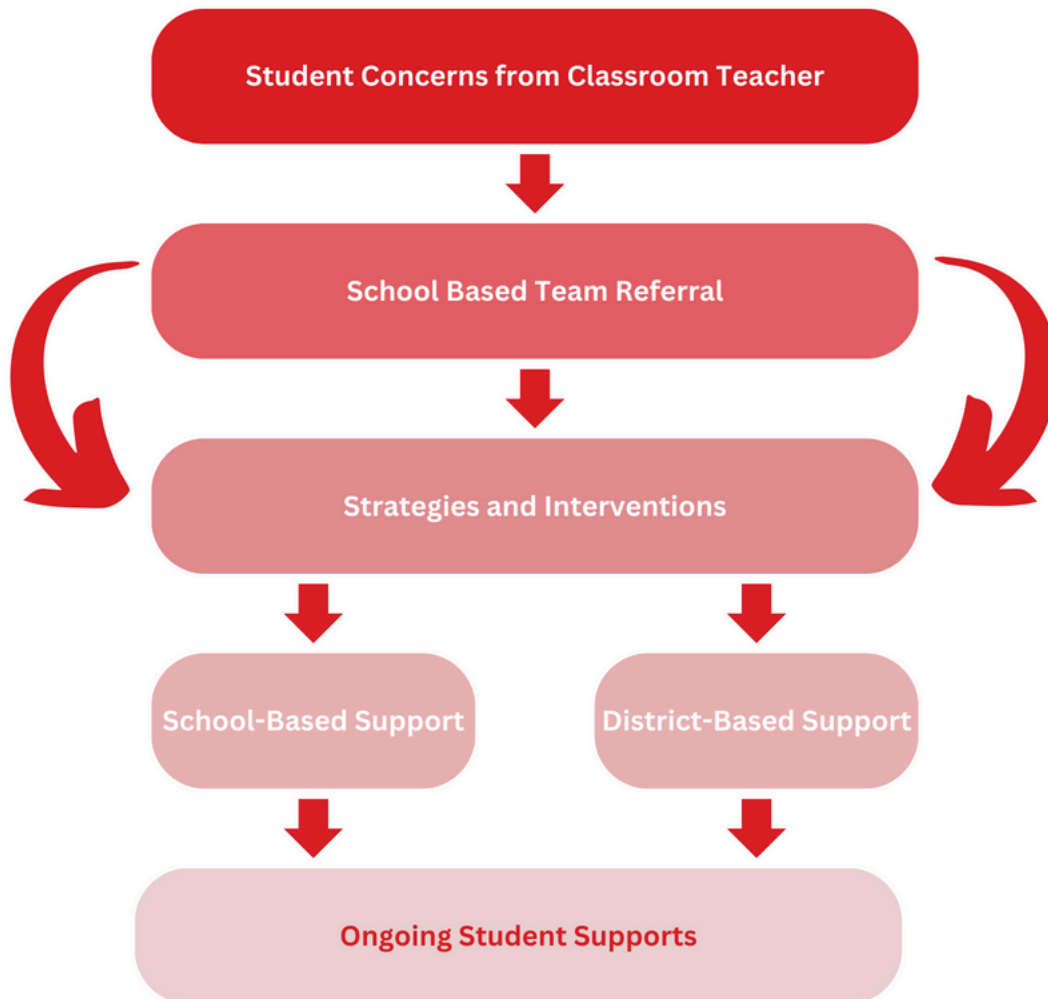
When organizing a school-based team, team members should ensure that at least one person takes on each of the following roles:

1. Meeting Chair: This team member ensures that the meeting discussion is solution-focused and that it follows the items on the agenda. The meeting chair will also be responsible for keeping the team on track for time.
2. Recorder: This team member records the minutes of the meeting in clevr and distributes (emails) the plan following the meeting.
3. Co-ordinator (typically the Inclusion Support Teacher): This team member schedules the school-based team meeting, informs the participants of the date and time, and creates the agenda from the referrals.

## SCHOOL-BASED TEAM

### Intervention Process

Before a student has any changes made to their educational programming (learning assistance, resource class, modified programming, gifted), there must be evidence that the intervention process has been followed.



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## SCHOOL-BASED TEAM

### School Based Team Process

A school-based team should create a process for referrals, meeting preparation, meetings and follow-up activities that occur after the meeting. Having a consistent process will be appreciated by everyone involved.

- Establish a time that the school-based team will meet each week.
- Treat this time as sacred.
- Make a commitment with your team to protect this time and to meet even if there are no new referrals that week. Time can always be used for updates and follow ups.
- Enshrine this time and process in school culture or your entire process will be undermined and become secondary to immediate and more pressing demands.

### Referrals

A referral to the school-based team may be made by a classroom teacher, parents or guardians, or another school staff member.

A standardized referral form is highly recommended and not only helps to organize and process referrals, it also helps with record keeping as a referral form documents a base-line of performance that can be utilized when reviewing the effectiveness of recommended interventions.

#### **A standard referral form should include (at a minimum):**

- The student's identification information (name, grade, date of birth, Ministry category, current case manager, etc.)
- The reason for the referral and main area(s) of concern
- Strategies and interventions already implemented and their level of success (Tier 1 and possibly Tier 2)
- Suggestions for future interventions, strategies or referrals for service
- Current level of performance or observations (academic, behavioural, social, emotional, etc.)
- Description of the anticipated or hopeful outcome of the school-based team referral It is helpful for a referral form to identify the steps and interventions that should already have taken place prior to a referral being made. Tier 1 interventions should always take place prior to a referral to the school-based team. A referral to the school-based team is considered a Tier 2 intervention.

#### **Procedures should be in place to:**

- Ensure information is promptly shared
- Plan for and facilitate transitions
- Ensure consistency in reporting and documenting plans
- Promote communication and collaborative decision making between the school and home
- Communicate planning decisions to parents, student and appropriate staff; and
- Resolve differences effectively

Special Education Services: A Manual of Policies, Procedures and Guidelines (BC Ministry of Education, 2016, p. 13)

## SCHOOL-BASED TEAM

### Meeting Preparation

Prior to the school-based team meeting, an agenda should be created and distributed to everyone who has been invited to the meeting.

A standard agenda should include (at a minimum):

- The time, date, and place of the meeting
- The name of the student who is being referred and any specific information that would be important to have before-hand (reason for referral, etc.)
- The names of the individuals who have been invited to the meeting

The agenda should be sent out prior to the meeting and with enough time for the team members to gather supporting information and documentation that may assist with the team's discussion.

In addition to the information provided on the school-based team referral form, the following information may be helpful to collect and discuss during the meeting:

- attendance records
- incident reports
- the current IEP
- previous report card marks and comments
- observations from teachers, parents and others who work with the student.
- information regarding outside agency supports already in place
- previous assessment results (academic or behavioural)

Any team members with first-hand knowledge of the student should be encouraged to share that information at the meeting.

### The Meeting

During the school-based team meeting, the discussion should be student and solution-focused.

A process that works well for school-based team discussions begins by discussing the student's educational background and current level of performance. Next, the team can identify the student's strengths and area(s) where they are currently struggling. Lastly, the team can brainstorm and suggest interventions and strategies for the student and their support team.

If a case manager has not already been assigned to the student, one should be assigned at the school-based team meeting. This case manager will work with/as the point person who will coordinate the interventions and strategies that are recommended.

The Meeting Chair will help to moderate the discussion and the Recorder will document the minutes in clevr. Action item follow-up dates are determined and the case manager is responsible for the follow through of these items to help determine next steps.

## **SCHOOL-BASED TEAM**

### **After the Meeting**

Detailed school-based team meeting minutes and an effective distribution process are essential when planning successful interventions for students. At the conclusion of the school-based team meeting, a copy of the meeting minutes should be shared with all team members with an action plan determined. It is recommended that the minutes are emailed through the clevr email function. If there is Inclusion Support Teacher Clerical Staff at your school this task may be completed by them following the meeting.

If there is a future school-based team meeting for the student, it may be beneficial to begin that meeting by reviewing the minutes of the previous meeting and the outcome of the action items.

Depending on the outcome of the interventions/adaptations referral to additional services may be required.

### **District Services may include, but are not limited to:**

- Vision Support Teacher
- Deaf or Hard of Hearing Support Teacher
- District Based Inclusion Support Team
- Family Support Navigator
- District-Based Counsellor
- English Language Learner Teacher
- Inclusion Technology Teacher
- Autism Support Teacher
- Occupational Therapist
- Physical Therapist
- Speech and Language Pathologist
- Child and Youth Psychiatrist
- School Psychologist
- Academic or Behavioural Assessment

### **End of Year**

At the end of the school year, all school-based team meeting minutes should be printed, filed and placed under the “referrals and assessment” tab of the student’s confidential file.

Action items should be updated to reflect any additional follow-up for the next school year.

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## THE INCLUSIVE EDUCATION PLAN PROCESS

The Inclusive Education Plan process helps to guide, develop and document specially designed instruction for each student's unique academic, social and behavioural needs. Through a student-centered strength-based approach, teachers take into account the student's readiness and current level of development. Each student's present level of performance is used as the basis for developing IEP goals and objectives that aim to:

- value the uniqueness of each student; their strengths and stretches
- create partnerships with the home and community
- support diversity as a natural and inherent condition of schools
- strive to create an effective, inclusive learning environment for all students
- provide access to appropriate educational environments that meet the individual strengths and needs of each student

### Who needs an IEP?

- **all students with a Ministry Special Education identification, except those Ministry identified students who require only minor adaptations, whose program is not modified and who are receiving in any one school year, 25 hours or less remedial instruction by a person other than the class teacher**

It is not necessary for students without a Ministry identification receiving regular support services to have an IEP. For some students without an identification, whose needs are ongoing, individualized and exceptional, it may be in the best interests of the student to use a Student Support Plan (SSP). The SSP process follows exactly the same process as the IEP process - the only difference is that the student has no formal Ministry Special Education identification.

### The IEP meeting:

- routinely takes place in the Fall to develop the goals and objectives for the school year
- involves Parent, Student, Classroom Teachers, Inclusion Support Teacher, Principal (if possible), EA (if appropriate). Depending on individual circumstances, it may involve other professionals e.g. Speech and Language Pathologists (SLP), Occupational Therapist (OT), or other outside agency supports
- provides an opportunity for collaborative planning
- needs a clear agenda and timeline for completion

### Communicating with Parents

Arrangements for ongoing communication with parents needs to be agreed as part of the IEP process. The Inclusive Education Plan (IEP) is used to summarize the assessment(s) and planned interventions for students with diverse needs. The IEP does not outline the entire curriculum for a student, but focuses on prioritized goals and objectives that are additional to or different from what most other students in the class may be doing. It is often the Inclusion Support Teacher who is the case managers responsible for writing the IEPs in collaboration with classroom teachers.



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## THE INCLUSIVE EDUCATION PLAN PROCESS

The IEP must include evidence of parental consultation and ongoing communication.

The IEP:

- has required components e.g. specific date, evidence of parental involvement
- includes student voice: interests, learning preferences, what you need to know about me
- has specific, measurable, achievable, and relevant objectives
- has a review date
- is copied for the parent and the student file

The IEP is a working document accessible to teachers at all times. Students should know what their IEP goals are.

### Checklist for the IEP Case Manager

- review previous IEP to determine if it is still relevant
- obtain and review current assessments/reports to determine baseline and to monitor progress
- provide parent feedback forms in advance of the IEP meeting date – carefully consider family/student perspective
- set a date/venue for the IEP meeting and invite appropriate personnel
- make appropriate file review and progress reports available
- circulate current IEP to staff
- prepare an IEP meeting agenda
- consider whether current Ministry designation continues to be appropriate or not
- summarize the IEP discussion

### Role of the Parent/Guardian in the IEP Process

School District 46 recognizes the vital role parents/guardians have in planning for the education of their children.

It is expected that the parents will work in partnership with the school in planning, developing and implementing their child's Inclusive Education Plan.

*"Parents of Students with Special Needs know a great deal about their children that can be helpful. Collaboration should be sought in a timely and supportive way, and the input of parents respected and acknowledged"* (BC Ministry of Education, A Manual of Policies, Procedures and Guidelines, Section B4).

### Role of the Student in the IEP Process

School District 46 recognizes the importance of student participation in the IEP process.

Many students who require an IEP *"can contribute to the process of assessment and planning for their own educational programs, and provide an evaluation of the services available to them"* (BC Ministry of Education Special Education Services: - A Manual of Policies, Procedures, and Guidelines, Section B5).

Goal setting is an important life skill and the IEP process offers an opportunity for students to be involved in setting personal goals and measuring their progress. Where appropriate, the student must be offered the opportunity to be consulted about and participate in the preparation of their IEP (BC School Act, Section 168 2a).

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## **SPECTRUM OF SUPPORTS AND PLACEMENTS FOR INCLUSIVE EDUCATION**

To fully support the diversity of our exceptional students in the least restrictive, most enabling environment for their educational program, the school district offers a range of supports and classroom placements to meet their needs (see graphic on Spectrum of Supports and Placements). Their education can take place in a variety of settings or environments such as resource rooms, community-based programs or other classrooms that allow for maximum opportunities for social inclusion and instruction with their age-appropriate peers.

Students are first supported in their neighbourhood schools, within an inclusive environment, to allow them access to peer modeling and quality instruction within their classroom. Using the “Service Delivery Model Triangle”, the enrolling staff and school-based resource team design and implement a personalized educational program addressing the student’s specific challenges and designation. This may include specific life skills or personal care instruction, or other vocational and community-based skills.

### **SCHOOL BASED RESOURCE ROOM PROGRAMS/STREAMS**

For students who have multiple disabilities or those with unique issues around seating, lifting, hygiene, safety or sensory issues, alternate classroom settings may be designed and used at the school level. These areas/classrooms are extensions of the regular school classroom where teachers, EA’s, Principals, Parents and other related professionals share and deliver the educational program to the student. The team plans and delivers instruction in both the resource room area and the enrolling classroom. This space and programming can be used to support other students with individual needs and can supply non-categorical support services. There could be a specific focus or theme to the instructional time (as in work experience readiness skills or financial life skills in a secondary setting).

### **DISTRICT BASED RESOURCE PLACEMENTS**

There are times when the educational/behavioural needs of the student cannot be met at the school-based level, and the student is more suited for an intensive and technically based educational setting. There are also times when the student’s needs adversely affect others in the educational setting. The school team can refer the student to other placements within the school district. These programs offer a high level of expertise to address specific learning needs and teach disability specific skills so the student can gather the skills necessary to function in an integrated classroom and community setting in the future.

It is expected that as the student learns more skills, the level of inclusion increases and eventually returns to their neighborhood school or classroom with their peers. Students may move up and down the Spectrum of Supports and placements throughout the school career.

## BEST PRACTICE IN SUPPORTING STUDENTS SERVICE DELIVERY MODEL

Supporting the full participation of students as members of the school community in the most enabling and welcoming environment, as well as the promotion of their learning success in intellectual, social, emotional, physical growth and self-esteem in their own unique way.

### Best Practice:

This chart depicts the delivery of school district supports for learners. The pyramid shape predicts that the number of students to be supported decreases as the level of support increases. Level one and two (green) represent universal interventions successful for 80-85% of the student population. Level three (yellow) represent interventions for 10-15% of students and level four (red) represents intensive interventions for approximately 5% of the student population.



## **LEVEL ONE SUPPORTS: USING THE CAPACITY OF THE CLASSROOM TO SUPPORT LEARNING**

Level One supports are more commonly known as Tier One supports in the Response to Intervention and Instruction Model. In our service delivery model, Level One and Level Two supports are both green and make up our Tier One interventions. The goal of these two levels is to have the team work collaboratively, to support children in the classroom setting so that the student does not have to transfer and generalize skills learned in a pull-out model or different setting. The key component to Level One and Level Two supports is the collaboration of services and instruction through the Inclusion Support Teacher (IST) based in the school-based budget. Each school is allocated a base special education amount to staff the Inclusion Support Teacher role within the school (the school can enhance the amount through its school-based budgeting process). The IST is responsible for the delivery and coordination of inclusion services in the school and usually chairs the school-based team.

The IST time is divided between; the coordination of services and associated paperwork necessary for this and the designation process; the assessment of students for psycho-educational services and other standardized measures used; the instruction/remediation of specific skills identified by school-based team within the classroom and resource area setting.

### **LEVEL ONE SUPPORTS**

Teacher, Parent, Student, Administrator

Service in the classroom, prevention programs, peer supports, Technology use  
Supported by: communication, inservice, mentoring, adaptations, Early Learning Team, Counsellor  
**Access/Evaluate process with supports in place.**

#### **Level One Behaviour Support and Assessment Tools: Anecdotal Monitoring and recording.**

These are shared with the parent, the administrator and the Inclusion Support Teacher at the school. Using the stories, the team identifies what the possible function of the behaviour might be and develop some basic support strategies to address the concern (environmental, curricular, social skills or self-regulation). Specific plans and communication strategies are established to support the student, and a monitoring strategy is created (communication book home, anecdotal record/notebook etc.). If after three to six weeks of using the strategy and no behaviour change is evident, then move to level two supports and assessment.

## LEVEL TWO SUPPORTS: USING THE CAPACITY OF THE SCHOOL TO SUPPORT LEARNING

Level Two Supports involve utilizing the full capacity of the school to provide comprehensive support for learning through universal supports. By leveraging various resources, programs, and expertise available within the educational institution, we aim to create an inclusive and enriching environment that promotes student success and well-being. Through collaborative efforts, such as targeted interventions, specialized instruction, and access to academic and social-emotional support services, we strive to meet the diverse needs of all learners, fostering their growth and achievement.

### LEVEL TWO SUPPORTS

School-Based Team (SBT)- Consider Designation?  
Service in regular classroom supported by:  
Inclusion Support Teacher, Counsellor, EA, Numeracy and Literacy Teachers,  
Indigenous Education Teacher  
**Access/Evaluate process with supports.**

#### Level Two Behaviour Support and Assessment Tools: Establishing a Baseline that the Behaviour is outside the Norm

If challenging behaviours do not reduce with level one supports (adaptations, reinforcements etc.) then the team should meet and collect further data to refine their ideas of what is causing the behaviour (antecedents). Tools that could be used that are simple and effective behaviour data gathering tools:

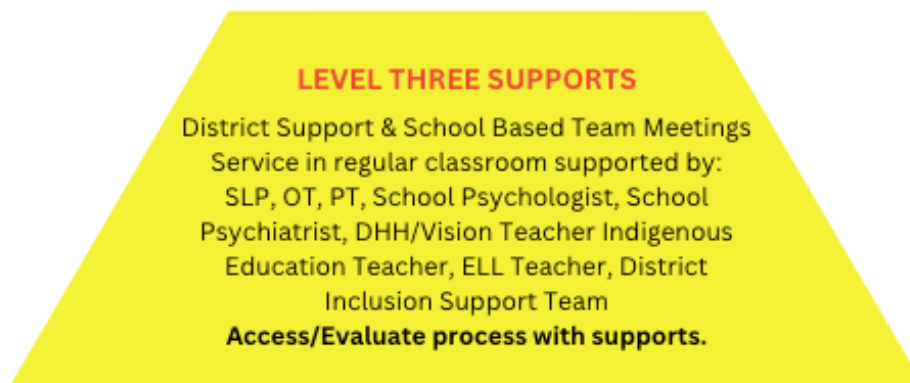
- CB-IEP Planning and Functioning Level Checklist for Behaviour, Autism, Learning Disabilities and Chronic Health.
- ABC chart
- Tracking Sheets
- Frequency Count checklists

Not only will the data collected inform further interventions and instructions, it will show that the behaviour is outside the normal expectations that occur in a regular classroom setting. This allows the team to begin the examination to designate the student under the “Moderate Behavioural Support” category under the Ministry of Education Criteria. A CB-IEP identifies the goals, objectives and strategies to support the behaviour concerns and needed skill instruction necessary.

## **LEVEL THREE SUPPORTS: USING THE CAPACITY OF THE DISTRICT TEAM TO SUPPORT LEARNING**

If Level One and Two supports are universal supports (Tier-One or the green zone of Response to Intervention and Instruction triangle), then Level Three (Tier-Two or yellow zone of the triangle) supports are aimed at supporting the ten to fifteen percent of students who need more intensive and coordinated support to be successful academically and social/emotionally. These supports include the use of extended school base team meetings, district specialist staff and more direct remediation and instruction to address specific skill concerns.

Addressing the core needs of the student, environmental changes to support learning, curriculum adaptations and basic behaviour change strategies, not only support individual students but have class wide impact as well. Addressing the issues identified through a beginning Functional Assessment of Behaviour in these three domains should bring about significant academic and behavioural changes in the student. Accessing level three supports comes from a referral using the School/District Based Team Referral form.



### **Level Three Behaviour Support and Assessment Tools: More Sensitive Functional Assessment of Behaviour tools and Standardized Assessments**

When using Level Three (Tier Two) supports, further data collection tools can be used to inform intervention and instructional support. District team members work with the school based team to gather data to collaborate with the team and other members to put in a Positive Behavioural Support Plan. Tools to assist in this process and support designation in the Intensive Behavioural Supports/Severe Mental Health category could be:

- Conners 3 Behaviour Rating Scale - completed by school counsellor
- Social Skills Rating Scale
- BASC

Resulting from this process should be additional information to add to the CB-IEP, build an effective Safety Plan for all staff and a behaviour tracking system to monitor growth.

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## REFERRAL PROCESS FOR LEVEL 3 SUPPORT: QUICK REFERENCE GUIDE

### New Students: (Please complete the following process in order)

- FILE REVIEW is best practice for Classroom/Inclusion Support Teacher (Read the file).
- Bring student to School Based Team Meeting (invite any person who has info on student).
- Complete the School-Based Team Meeting Minutes form on CLEVR
- Try in-school interventions
- Seek consultation with your Key Therapist for OT/PT and/or SLP referrals.
- If a referral is the recommended outcome at the SBT Meeting or by the Key Therapist, complete the District Based Team Referral form on CLEVR.
- Get Informed Consent from parents for consult and/or assessment before submitting DBT referral. Upload Informed consent to DBT Referral in CLEVR.
- Ensure the following are complete:
  - OT/PT and/or SLP referrals → Complete the Pre-Referral Checklist in CLEVR.
  - Psycho-Educational Assessment Referral → Complete the Psych-Ed Academic and/or Behaviour Assessment Tabs on the DBT Referral form in Clevr. → Complete the Psycho-Educational Assessment Package.
  - PT Referral → Complete the PE Participation Screen form and upload to CLEVR.

### Ongoing students:

- Invite Therapists and Parents to CB-IEP meeting.
- Give copies of CB-IEP to Parents and Therapists. If a Therapist's name is on the CB-IEP, they must receive a copy of the CB-IEP. Do not include a Therapist's name on the CB-IEP unless they have direct involvement in setting goals for the CB-IEP.
- Yearly Consent: signed at an CB-IEP Meeting for ongoing service

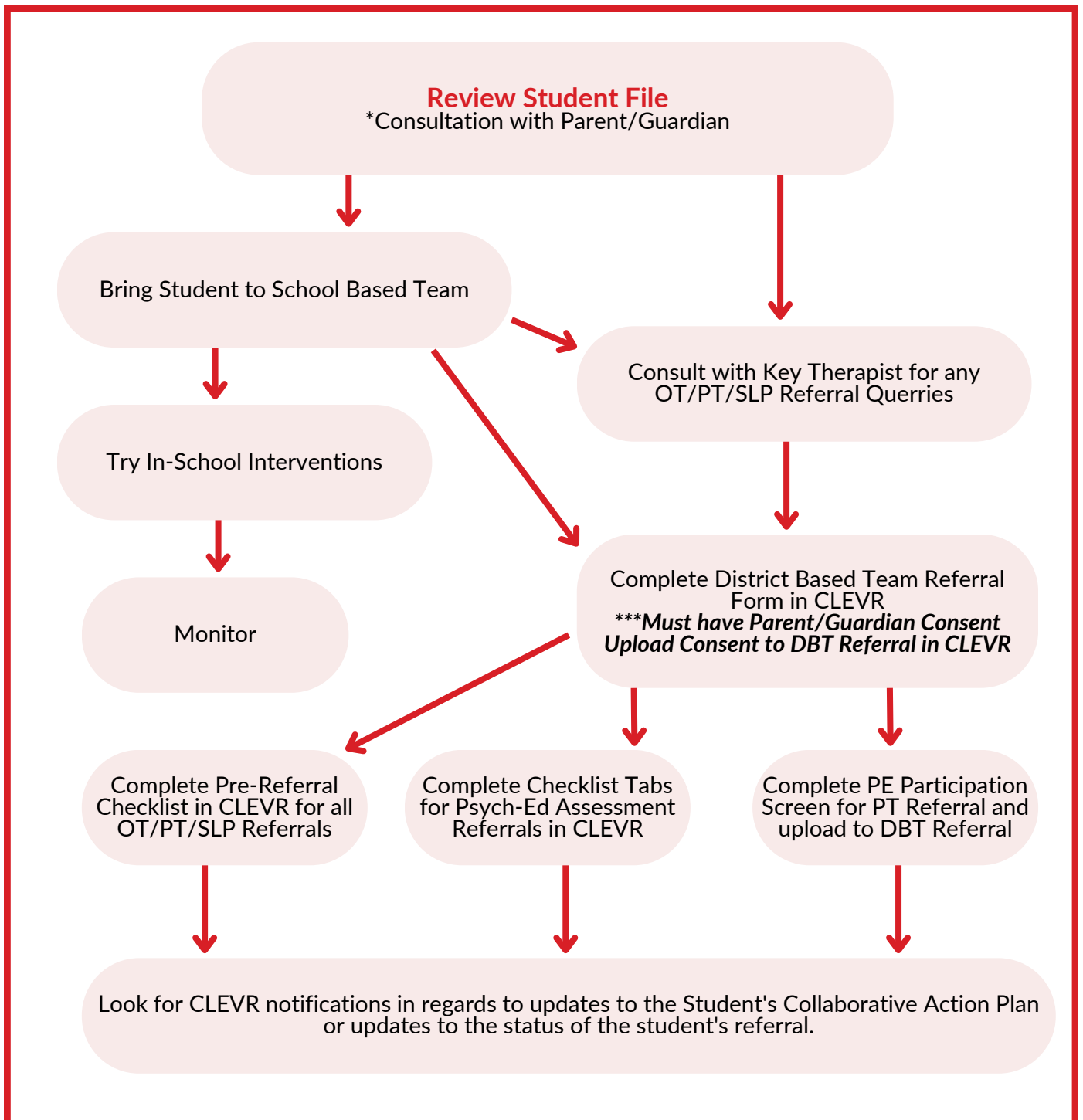
### When Therapists are scheduled to work at your school:

- Check attendance, ensure the child is there, perhaps put a reminder on your calendar and contact parent the day before. If child is absent in am, please call ISS (604-885-6782) who will contact the therapist directly to cancel.
- Advise classroom teacher that the student will be pulled from class.
- Ensure they have a suitable place to assess/work with the student.

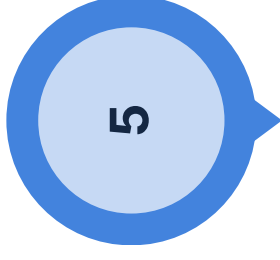
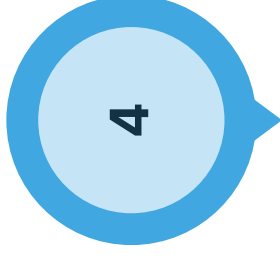
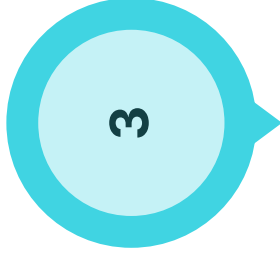
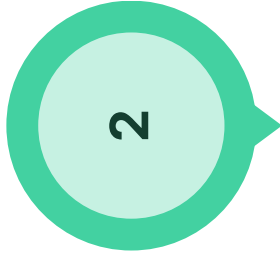
### Post Assessment Process

- Once the observation and assessment has been completed, the therapist will leave a consult note to advise the parents that the child has been seen.
- IST and Therapist will set up a meeting to debrief the parents. This should happen as soon as possible after an assessment.
- After the debrief, the Therapist will complete the report and send it to the IST and Parent.

## REFERRAL WORKFLOW







**SCHOOL BASED TEAM**

**Student Referral to School Based Team**

- concerns brought forward from the Classroom Teacher, EA, Principal, Case Manager or Parent/Guardian.

**School Based Team Discussion**

- Team discusses adaptations and appropriate referrals

**PRE-REFERRAL REQUIREMENTS (IF REFERRAL RECOMMENDED)**

- Complete the Pre-Referral Checklist for all therapy referrals.
- Complete the PE Participation Screen for Physical Therapy referrals.
- Forms are embedded in SBT Meeting Minute Tabs

**Note:** Therapy services prioritized for students on a diagnostic path.

**DISTRICT BASED TEAM REFERRAL**

- Complete the District Based Team Referral form.
- Ensure all details are filled; blank referrals will not be accepted.

• Submit the referral to the requested therapy discipline(s) for consultation. (Via SUBMIT TAB in Form)

**THERAPIST CONSULTATION**

- Therapist(s) contacts case-manager for consultation after receiving the submitted referral form.

Therapist will indicate:

- More Information Needed;
- Waitlist;
- Declined;
- In-Progress;
- Closed/Resolved

**INFORMED CONSENT**

If therapist(s) indicated the referral is appropriate and they will be providing service to the student:

- Obtain informed consent from parent/guardian for services.

The informed consent for therapy services is intended to be continuous, remaining valid and operative for the entire duration of the student's association with SD46, unless withdrawn or modified by express written instruction.

**CAP Notes Communication**

- Action: Use CAP (Collaborative Action Plan) tab to share information between Case Manager and District Based Team
- Document all relevant actions and communication
- Ensuring all forms are accurately completed is crucial to maintaining a smooth process.
- Use the "Files and Links" tab to share all relative reports including but not limited to: Psychology, Diagnoses, Paediatrician, Therapy, Behavioural, Informed Consent, Medical Specialist, Hearing & Vision etc.
  - Label File: SCHOOL-LASTNAME, FirstName, ReportName, MONTH/YEAR

## **LEVEL FOUR SUPPORTS: USING THE CAPACITY OF THE COMMUNITY TO SUPPORT LEARNING**

Level Four (Tier three or the red zone of the of the service delivery model triangle) represents the most intense supports for the three to five percent of the student population with the greatest needs. Many of these needs are in the area of physical, social emotional, and mental health areas. This level rests on the effective communication and collaboration with many team members from many agencies. The key to successful interventions and instruction rests in the team’s ability to identify the core needs and work together across settings to support the individual student and problem solve. This would include working with outside therapists and consultants to support a cohesive and comprehensive program (**See Administrative Regulation 2030 for guidelines**).

This level involves the use of inter-ministerial meetings and minutes, the use of suicide and risk assessment tools, and more complex behavioural assessment measures. Students at this level are often referred to and supported in alternate placements, usually within the Sunshine Coast Alternate School. Included in this level is a referral and team coordination with the Ministry of Children and Family Development Child and Youth Mental Health, or other outside Mental Health support organizations or Vancouver Coastal Health. They work in conjunction with the school team to support our Intensive Behaviour Intervention/Severe Mental Illness designation category students and students with complex medical needs.

During each coordinated meeting or phone consultation, minutes/notes will be taken on the “inter-ministerial coordination template” and placed in the students file for record keeping and planning/monitoring purposes.

### **Children in the care of the Ministry of Child and Family Development:**

Children who are in care of MCFD have a greater set of risks and vulnerabilities to their completing their education and healthy participation in the community. In order to support these children, greater ongoing monitoring and supports are necessary to ensure their success and maintain a high level of coordination with all agencies involved.

Staff will ensure that these students have at least three school based resource team agenda times throughout the year and that the guardian or assigned social worker is invited to the meeting. Effective progress monitoring and reporting assists in reducing the risks and vulnerabilities faced by these students.

### **Risk/Threat (Harm to others) and Suicide/Self-Harm Behaviours:**

Some students at this level may exhibit serious self-harm or aggressive behaviours. The district has administrative regulations in place to guide staff through the appropriate actions to support and address these concerns.



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## **LEVEL FOUR SUPPORTS: USING THE CAPACITY OF THE COMMUNITY TO SUPPORT LEARNING**

### **Level Four Behaviour Support and Assessment Tools: Clinical and Standardized Assessment Tools (Behaviour Assessment Scale for Children)**

For the few students who need Level Four (Tier Three) intervention and support, the multi-disciplinary team may choose to assess behaviour with a clinical standardized assessment tool used by many mental health care professionals. This will not only aid in the identification of specific mental health concerns, but support referral to other agencies to collaborate supports with. Maintain active minutes on the Inter Ministerial Case meeting minutes template and place in the student file for records and designation process. Also, fill out a rationale for placement in the “H” category (in designation section of this handbook).

- Functional Assessment of Behaviour Summary Report

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## SUPPORTING BEHAVIOUR

Though addressing behaviour may seem like a simple task, it can be deceptively complex, especially if we are not aware of the many factors that affect or influence the student's behaviour (Antecedents). We all work on the premise that "All behaviour is meaningful and functional from the perspective of the individual engaging in the behaviour. The cornerstone of successful positive behavioural support is identifying the function of the challenging behaviour and assisting the individual in utilizing more socially acceptable strategies to serve the same purpose." (E.Carr)

### **Some basic assumptions about behaviour that impact our classrooms are:**

- Problem behaviours DO NOT occur randomly.
- They are related to events & circumstances that precede and follow them.
- The problem behaviour serves a purpose or function.
- Most often problem behaviours have communicative intent.

The process of identifying setting events and functions of a specific behaviour is termed Functional Assessment of Behaviour (Or Functional Behavioural Assessment). It examines the relationship between behaviour and environment (or what the student is getting out of the behaviour). It can be conducted by a school-based staff member, or by district support staff, who has specific training in the process of data collection and assessment, and the understanding of sound behavioural principals.

### **When we conduct a Functional Assessment, we will have five specific outcomes:**

- Clear description of the concern in behavioural terms.
- Identify events, times, and situations that predict when the target behaviour will AND will not occur.
- Identify consequences that maintain the behaviour.
- Develop a summary statement or Hypothesis.
- Collection of direct observational data.

### **Teaching an alternate or replacement behaviour**

Once we identify the factors and the "function" of the behaviours, we need to identify replacement behaviour. Teaching an alternate or replacement behaviour begins with the team identifying and agreeing to the acceptable replacement behaviour. The ultimate goal of behavioural interventions is not to suppress or control the problem behaviour, but rather to teach appropriate behaviour that results in long term behaviour change that benefits the learner.

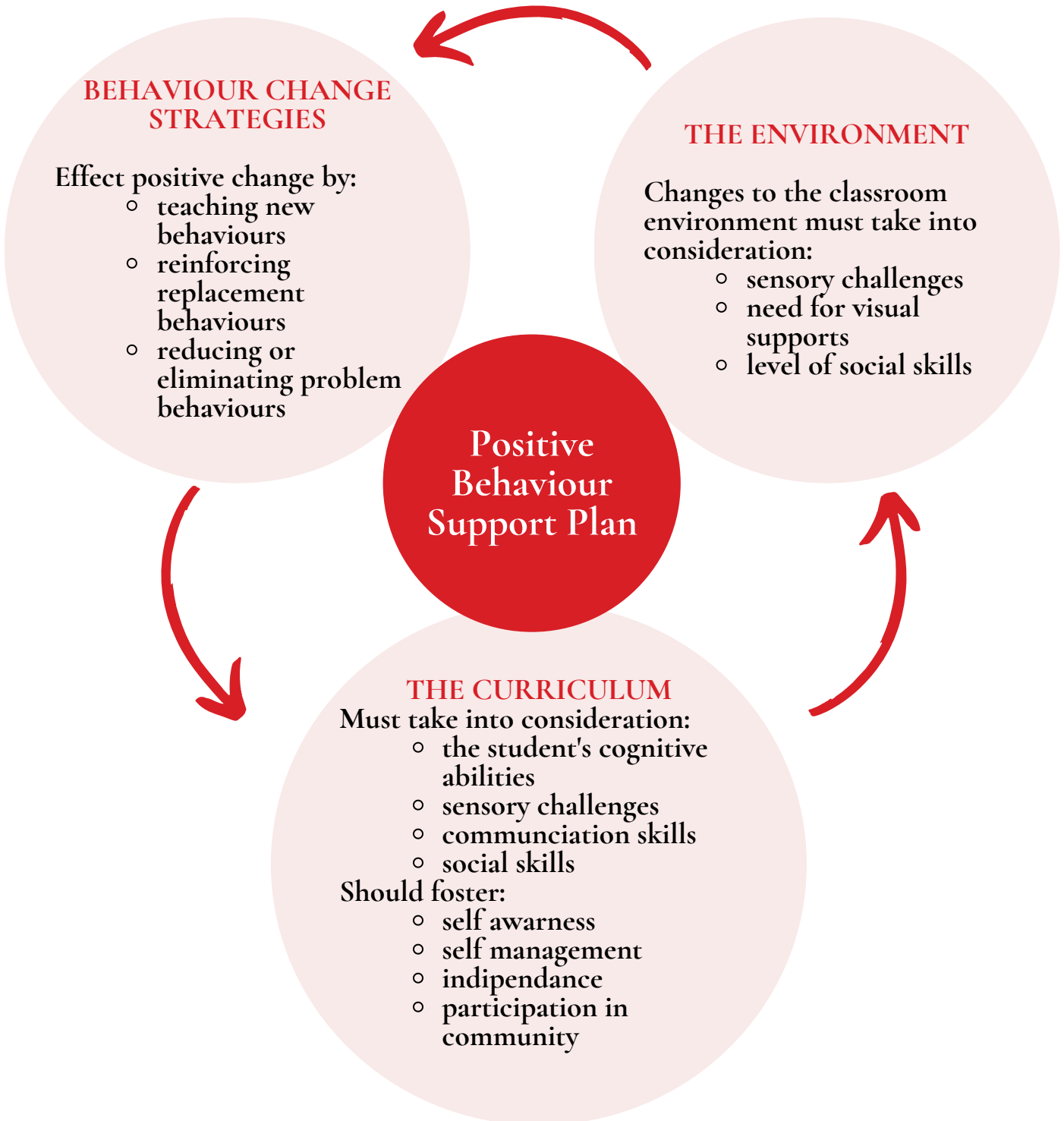
### **To select an acceptable alternative or replacement use this simple criterion:**

- Meet the same function as the behaviour that the team has identified as needing to change.
- The replacement behaviour must be socially acceptable and appropriate for the settings the student is in.
- The replacement behaviour must be easier and more efficient to do than the target behaviour that is to be replaced.

### **To teach the alternate behaviour try these specific steps:**

- Set up the environment so that the alternate or replacement behaviour is easier to do.
- Reinforce the student for performing the alternate behaviour. Get excited! This is big when the student uses the behaviour that you want and expect. Shift the balance of attention to the socially acceptable behaviour rather than the one that is negative.
- Remove reinforcement for performing the problem behaviour. Staff still tend to focus on the negative and react quickly when the problem behaviour presents itself. One of the most effective strategies is to not supply attention and reinforcement for the problem behaviour.
- Directly teach, role play and model the expected replacement behaviour. Use a visual support to show the student what the expectations are and make performing this alternate behaviour one of the most important things in the students' life. High levels of reinforcement for role playing should be used to effectively communicate the importance of the message.
- Use antecedent and setting event strategies to reduce the probability that the problem behaviour will need to occur. This will prevent the likelihood of difficult situations setting the stage for the behaviour and make the learning of the replacement behaviour more efficient.

## SUPPORTING BEHAVIOUR



## REDUCED DAY ATTENDANCE PROCESS

When identifying the need for a reduced day schedule for a student, it is essential to engage the school-based team to assess the student's unique learning and development requirements. This involves consulting with parents/guardians and utilizing Inclusion Support Services to gather collective insights.

A comprehensive Student Support Plan should be developed, grounded in evidence-based rationale. Key steps include reviewing and enhancing the Individual Education Plan (IEP) and ensuring inclusion from parents/guardians, along with consulting District Inclusion Support Services. The rationale for reduced attendance must be clearly articulated, demonstrating that it serves the student's best interests, and shared with the Director of Instruction for Inclusive Education as well as parents/guardians.

Securing written consent from parents/guardians (or the student, if 18 or older) is crucial, documenting all approvals and any withdrawals. Should behavioural or safety concerns impact attendance, the creation of a safety and behaviour plan may be necessary. Adjustments to the learning environment and accommodations should also be made, and an at-home learning plan must be developed to provide resources and support.

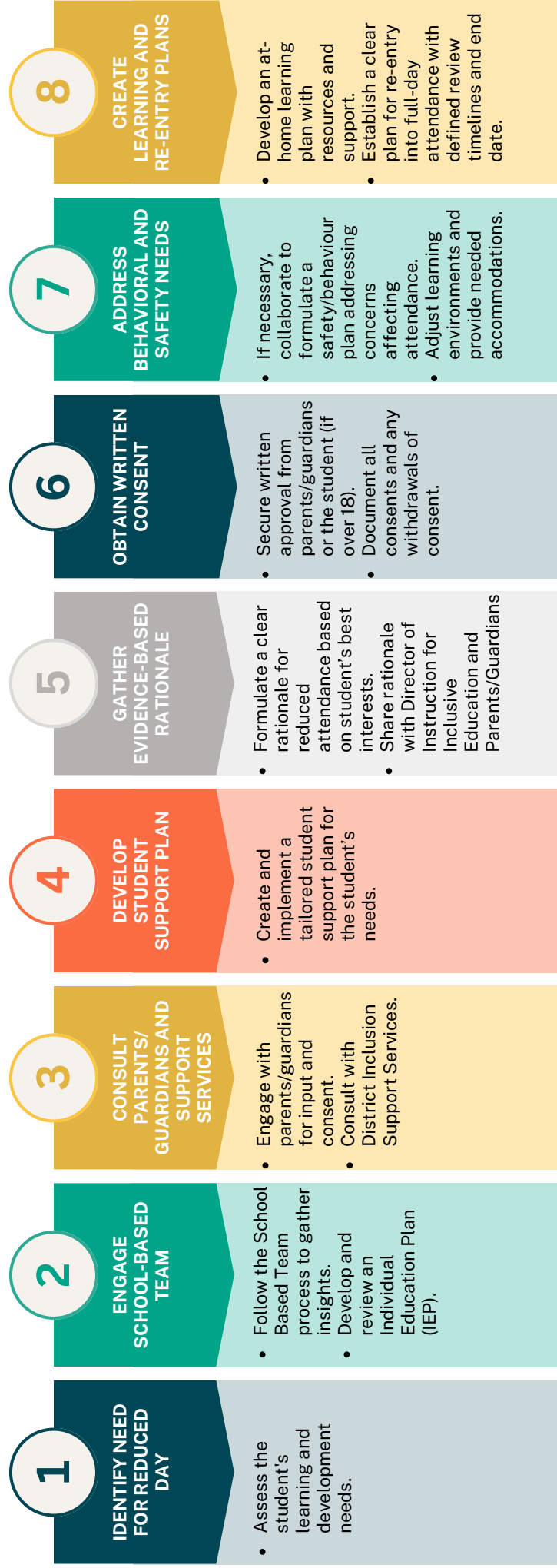
A clear re-entry plan into full-day attendance should be established, detailing review timelines and a defined end date. This reduced attendance plan is intended as a temporary measure, ideally no longer than six weeks and not carried forward into subsequent school years. In exceptional circumstances, timelines can be adjusted to meet the individual transition needs of the student. Safety protocols should be in place to address any concerns arising from behavioural incidents, with ongoing updates to ensure the student's continued wellbeing and academic progress.

Please see **Flowchart for Reduced School Day Attendance**.



# SUNSHINE COAST SCHOOL DISTRICT 46

## FLOWCHART FOR REDUCED SCHOOL DAY ATTENDANCE



- This plan should be used as a short-term measure (six weeks being the maximum length and not to be carried over from school year to school year)

### Exceptions/Considerations

- Re-integration/Transition : Adjust timelines under exceptional circumstances to best suit the student's transition needs.
- Safety Protocols : Reduce attendance for safety concerns after behavioral incidents, ensuring ongoing updates and adjustments.

## **PROCESS FOR REFERRAL TO THE PROVINCIAL OUTREACH PROGRAM FOR AUTISM AND RELATED DISORDERS (POPARD)**

POPARD Provides consultation, training, and support services to all public and independent schools across the province or British Columbia (BC). They provide support and training to both students and adults, including teachers, educational assistants, community partners, and parents of students with ASD.

### **With direct consultation with the District's ASD Coordinator:**

- Complete the POPARD forms (see forms):
  - Request for Service (ensure parent, principal and teacher sign the form)
  - Authorization for Release of Information
  - Needs Analysis Survey
  - Issues of Concern
- Attach the following documents:
  - medical documentation of diagnosis
  - recent CB-IEP
  - any OT, PT, SLP, achievement, or psycho-educational assessment
  - any relevant documentation
- Send two copies of the POPARD forms and the attachments to the Inclusion Support Coordinator at Inclusion Support Services.

**DO NOT SEND THE REFERRAL DIRECTLY TO POPARD**



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## PROCESS FOR REFERRAL TO ARC-BC

The **Accessible Resource Centre - British Columbia** is a BC Ministry of Education funded response to the growing demand for digital accessible format alternatives to hard-copy print learning materials. The goal of ARC-BC is to provide BC students with perceptual (or print) disabilities and their educational teams with high quality digital alternate format materials that align with British Columbia's K-12 curriculum.

### To become a registered user a teacher must:

- participate in the Copyright workshop
- read and understand the Canadian Copyright Act (CCA) Section 32(1)
- agree that the “Materials” will only be used for students in the school district who have been identified by the school district as having a perceptual disability\* and understand that any other use of the “Materials” is in violation of the Canadian Copyright Act (CCA) Section 32(1)
- agree to grant access privileges to ARC-BC only to those students in the school district who have perceptual disabilities
- ensure that the school district own a physical copy of the print material from which the alternate format was created
- understand that the “Materials” cannot be shared outside the school district or with other teachers

### As a registered user, teachers:

- can access and download alternate format materials for any number of students s/he is directly supporting
- may not download them for use with students who are not perceptually disabled

### Criteria for designating a student with a perceptual disability:

- Student meets criteria for ONE of the following:
- Ministry of Education criteria: Visual Impairment, Deaf and Hard of Hearing, Physical Disability (with respect to holding or manipulating a book and/or fatigue associated with hearing or visual impairment).
- Impaired functioning in reading as measured by informal (Jerry Johns, Alberta Reading Inventory, etc.) or formal measure (WJ III Ach). Standard score equal to or less than 89.
- Impaired functioning in attention and focus as measured 1 SD below in attention scales of Conners, BRIEF or BASC3 (i.e. T-score equal to greater than 70). AND has:
  - A current CB-IEP is in place;
  - The CB-IEP has a goal and measurable objectives to address the perceptual disability as identified.
  - The CB-IEP documents the assessment used to provide evidence of the perceptual disability.
  - The service outlined in the CB-IEP relates to the perceptual disability of the student identified in the assessment documentation that are beyond those offered to the general student population and are proportionate to level of need.
  - The CB-IEP outlines methods for measuring progress in relation to the CB-IEP goals
  - The student’s progress resulting from the service/support to address the perceptual disability is documented through CB-IEP reviews.

### \*Perceptual Disability Defined

*Perceptual disability is defined as a disability that prevents or inhibits a person from reading or hearing a literary, musical, dramatic or artistic work in its original format, and includes a disability resulting from:*

- a. severe or total impairment of sight or hearing or the inability to focus or move one’s eyes, or*
- b. the inability to hold or manipulate a book, or*
- c. an impairment relating to comprehension*

## **ACCOMMODATIONS FOR PROVINCIAL ASSESSMENTS**

**For a student to be approved for district level adjudication for provincial exams:**

- The SBT will meet with the Director of Instruction for Inclusive Education prior to the provincial assessment period to review the documentation supporting the request for adjudication and approve the accommodations.
- The school principal initials the approved adjudication requests
- Supports must be documented in the Individual Education Plan, Learning Plan or Report Card and demonstrated use for the student to be eligible for adjudication supports (reader, scribe or calculator)
- Must be used for a significant amount of time in classroom setting prior to assessment.

## **TRANSPORTATION**

Transportation needs will be assessed on an individual basis in consultation with parents, Inclusion Support Teacher, Principal and, in special situations with the Director of Instruction for Inclusive Education.

The Director of Instruction for Inclusive Education collaborates with the Manager of Transportation and the Secretary-Treasurer to secure transportation to and from home and school for some students with special needs.

It is necessary for students travelling off the school grounds to have written permission from their parents.

It is recommended for students travelling out of the district to be accompanied by two members of the students' team.

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## EMERGENCY ACTION PLANS

An Emergency Action Plan (EAP) is a comprehensive document that outlines the necessary procedures and protocols to ensure the safety and well-being of students with specific health conditions, such as diabetes, seizures, heart conditions, and other medical needs. The purpose of an EAP is to provide a clear and organized response in the event of an emergency situation, minimizing the risk and ensuring appropriate care and support for the affected students.

When creating an EAP for students with health conditions, it is important to involve relevant stakeholders, including parents/guardians, healthcare professionals, teachers, school staff, and administrators. The EAP should be tailored to the individual needs of each student and should consider their unique medical requirements and potential emergency scenarios.

### The Inclusion Support Teacher will:

- Collaborate with the Public Health Nurse in their role of supporting the health of students with serious medical condition(s) that are potentially life threatening. NOTE: Training may be requested for school district employees such as custodians, Educational Support Staff who support students diagnosed with serious medical condition(s) that are potentially life threatening.
- Collect, at the time of registration and at the beginning of every school year, the mandatory Emergency Action Plan and the Request for Administration of Medication Form (if applicable).
- Ensure that all applicable forms are reviewed by the parents/guardians in September of each year and accept parental/guardian written notification with date and signature to indicate no change.
- Ensure the Request for Administration of Medication at School Form (if applicable) is completed by the student's physician, for students requiring medication(s) at school.
- Keep records of communication with parents regarding the Emergency Action Plan(s); Anaphylactic Emergency Action Plan, or Seizure Emergency Action Plan & Medical Alert Information Form. Document each date of communication or date when communication was initiated, even if there was no answer indicating that a message was left on voice mail or e-mail.
- Ensure school personnel are aware of the location of the student's medication(s). It is recommended that students who demonstrate maturity regarding their serious medical condition carry medication(s) on their person for immediate availability.
- Establish a recording system to notify parents when medication is expired and needs replacing.
- Provide, on an annual basis, a copy of the Emergency Action Plan, for each student who is a registered rider to the Manager of Transportation. A copy of the Request for Administration of Medication at School Form (refer to Form F436.5) should also be provided if the student carries an Epi-pen and may require a bus driver to administer medication.
- Provide a safe, appropriate, and unlocked storage area for medication(s) and equipment. It is recommended that students who demonstrate maturity regarding their serious medical condition carry medication(s) and supplies on their person. NOTE: For each student who requires assistance, an established medication administration process that includes a medication record should be followed. A record of all medication administered must be recorded by name, date, time of day, amount of medication, administered by whom, and initials of person who assisted with medication.
- Collaborate with the parents/guardians and any school personnel involved with the student to develop support structures to follow the mandatory Emergency Action Plans and the Request for Administration of Medication at School Form (if applicable) during the school day and during after-hours school related activities.
- Assure that the completed mandatory Emergency Action Plan and the Request for Administration of Medication at School Form (if applicable) are appropriately stored in the student's files.
- Collaborate with the parents/guardians of students who are diagnosed with serious medical condition(s) that are potentially life threatening and/or anaphylactic to maintain an allergy safe environment. This may include establishing restrictions in the classroom for life threatening allergies such as food products and animals.
- Return all remaining medication(s) to parents/guardians at the end of each school year.

### Links to Emergency Action Plans:

- [EMERGENCY ACTION PLAN](#)
- [ANAPHYLAXIS EMERGENCY ACTION PLAN](#)
- [ASTHMA EMERGENCY ACTION PLAN](#)
- [SEIZURE EMERGENCY ACTION PLAN](#)

### Link for Administration of Medication Form:

- [ADMINISTRATION OF MEDICATION FORM](#)

## INCLUSIVE EDUCATION FORMS

Form:	Who Uses it?	Accessed from?
<b>Case-Manager Forms (Inclusion Support Teachers &amp; School Counsellors)</b>		
School Based Team Referral	Classroom Teachers, Educational Teams	School Level
School-Based Team Meeting Minutes	Case Manager	Clevr
Pre-Referral Checklist	Case Manager	Clevr
PE Participation	Case Manager	Clevr
District Based Team Referral Form	Case Manager	Clevr
Request for Ministry Designation	Case Manager	Clevr
Interministeral Care Plan	Case Manager	Clevr
Rationale for Placement	Case Manager	Clevr
<b>Counselling Forms (School Counsellor)</b>		
Report of Counselling Supports	School Counsellor	Clevr
<b>Risk Assessment Forms</b>		
Suicide Risk Assessment (SRA)	School Counsellor/District Counsellor	Clevr
Violent Threat Risk Assessment (VTRA)	School Counsellor/District Counsellor	Clevr
Violent Threat Risk Assessment Follow-Up Form	School Counsellor/District Counsellor	Clevr
<b>Emergency Medical Action Plans</b>		
All Emergency Action Plans	Case Manager	Engage

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## GLOSSARY

This glossary has been compiled and adapted from the following sources, each of which offers more comprehensive glossaries: Special Education Services: A Manual of Policies Procedures and Guidelines (<http://www.bced.gov.bc.ca/specialed/ppandg.htm>); the British Columbia Teachers' Federation website ([www.bctf.ca](http://www.bctf.ca)); and the Learning Assistance Manual: The Vital Link (<http://www.latabc.com/>)

**1701 count:** Student Data Collection: An electronic file that is prepared to calculate Full TimeEquivalent (FTE) students for public schools. The FTE values are then used to determine funding levels for schools.

**Adaptations:** An education program with adaptations retains the learning outcomes of the regular curriculum, and is provided so the student can participate in the program. Adaptations are 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). Students with education programs that include adaptations are assessed using the standards for the course/ program and can receive credit toward a Dogwood certificate for their work.

**Adjudication:** The process that determines if a student qualifies for adaptations on their provincial exams.

**Applied Behavioural Analysis (ABA):** Specific teaching approach based on Functional Assessment of Behaviours, commonly used for students who have an Autistic Spectrum Disorder.

**Articulation:** The process of identifying the needs of students transitioning from grade 7 to 8 to facilitate academic success at the secondary level.

**Differentiated Instruction:** A teacher's response to learners' needs. Guided by general principles of differentiation, teachers can differentiate content, process, product and environment according to students' readiness, interests, and learning profile through a variety of instructional strategies, and flexible classroom management.

**ELL (English Language Learner):** A person who is in the process of acquiring English and has a first language

**IEP (Inclusive Education Plan):** 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.

**Modified Education Program:** Has learning outcomes that are substantially different from the regular curriculum, and specifically selected to meet the student's special needs. For example, a Grade 9 student in a modified math program could focusing on functional computational skills in the context of handling money and personal budgeting. Or, in language arts, a Grade 5 student could be working on recognizing common signs and using the phone. To enable achievement, a student's program may include some courses that are modified and others that have adaptations.

**Psycho-Educational Assessment:** A formal process of Level C assessment that informs instruction. The process involves gathering specific information to understand how individual students think and learn. Psycho- educational assessments may include testing of cognitive ability, academic achievement, psychological processing, language skills and behaviours.

**School Based Team (SBT):** 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 coordinate support resources for students within the school.

**Transition Planning:** The preparation, implementation and evaluation required to enable students to make major transitions during their lives - from home of preschool 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.

**Universal Design for Learning (UDL):** A framework for designing classrooms and curricula that enables all individuals to gain knowledge, skills, and enthusiasm for learning. A way of thinking about access to supports and instruction for all students.

## CONCLUSION

In conclusion, the Inclusive Education Handbook serves as a comprehensive guide for School District 46 in promoting and implementing inclusive practices.

By embracing the principles of equity, diversity, and inclusion, the district is committed to providing a supportive and enriching learning environment for all students. Through the implementation of evidence-based strategies, the handbook encourages the use of levelled supports to meet the diverse needs of learners, ensuring that every student can thrive academically, socially, and emotionally.

By leveraging the resources, programs, and expertise available within the district, we strive to create an inclusive culture where all students feel valued, respected, and empowered to reach their full potential.

The Inclusive Education Handbook stands as a testament to our dedication to providing an equitable and inclusive education for all students in School District 46.

**For more information on Inclusive Education in School District 46 please contact us at:**



604-885-6782



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**Or visit our webpage:**



<https://sd46.bc.ca/schools-and-services/inclusive-education/>