

Special Education Plan - Sections for Review

- *Staff Development*
- *Educational and Other Assessments*
- *Coordination of Services with other Ministries or Agencies*
- *Protocol for Partnerships with External Agencies for provision of services by Regulated health Professionals, Regulated Social Service Professionals, and Paraprofessionals (PPM 149) posted on school board website*

Special Services Professional Learning 2019-20 Summary

Department	Session Title	Details	Dates	Intended Audience	Panel (Elem/Sec)
Autism	Introduction to Autism and ABA Strategies	This hands-on workshop focuses on understanding the characteristics of Autism and implementing ABA strategies to support students.	Nov 15, 2019 and Jan 17, 2020	Elementary/Secondary Support Staff	Elem/Sec
Autism	Promoting Communication in Students with ASD	This workshop will focus on strategies to support communication with students within the classroom using practical hands on activities.	Dec 6, 2019 and Feb 14, 2020	Elementary/Secondary Support Staff	Elem/Sec
Autism	Understanding Challenging Behaviours for Students with Autism Spectrum Disorders	This workshop will identify underlying causes of behaviour difficulties as they relate to student with ASD.	Dec 6, 2019 and Feb 14, 2020	Elementary/Secondary Support Staff	Elem/Sec
Autism	Supporting Administrators in Supporting Students with Autism	This workshop will focus on how schools can be supported through the Autism Department and sharing resources that can help support students with Autism.	Fall 2019	Elementary/Secondary Principals	Elem/Sec
Autism	Introduction to Autism, PPM 140, ABA Strategies	Each AST will target their assigned schools to deliver a PPT focusing on PPM 140 and ABA Strategies and lead a discussion with staff. The flexibility is how each school would like the PD delivered i.e. lunch and learn, at staff meeting, with a family of schools, during a PA day, etc. What works best at the local level	This is a multi-year plan to support elementary schools.	Elementary School Staff	Elem
Autism	Educational Practices – geared to the local needs of the school	Each AST will speak with the department head to determine the focus of the PD and the target group i.e. resource dept., new staff, etc. This could take place during late start days, through a lunch and learn, department meeting, etc.	This is a multi-year strategy to support secondary schools.	Secondary Staff	Sec

Autism/ME/DD	Transition to Secondary School Service for Students ME/DD	1 day workshop focusing on elementary and secondary ME/DD ISP teachers working together on the transition plan for students entering into Gr. 9 complying with PPM 140	TBD in the Spring	Elementary/Secondary ME/DD ISP teachers with students in Grade 8	Elem/Sec
Autism	Half day in-service for teachers with students attending the PAST program	The purpose is to review the PAST program and the goals with the home school teacher in order to build capacity in supporting students with high functioning Autism.	Sept./Oct. 2019	Elementary teachers	Elem
Autism	Half-day visits with the Connections For Students staff to meet the IBI providers in the IBI settings and to view the transitioning student in this setting.	The purpose is to plan for the students transitioning from the treatment setting into the school setting complying with PPM 140	Throughout the year	Elementary teachers	Elem
Autism	Introduction to Autism and ABA Strategies	Training provided to all new staff hired by HR which is offered on a monthly basis (EAs, CYWs, teachers, custodians, secretaries)	Monthly throughout the year	Teachers, support staff, custodians, secretaries	Elem/Sec
ME/DD	MEVile toWEVile Follow Up Workshop	1 Day Workshop for teachers to review the MEVile/WEVile literacy program and share promising practices.	Oct-19	Elementary ME/DD ISP teachers	Elem/Sec
ME/DD	EQUALS Follow Up Workshop	1 Day Workshop for teachers to review the EQUALS numeracy program and share promising practices.	January , 2020	Elementary ME/DD ISP teachers	Elem
ME/DD	Supporting students in the ME/DD ISP	1 Day Workshop focusing on classroom set up, differentiated learning strategies, programing, and recources.	Oct-19	Teachers	Sec
Speech and Language	Kindergarten Teams - Interactive In-service	Interactive workshop for 12 Kindergarten Teams at 4 locations	October 8, 10, 24, 25, 2019	48 Kindergarten Teams (Teachers)	Elementary
Speech and Language	Conversations in the Classroom	Workshop for 40 EAs and 40 CYWs (No code days required.)	October 5, 2019 and February 15, 2020	EAs and CYWs who work with i	Elem/Sec
Speech and Language	1 day inservice for KLP Teachers	Workshop for KLP teams	March, 2019	8 program teachers	Elementary

Speech and Language	ABC and Beyond- 3 day workshop for	Enhancing communication skills in the classroom	Nov/Dec/Jan and Feb/March/April 2020	8 Kindergarten teams	Elementary
Speech and Language	Professional Learning Series for LI-I	Math and IT Focus for LI ISP Teachers, 2 day inservice	February 25, 2019 and TBD	LI-ISP Teachers	Elementary
Deaf/Hard of Hearing	Two Day Training Workshop	Regular classroom teachers with D/HH students	September 30, 2019 and January 2020	Regular classroom teachers with D/HH students	Elementary
Deaf/Hard of Hearing	In-service for D/HH ISP teachers	One day Workshop for D/HH ISP teachers with Itinerant teachers	1-Apr-20	D/HH ISP Teachers	Elem/Sec
Deaf/Hard of Hearing	D/HH PD for Secondary	Workshop for 20 teachers on hearing loss awareness. (No code days required.)	Feb-20	20 Secondary Teachers	secondary
Mental Health	ASIST	2-day Suicide intervention training	Sept 4-5, 2019	Psychology/SW/Guidance Counselors, Administrators	ES, SS
Mental Health	ASIST	2-day Suicide intervention for Psychology/SW/Guidance Counselors/Administrators	Sept 11-12, 2019	Psychology/SW/Guidance Counselors, Administrators	ES, SS
Mental Health	ASIST	2-day Suicide intervention for Psychology/SW/Guidance Counselors/Administrators	Sept 24-25, 2019	Psychology/SW/Guidance Counselors, Administrators	ES, SS
Mental Health	ASIST	2-day Suicide intervention for Psychology/SW/Guidance Counselors/Administrators	Oct 2-3, 2019	Psychology/SW/Guidance Counselors, Administrators	ES, SS
Mental Health	ASIST	2-day Suicide intervention for Psychology/SW/Guidance Counselors/Administrators	April 1-2, 2020	Psychology/SW/Guidance Counselors, Administrators	ES, SS
Mental Health	SafeTalk	Suicide Awareness training for all staff	14-Feb-20	all staff	ES, SS
Mental Health	SafeTalk	Suicide Awareness training for all staff	14-Feb-20	all staff	ES, SS
Mental Health	SafeTalk	Suicide Awareness training for all staff	14-Feb-20	all staff	ES, SS
Mental Health	SafeTalk	Suicide Awareness training for all staff	11-Oct-19	all staff	ES, SS
Mental Health	SafeTalk	Suicide Awareness training for all staff	15-Nov-19	all staff	ES, SS
Mental Health	SafeTalk	Suicide Awareness training for all staff	6-Dec-19	all staff	ES, SS
Mental Health	Anxiety	From Supporting Minds module.	TBD	Guidance Counselors	ES, SS
Mental Health	Anxiety	From Supporting Minds module.	TBD	Autism Team	ES, SS
Mental Health	Anxiety	From Supporting Minds module.	PA days in Oct, Nov, Dec & Feb	all staff	ES, SS
Mental Health	Mood Disorders	From Supporting Minds module.	PA days in Oct, Nov, Dec & Feb	all staff	ES, SS
Mental Health	Mentally-Healthy Classroom	From Supporting Minds module.	PA days in Oct, Nov, Dec & Feb	all staff	ES, SS
Mental Health	ADHD	From Supporting Minds module. effective strategies for students	PA days in Oct, Nov, Dec & Feb	all staff	ES

Mental Health	ADHD	From Supporting Minds modules: effective strategies for students who suffer from Attention Deficit Disorder.	PA day for Psychology	Social Work service providers	ES, SS
Mental Health	ADHD	From Supporting Minds modules: effective strategies for students who suffer from Attention Deficit Disorder.	PA day for Social Work	Psychology service providers	ES, SS
Social Work	Miscellaneous	SW PD offered throughout year on clinically relevant information and best practices	1/2 day sessions on monthly basis	Social Work Department	ele and sec.
Behavior	Social- Emotional Learning	Discuss and share social emotional strategies and programming including Behaviour Support Plans, Safety Plans and IEPs	TBD	20 Behaviour Program Teachers	Elementary
Behavior/SSRT	SNAP	Refresher/Certification of new staff in SNAP model through Child Development Institute	TBD - Currently being organized through CDI	20 Behaviour Program Teachers, CYWs and 8 SSRT members	Elementary

Behavior/SSRT	Nonviolent Physical Crisis Intervention (CPI) Training or BMS Training	To develop skills managing students with challenging behaviours	September 19 & 20-New to CPI or expired past 3 years; September 18 - Refresher course (1 day) expred within 2 years; October 10 & 11-New to CPI or expired past 3 years; October 11-Refresher course (1 day) expired within 2 years; November 14 & 15-New to CPI or expired past 3 years; November 15 - Refresher course (1 day) expred within 2 yearsusually elementary PA days and one code day (mandatory 2-day training required); December 6-Refresher course (1 day) expired within 2 years; January 16 & 16- New to CPI or expired past 3 years; January 17 - Refresher course (1 day) expred within 2 years; February 14-Refresher course (1 day) expired within 2 years; June 5-Refresher course (1 day) expired within 2 years; plus 3-4 trainers need recertification in September at a cost of \$1,200 pp & supplies of \$500 and trainer membership fee of \$175 x 6 for the year	Two-day training for certifications to all employees of TCDSB who deal with students presenting challenging or disruptive behaviours	Elementary and Secondary
Special Services	Individual Education Plans; Special Services Forms; GAFE	Introduction to Special Services Forms and IEPs; Using GAFE with Special Education Students	September-October 2019	Elementary Special Education Teachers and Special Education Teachers New to Special Education	Elementary
Special Services	Individual Education Plans; Special Services Forms; GAFE	Introduction to Special Services Forms and IEPs; Using GAFE with Special Education Students	September-October 2019	Secondary Special Education Teachers	Secondary
Special Services	The Alternative Report Card; Transition Planning	Introduction to the Alternative Report Card	Nov-19	Secondary Special Education Teachers New to Special Education	Secondary

Special Services	Legalities Around Chairing An IPRC	Review the IPRC process and the importance of understanding the legal implications of the IPRC.	October, 2019 (Multi Half Days-On PAL)	Elementary and Secondary Principals.	Elem/Sec
Special Services	Individual Education Plans; Special Services Forms; GAPE	Review of Special Services Forms and IEPs	Oct-19	Vice Principals and Principals New to the Role	Elementary and Secondary
Psychology/LD	Empower Decoding/Spelling 2-5	Training for teachers new to Empower	Sept., 2019	LD ISP, Empower Hub and SE Teachers	ES
Psychology/LD	Empower Decoding/Spelling 2-5	Training for teachers new to Empower	Nov., 2019	18 LD ISP, Empower Hub and SE Teachers	ES
Psychology/LD	Empower Decoding/Spelling 6-8	Training for teachers new to Empower D/S 6-8	Sept., 2019	LD ISP Teachers	ES
Psychology/LD	Empower Decoding/Spelling 6-8	Training for teachers new to Empower D/S 6-8	Nov., 2019	6 LD ISP Teachers	ES
Psychology/LD	Empower Vocabulary/Reading Comprehension 2-5	1/2 day Training for teachers new to Empower V/C 2-5	Sept , 2019	LD ISP and Hub Teachers	ES
Psychology/LD	Lexia	Training for 70 teachers in using Lexia Reading	Oct. , 2019	LD ISP and SE Teachers	ES
Psychology/LD	How to teach/support and monitor students with LD who are struggling in Math and literacy	Teacher (70) administered assessments to monitor and facilitate progress in Math and Literacy	Dec., 2019	LD ISP and SE Teachers	ES
Psychology/LD	Fundamentals for Teaching an LD ISP class	PD for teachers new to LD ISP	Nov., 2019	LD ISP Teachers	ES
Psychology/LD	Assessment of Academic Achievement using the KTEA3 (Kaufman Test of Educational Achievement Third Edition)	Using the KTEAs to evaluate student academic progress. Using QGlobal online resource to summarize and analyse results.	Full day session, October 2019	LD ISP Teachers	ES
Psychology/LD	LD PR Committee meeting	Participation as a member of the committee	Nov., 2019	SLD ISP Teacher, SS SET	ES, SS
Psychology/LD	LD PR Committee meeting	Participation as a member of the committee	Jan, February, April, June	SLD ISP Teacher, SS SET	ES, SS
Psychology/LD	Update on LD to Principals	Assessment, diagnosis, identification and programming for students with LD	Jan.,, 2020	School administrators	ES, SS

Psychology/LD	Understanding the learning profile of students with LD to increase math achievement	How to teach/support students with LD who are struggling in Math	Feb., 2020	SS teachers	SS
Psychology	Understanding challenging behaviours in children and adolescents and how to help manage them	Strategies for the classroom	PA Day -November 2020	Eas and CYWs	ES, SS
Psychology	Supporting our children's emotional health	Psychology Month Symposium for educators and parents (after hours)	PA Day February	Teachers, EAs, CYWs, Parents, other staff	ES, SS
Psychology/Gifted	Supporting the emotional health of students with Giftedness	How to recognize depression/anxiety and how to help. Strategies for the classroom.	PA Day -December	Gifted ISP and Withdrawal teachers	ES
Psychology/Gifted	Gifted PR Committee meeting	1/2 day Participation as a member of the committee	Three sessions	Gifted ISP Teacher, SS teacher	ES, SS

Educational and Other Assessments

When learning difficulties become evident to the teacher, the parent is contacted to obtain their input in relation to understanding the child's learning needs. The classroom teacher as well as the special education resource teacher in the student's school may administer formal and informal tests of academic achievement to assist in determining the specific learning needs of the student. If formal assessment from other professional support staff is required, the principal obtains written consent of the parent. This enables staff from the following departments to provide a range of formal and informal assessment services: assessment and programming, psychology, speech-language pathology, audiology. Assessment services are also provided by School Social Workers. The principal obtains verbal consent of the parent for social work intervention and completes a written request for social work services on the designated TCDSB form.

The professional qualifications of members of each department is outlined below:

ASSESSMENT AND PROGRAMMING TEACHERS (APTS) AND PROGRAMMING AND ASSESSMENT TEACHERS (PATs) are members of the College of Teachers. APTs and PATs have demonstrated teaching experience in a variety of Special Education teaching roles and leadership within schools. They are leaders in special education services within the TCDSB. Training for this position is conducted by the TCDSB and delivered through the School Based Support Teacher Program (SBST course). This is a two-year professional development program for teachers who wish to increase their knowledge of special education programs and services. Upon successful completion of these programs teachers may apply for a position as an APT or PAT. In addition to the formal training component, each candidate, having his/her Special Education Part 3 qualifications and/or Master's Degree) is mentored by an experienced Assessment and Programming teacher and supervised by a programming coordinator (supervising principal)

Assessment:

- Complete educational assessments, using standardized and informal assessment measures, to assist teachers and parents with individualized student programming
- Using assessments in conjunction with classroom experience, knowledge of curriculum and of research-based materials to help program for students
- In current year the APTs are administering the OLSAT 8 screening to all grade 4 students (total of 6,048 students).
- Support teachers and administrators in understanding and interpreting formal assessment reports and their recommendations to assist with programming strategies and IEP development

Intakes and Transition Supports:

- Conduct and facilitate intake visits and reports for students with high needs transitioning into school
- Liaising between TCDSB and outside agencies (i.e.: Hospital for Sick Children, Silvercreek Nursery School, Adventure Place, George Hull Centre, Integra)
- Support and assist the transition plan for a smooth transition for students with special needs from daycare/home to school, from grade to grade, from elementary to secondary school and transition to the world of work / community living / college / university

Programming:

- Work collaboratively with the individual School Based Support Learning Team (Interdisciplinary Team - SW, PSYCH, SPL, Autism Support Teacher, DHH Itinerant Teachers))
- Support schools and teachers with the School Based Support Learning Team (SBSLT) process at all Interdisciplinary team meetings
- Review and discuss an individual student's D.I.P.(Data Integration Platform) data listing all standardized tests results to assist teachers with individual student's learning profile and providing programming learning strategies
- Conduct classroom observations to support the educational assessment process and to assist teacher in understanding the student's learning profile (strengths and needs)
- Assist with alternative programming (e.g. self-advocacy skills, social skills, etc)
- Provide resource and support for teachers and parents in developing and understanding program accommodations and program modifications and individual education plans
- Consultations with school / staff around programming suggestions and supports, intervention strategies, and the implementation of differentiated instructional approach and strategies
- Support and facilitate parent visits to ISP programs (i.e.: M.E.; L.D., D.D.)
- Support administrators and teachers with the I.P.R.C process and presentations to Initial and/or Annual I.P.R.C. meetings at SBSSS Area Unit or school level
- Liaison, facilitate and support the school, teacher and parent when an application is being considered for a student with the Trillium Ministry of Education Demonstration School

SEA

1. Support schools in the preparation of an individual student's Specialized Equipment Amount (SEA) claim

SIP

2. Coordinate the preparation of Ministry of Education Special Education Funding Claims, that is, Special Incidence Portion (SIP)

Professional Development:

- Collaborative committee work (i.e.: IEP Committee, SS Forms Committee, School Effectiveness Team, L4All, TCDSB Special Services Resource Fair)
- Assist regionally and centrally on committees that support the ongoing review and upgrade of the TCDSB IEP template and supporting Special Services Forms
- Conduct and facilitate IEP in-services either at a central TCDSB locations or at individual schools and for individual teachers and administrators for consultation
- Professional development to TCDSB staff (i.e. non-violent crisis intervention workshops, special services delivery model, Learning for All etc. Support schools and teachers with Ministry and TCDSB Curriculum Initiatives (i.e.: TLCP, NFLAC, School Effectiveness, HUBS)
- Assist and facilitate with assistive technology training, specifically Premier Providing
- Support and mentor new 'teachers' newly assigned as a 'special education teacher' to an ISP or regular special education program
- Support and mentor new 'teachers' newly assigned to the SET
- Present and instruct at OECTA's Part 1,2, 3 Special Education Courses
- Present and instruct to Special Education teachers taking the TCDSB Learning Disability and M.E. ISP programs

The psychology department is composed of **PSYCHOLOGISTS, PSYCHOLOGICAL ASSOCIATES and PSYCHOEDUCATIONAL CONSULTANTS**. Professional development opportunities and support have been provided to psychoeducational consultants to pursue registration as psychological associates. The majority of eligible psychology staff have pursued registration and others are in the process of accumulating the required five years of supervised experience. For those members of the psychology department who do not have access to the controlled act of communicating a diagnosis, a supervisor communicates the diagnosis to the parent or student aged 16 or older. All members of the psychology department are supervised by the chief psychologist and are governed by the Regulated Health Professions Act.

Social work assessments are conducted by **SCHOOL SOCIAL WORKERS** who are members of the regulated College of Social Workers and Social Service Workers. Within TCDSB all social workers have a minimum of a Masters of Social Work degree. School social workers identify individual students and/ or target populations who are in need of service, through a process of consultation with school board personnel, community representatives, students and their families.

DEAF AND HARD OF HEARING is a centralized interdisciplinary team providing services and programs for students with varying degrees of hearing loss. Every new case is reviewed by the school board's Audiologist and Deaf and Hard of Hearing Intake Team. Depending on student need various formal and informal assessments are carried out by the Audiologist, Deaf and Hard of Hearing Teachers, Psychoeducational Consultant, Speech and Language Pathologist and Social Worker in the Deaf and Hard of Hearing Department.

AUTISM: The Autism Programs and Services staff is a centralized interdisciplinary team providing services and programs for students with Autism Spectrum Disorders (ASD). Assessments are carried out by interdisciplinary team members, including Autism Support Teachers, Speech-Language Pathologists, Psychoeducational Consultants and Social Workers. In addition to speech-language, psychological and social work assessments, education and functional behaviour assessments are carried out by team members. Team members assess student's academic strengths and needs, as well as their communication, behaviour, self regulation and social needs. When needed, occupational therapy and behaviour consultation services are contracted. Assessments and service are consistent with PPM 140, using principles of applied behaviour analysis where appropriate.

BEHAVIOUR: Behaviour assessments can be helpful in identifying interferences to learning as well as capitalizing on strengths of the learner. Practitioners who complete behaviour assessments often rely on observation, student interviews, family interviews including perspective of parents and discussion with classroom teachers, administrators and support staff.

SPEECH-LANGUAGE PATHOLOGY assessments are carried out by **REGISTERED MEMBERS** of the College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO). Speech-Language Pathology (SLP) staff are governed by the Regulated Health Professions Act, 1993, as well as the regulations of CASLPO. Speech-Language Pathologists have specialized expertise in school-age speech and language development and disorders, with a particular focus on oral language as the foundation for literacy and learning. Speech-Language Pathologists assess both oral and written communication abilities, including assessment of students who are non-speaking and who require augmentative/alternative communication strategies and specialized equipment. Speech-Language Pathology staff are supervised by the chief speech-language pathologist.

With the informed consent of parents, individual assessment tools are used to measure the student's ability in the following areas:

Intellectual / cognitive: Intellectual / cognitive assessments are conducted by psychology staff who are governed by the Regulated Health Professions Act.

Academic achievement: Conducted by Assessment and Programming teachers who are governed by the Education Act or psychologists, psychological associates and psychoeducational consultants who are governed by the Regulated Health Professions Act.

Psychological processes: Conducted by psychologists, psychological associates and psychoeducational consultants who are governed by the Regulated Health Professions Act.

Social / emotional development: Conducted by psychologists, psychological associates and psychoeducational consultants who are governed by the Regulated Health Professions Act.

Speech and Language: Conducted by speech-language pathologists, who are governed by the Regulated Health Professions Act.

Social work assessments: Assessments by school social workers include a study of factors that interfere with students' adjustment to and performance in school. More specifically it may involve, with appropriate consents, assessing the following:

- Students' physical and emotional/social development;
- Students' family history and dynamics;
- Student behaviour and attitudes in different settings;
- Patterns of interpersonal relationships as observed in the family, school, community and with peers;
- Patterns of achievement and adjustment at critical points in students' growth and development;
- The existence, accessibility and utilization of community support systems for students and their families;
- Students' attendance patterns.

Psychological, speech-language, social work and educational reports may be submitted to the IPRC where an identification of an exceptionality may be made. Prior to the IPRC, the parent receives the results of the assessment and a copy of the assessment report. Where the parent has difficulty communicating in English, an interpreter is utilized.

Psychological assessments may result in a diagnosis. Where the criteria for diagnosis has been met, the diagnosis is communicated to the parent or student by a member of the College of Psychologists who has access to the controlled act of communicating a diagnosis.

Wait-time for assessments: Within the psychology department the time to respond to referrals varies according to the severity of the problem. In a crisis situation, response time is immediate. For situations where the behaviour of a student interferes with the learning of classmates, response to that request for psychological service will be within two to three weeks. As a consequence, more routine referrals may wait on average 12 - 15 months.

The wait time for speech-language pathology assessments ranges from six to twelve months. Assessments are completed in priority order based on the date of request, unless the situation is urgent as identified by the principal and / or parent.

As the academic year progresses and referrals to social work increase, the wait time for social work intervention increases proportionately. Usually, a brief contact is made with the students and/or families immediately after referral to determine the seriousness of the need. The most critical situations are dealt with on a priority basis. As a result other students and their families, who have been referred previously, may have to wait for service on an average of 3-5 weeks.

The Data Integration Platform development and inservice in the use of the collection of assessment for learning information on behalf of students will assist in the area of referrals. As schools embrace the philosophy and impact of the professional learning community concept to improve student learning staff within Special Services can address the social emotional, linguistic and mental health issues that impede learning.

Parent consent: Referrals for educational, psychology and speech-language assessments are accompanied by permission forms signed by the parent. Services offered by psychology and speech-language pathology staff requires informed consent under the Health Care Consent Act and Personal Health Information Protection Act. To insure that the parents are fully informed of the service to be provided to their child, the parent is contacted prior to the initiation of service. It is the general practice for the parent to be contacted at the initiation of educational assessment as well. For social work intervention, the principal obtains written consent of the parent. If abuse is suspected the Child Abuse Protocol with regard to consent is followed. Social work staff follow up with the parent to clarify the service that can be offered. The Parent Guide to Special Education is given at this time.

Communication of results to parents: Parents are invited to a meeting at the school to receive the results of the assessment(s). If the parent has difficulty communicating in English, an interpreter is provided. A written report is prepared for inclusion in the OSR. Parents generally receive a copy of this report. In the case of students who are presented to an IPRC, the parent and student aged 16 or older receives a copy of all documentation that will be reviewed by the IPRC.

Sharing information: The permission form that is signed by the parent prior to assessment includes permission to share information with the teacher, the principal and other appropriate school personnel. At the time of the feedback interview, this process of sharing information is reviewed with the parent or student. Information is shared with outside agencies only with the informed consent of the parent and Personal Health Information Protection Act.

Assessment reports from other school boards: With the written consent of the parent or student aged 16 and older, assessment reports and IPRC information are requested from other school boards. When the data is current and the information supports identification according to IPRC practices with the TCDSB, this option is outlined for the parent. A copy of the Parents' Guide to Special Education is provided. If the parent is agreeable, an up-dated educational assessment is completed at the school level or by special services staff. The current educational assessment and the documentation obtained from the student's previous board are presented to the IPRC for purposes of identification and placement.

Protecting Privacy of Information: With the informed consent of the parent, the assessment report is placed in the OSR, and is accessible to appropriate school personnel in accordance with the Education Act. When parents request an assessment, they provide written permission for the assessor to review the OSR.

The psychology and speech-language pathology departments store assessment information in discipline specific file systems in accordance with the Regulated Health Professions Act (1993) and the Personal Health Information Protection Act (2004).

ASSESSMENTS

Because many requests for assessments relate to students who have English as a second language, information from multiple sources is collected. The limitations in relation to using the below named tests to make decisions about second language learners is always considered.

SPEECH-LANGUAGE PATHOLOGY ASSESSMENT TOOLS

Boehm Test of Basic Concepts-3
Bus Story Test – Renfrew Language Scales
Clinical Evaluation of Language Fundamentals-2 Preschool
Clinical Evaluation of Language Fundamentals-4
Comprehensive Test of Phonological Processing
Comprehensive Test of Spoken Language
Ekwall Reading Inventory
Evaluating Communicative Competence
Expressive Vocabulary Test-2
Expressive-One Word Picture Vocabulary Test-2000
Goldman-Fristoe Test of Articulation-2
Listening Comprehension Test-2
Oral and Written Language Scales
Peabody Picture Vocabulary Test-4
Phonological Awareness Test-2
Preschool Language Scales-4
Structured Photographic Expressive Language Test-3
Stuttering Severity Instrument
Test for Auditory Comprehension of Language-3
Test of Early Reading Ability-3
Test of Narrative Language
Test of Problem Solving-2 Adolescent
Test of Problem Solving-3 Elementary
Test of Word Finding-2
Test of Written Language-4
Test of Written Spelling-4
Woodcock Johnson Reading Mastery Test-Revised
Woodcock Language Proficiency Battery-Revised
Word Test-2 Adolescent
Word Test-2 Elementary

ASSESSMENT TOOLS USED BY PSYCHOLOGY STAFF

Cognitive

Wechsler Preschool and Primary Test of Intelligence: Third edition
Wechsler Intelligence Scale for Children: Fourth edition
Wechsler Intelligence Scale for Children: Fourth edition – integrated
Wechsler Nonverbal Scale of Ability
Wechsler Adult Intelligence Scale: Fourth edition
Stanford-Binet Fifth Edition
Woodcock-Johnson III Tests of Cognitive Abilities
Universal Nonverbal Intelligence Test
Leiter International Performance Scale: Revised

Psychological processing

Comprehensive Test of Phonological Processing
Wide Range Assessment of Memory and Learning: Second Edition
Children's Memory Scale
Bender-Gestalt 11
Beery-Buktenica Developmental Test of Visual Motor Integration: Fifth Edition
Peabody Picture Vocabulary Test: Fourth Edition
Detroit Test of Learning Aptitude: Fourth Edition
Behaviour Rating Inventory of Executive Function
Delis-Kaplan Executive Function System

Academic Functioning

Wechsler Individual Achievement Test- second edition (Effective, January 2012, the fourth edition will be used)
Woodcock-Johnson III Tests of Academic Achievement
Test of Reading Comprehension
Wide Range Achievement Test: Fourth Edition
Test of Written Language - Fourth edition

Social, Emotional and Behavioural

Conners: Third Edition
Piers-Harris Children's Self-Concept Scale: Second Edition
Sentence Completion
Children's Depression Inventory
Child Behaviour Checklist
Behaviour Assessment System for Children: Second Edition
Schedule for Affective Disorders for School Aged Children (Semi-structured interview to screen for social, emotional and behaviour concerns)
Vineland Adaptive Behaviour Scales: Second Edition

Support Service for Students with Autism (SSSA)

Assessment measures indicated by the student's strengths and needs are used by SSSA staff. Both standardized and non-standardized measures are used, as appropriate. Areas assessed include:

3. Academic skills
4. Social skills
5. Communication skills
6. Behaviour and self-regulation
7. Sensory needs

EDUCATIONAL ASSESSMENTS

Assessment and Programming Teacher (APT) and Programming and Assessment Teacher (PAT)

The following assessment tools are used by APTs and PATs, with parent signed permission, to assist teachers in programming for students. These assessments are valuable tools in the development of the student's IEP. The results of these assessments are first shared with the parent and then, with parent permission, with the school staff. Parents may share these assessments with doctors or other outside agencies. To protect the privacy of information of the student, the parent will need to give the school written permission to share the assessment with outside agencies.

Standard Assessment Tools used by all APTs/PATs

8. WIAT-III - achievement test
9. PPVT-4 - measure of receptive vocabulary
10. NNAT - non-verbal test of general ability

Additional assessments that can be used

- Key Math - comprehensive measure of math proficiency
- TOWL-3 - measures written language
- EVT-2 - measure of expressive vocabulary and word retrieval
- DTLA-4 - measures basic abilities and shows the effects of language, attention, & motor abilities on test performance
- Test of Early Reading
- Test of Early Writing
- Woodcock-Johnson III Test of Academic Achievement
- Comprehensive Test of Phonological Processing
- Universal Nonverbal Intelligence Test
- Maitrix Analogies Test
- Beery-Buktenica Test of Visual Motor Integration
- Test of Visual Motor Integration
- Kaufman Comprehensive
- Otis Lennon Student Achievement Test

Coordination of services with Other Ministries or Agencies

This section contains information about coordination with other ministries. This includes transition planning for children entering school from preschool programs as well as coordination regarding services for students with special education needs.

1. Entry To School Planning:

The following chart summarizes procedures for students entering TCDSB from preschool programs.

TRANSITION/INTAKE PROCESS FOR TCDSB STUDENTS

January prior to school entry:

Family registers their child in the home school, indicating that their child has special needs and providing any relevant reports

Spring prior to School entry:

Home School Principal contacts the Special Education Coordinator for their area, or for specialty services/teams (Physical, Vision, Deaf and Hard of Hearing, Autism) and completes intake consent forms to initiate staff involvement

An intake visit is carried out by a member of the interdisciplinary team to the preschool setting or home, to identify programming needs and supports required

Interdisciplinary staff review existing reports/documentation and then discuss program and placement options with parents and Special

An IPRC is held, and placement is determined for the following school year

School entry:

Special Education programs and services are put in place, with parental input and consent.

2. Transition From Preschool Programs:

The following are procedures for students who have received specialized preschool services and programs:

- **Deaf and Hard of Hearing Programs:** TCDSB has itinerant teachers with specific responsibilities for intake of students from preschool programs as well as provincial schools. In addition, a member of the interdisciplinary team along with the teacher of the deaf and hard of hearing working with the student, investigates alternative programs and supports students in their transition. Coordination with the Infant Hearing Program is maintained on an ongoing basis.
- **Speech and Language Programs:** Ongoing communication takes place with Toronto Preschool Speech and Language Services regarding coordination of services, including transition to school. A transition to school brochure has been developed for parents. A transition to school agreement has been developed between local school boards and Preschool Speech and Language Services. Services are also coordinated with other community agencies providing speech and language services and programs. Transition strategies include exchange of reports, telephone conversations and case conferences, when needed.
- **Intensive Early Intervention Programs for Children with Autism:** A transition protocol has been developed with Toronto Preschool Autism Service. Ongoing communication takes place between Transition Coordinators for this program and TCDSB staff. Regular meetings take place between the Toronto Preschool Autism Program and TCDSB staff. TCDSB Autism Team staff have also developed a protocol for entry to school planning for students with Autism/PDD.

1. Coordination with Other Ministries regarding New Initiatives

Autism Initiatives:

TCDSB works in collaboration with Surrey Place Centre's School Support program to support students with ASD transitioning from elementary to secondary school. In the spring of 2009, TCDSB was selected as one of sixteen school boards to participate in a ministry demonstration project. The collaborative demonstration project has a focus on ensuring a smooth transition to full time school for students being discharged from the Ministry of Children and Youth Services intensive behaviour intervention (IBI) services. TCDSB is working in collaboration with the Toronto Partnership Autism Service (TPAS) on this initiative.

Mental Health Planning: In the Toronto Catholic District School Board, the mental health of students is supported through the efforts of educational staff such as classroom teachers, social workers, psychology staff, guidance staff, child and youth workers and chaplaincy. In addition, TCDSB still will facilitate referrals to community resources such as children's mental health agencies or hospitals to provide more specific mental health support such as family counseling or psychiatric intervention. Also, TCDSB supports in-school partnerships that are consistent with its vision and mission as found on the TCDSB website, existing policies and procedures and Catholic gospel values. The intent of these partnerships is to enhance or expand opportunities for student success by collaborating with agencies, professionals and paraprofessionals who share values, objectives, resources and responsibilities to achieve desired learning outcomes. In response to PPM 149, the Toronto Catholic District School Board has developed a procedure for establishing and reviewing mental health partnerships.

Best Start: Best Start is a comprehensive strategy about supporting children so that they can learn and grow, be successful in school and ultimately be successful in the workforce and society. It is a partnership among ministries and among different levels of government (provincial, federal and municipal) to provide the services and supports to help children succeed; it is also a partnership with parents that recognizes the key role parents play in preparing their children for school. It is responding to the clear message from communities that Ontario needs more integrated accessible services for young children and families.

4. Care & Treatment Programs (Section 23) – Re-Admission Process

In order to facilitate the re-entry/transition process back to the Toronto Catholic District School Board, the following re-admission process will be followed.

1. Principal on assignment for Care & Treatment Programs will arrange update meetings with regard to the students who have received the necessary amount of intervention in November and February of each school year.
2. In order to locate the best program for Care & Treatment students, the agency will inform the Care & Treatment principal immediately after a determination is made that the student will be demitted. The Care & Treatment teacher will forward the TCDSB Care & Treatment Demission Form and a package of information regarding the student to the Care & Treatment principal.
3. The Care & Treatment principal will contact the appropriate contact to facilitate the reintegration of the student within the TCDSB. This would be a member of the Behavioural team, JTM or Program Coordinator.

4. An observation/case conference will be set up while the student is in the therapeutic setting to facilitate the re-entry.
5. After this case conference has occurred the lead person will contact the appropriate Program Coordinator, Behavioural team member or Care & Treatment liaison staff who will explore the options of regular class, special education class or behavioural class. If another Care & Treatment day treatment program or residential setting is recommended, the agency will keep the lead person informed and seek assistance from the lead person as required.
6. A timeline for reintegration will be established and communicated back to the agency by the Care & Treatment principal.
7. A transition plan including support from the agency for a week or two will be requested. Possible placements include home school, regional classes or a “fresh start” in a new school.
8. The principal of the receiving school will be involved in the transition and will be invited to attend the IPRC and/or case conference.

Date of Issue: September 25, 2009**Effective:** Until revoked or modified**Subject:** PROTOCOL FOR PARTNERSHIPS WITH EXTERNAL AGENCIES
FOR PROVISION OF SERVICES BY REGULATED HEALTH
PROFESSIONALS, REGULATED SOCIAL SERVICE PROFESSIONALS,
AND PARAPROFESSIONALS**Application:** Directors of Education
Secretary-Treasurers and Supervisory Officers of School Authorities
Superintendents of Schools
Principals of Elementary Schools
Principals of Secondary Schools

Introduction

The ministry is committed to promoting effective community-based partnerships with external agencies that foster continuous improvement in the delivery of programs and services for all students, including students with special needs. Closing achievement gaps for all students continues to be a major priority.

The purpose of this memorandum is to provide direction to school boards¹ concerning the review and/or development of a local protocol for partnerships with external agencies for the provision of services in Ontario schools by regulated health professionals, regulated social service professionals, and paraprofessionals. It outlines the requirements for reviewing and/or developing a local protocol, and specifies the requirements for implementing the protocol and for reporting on the protocol to stakeholders.

Requirements for Review and/or Development of a Board Protocol

School boards with an existing protocol will review their protocol to ensure that it is aligned with the requirements outlined in this memorandum. School boards without an existing protocol will develop a protocol that is aligned with those requirements. The protocol will be designed to support the school board's capacity to provide programs and services to all students, including students with special needs. The protocol will reflect local circumstances, including the language of the board.

1. In this memorandum, *school board(s)* and *board(s)* refer to district school boards and school authorities, with the exception of section 68 school authorities.

The protocol will outline the following:

- programs and services that are currently delivered by external agencies
- programs and services that are currently delivered by school board professional student services personnel (PSSP) and paraprofessionals
- programs and services that could be delivered by school board PSSP and paraprofessionals, but are not being delivered by them for financial reasons or because requirements do not match the job descriptions or qualifications of board PSSP and/or paraprofessionals

A distinction must be made in the protocol between long-term and short-term (time-limited) partnerships to ensure that long-term duplication of services already provided by school board PSSP and paraprofessionals does not occur.

The protocol must be aligned with the collective agreements of unionized school board staff and enhance the delivery of services. The protocol must provide for supplementing, but not duplicating, the services of school board PSSP and paraprofessionals. A protocol will be developed by each school board even if there are currently no unionized regulated health professionals, regulated social service professionals, and paraprofessionals on staff.

Where applicable, co-terminus and contiguous school boards must, at a minimum, explore the development of partnerships and protocols to facilitate the delivery of programs and services.

Boards must seek the advice of PSSP and paraprofessionals when reviewing and/or developing their protocol. Boards will also design a procedure for reviewing their protocol and projected services in consultation with external agencies and unionized school board staff at least once a year.

Boards will also ensure that their protocol is consistent with standard school board provisions related to:

- informed consent;
- criminal reference checks;
- appropriate insurance coverage;
- compliance with the Safe Schools Act;
- conflict of interest, confidentiality, equity, human rights, and other relevant policies.

Eligible Categories of Professionals and Paraprofessionals

A board's protocol will cover the following categories of PSSP and paraprofessionals:

- audiologists, as defined by the Audiology and Speech-Language Pathology Act, 1991
- speech-language pathologists, as defined by the Audiology and Speech-Language Pathology Act, 1991
- occupational therapists, as defined by the Occupational Therapy Act, 1991
- physiotherapists, as defined by the Physiotherapy Act, 1991
- psychologists, as defined by the Psychology Act, 1991

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- psychological associates, as defined by the Psychology Act, 1991
 - social workers, as defined by the Social Work and Social Service Work Act, 1998
 - other regulated professionals and/or paraprofessionals who are deemed by the school board to be essential for the delivery of programs and services for students with special needs

Any future regulated categories will also be covered by the protocol.

Additional Requirements for the Board Protocol

In order to assist school boards and external agencies in the development, review, and maintenance of local protocols, a memorandum from the Deputy Minister of Education accompanies this policy/program memorandum and outlines the elements that each protocol must contain. Any changes to the elements required in the local protocols will be communicated in the future to boards through a similar memorandum.

Implementation and Reporting

School boards will implement their newly developed or reviewed protocol and post it on their website by January 1, 2010. Reviews of and revisions to established protocols will be completed and posted on school board websites by January 1 of each subsequent year.



PROTOCOL

RE COMMUNITY PROFESSIONALS INVOLVEMENT IN SCHOOL PROGRAMS

PURPOSE

This protocol outlines the background, and the principles and administrative procedures that the Board will follow, with respect to community professionals' and private therapists' involvement in school programs where such professionals are retained and/or compensated by parents/guardians.

The purpose of the protocol is to clarify the relationship between the school and the community health professional/private therapist where:

- Parents/guardians have retained such community professionals to support their child ("privately retained community health professionals"), and/or
- Staff from another agency and/or ministry request to observe and/or work with a student at school.

This protocol recognizes that parents/guardians, community health professionals and the school share a common goal to pursue, within defined roles, the best interest of the child.

PRINCIPLES

The *Education Act* requires the Ministry of Education and Training (the "Ministry") to ensure that all exceptional children in Ontario have available to them appropriate special education programs and special education services without the payment of fees by parents or guardians resident in Ontario. Subsection 8(3), in part, provides:

"The Minister shall ensure that all exceptional children in Ontario have available to them, in accordance with this Act and the regulations, appropriate special education programs and special education services without payment of fees by parents or guardians resident in Ontario..."

It is recognized that it is the exclusive role of the school in partnership with parents/guardians, to be the primary providers of school based programs and services.

Schools have the rights and obligation to provide education programs and services in schools as prescribed by the *Education Act*.

The Toronto Catholic District School Board (the “Board”) provides a range of special education programs and services. A description of special education programs and services is outlined in the Special Education Plan which is posted on the school board website.

School board staff work in partnership with parents to ensure that the needs of their child are identified, considered and met. To that end, collaboration with community agencies and private therapists is considered.

BACKGROUND

Some students receive additional support through community agency staff or by private therapists/consultants hired by parents.

These services may be beneficial to students, and can be offered to students in the home, community, or practitioner office setting.

Occasionally, schools receive requests to have third party services delivered in the school. Some examples of services that have been requested are:

- tutoring
- child care services
- speech pathology services
- music lessons
- private assessments
- intensive behaviour intervention

There are a number of concerns related to having third party services take place in the school:

- liability to the Board
- privacy and confidentiality issues
- conflicts with collective agreements
- qualifications and professional standards of third party staff
- informed consent issues
- supervision
- use of teacher and educational assistant time
- availability of school space
- payment of services
- equity issues
- duplication of service

THE NATURE OF THIRD PARTY SERVICES

Direct services to students are delivered by school board staff such as teachers, educational assistants, and special services staff. In some situations, other services for students are needed, and are delivered by individuals who are paid by someone other than the board of education/Ministry of Education. These services are called third party services.

There are two types of third party services – public and private.

a. Public third party services

Public third party services are those delivered by staff from an agency or other public organization. This could also include not for profit charitable organizations that are considered to serve public interests. Public third party services may be mandated by the government, be the result of interministerial agreement, or be funded by a government agency or donations. Services from these organizations are generally available to students in the system who qualify under the mandate or operation of the public third party. Public third party services, where needed, are requested by the Board. The following public third party services are permitted in TCDSB schools (with parent permission):

- School health support services through community care access centres (CCACs). This includes:
 - speech pathology
 - occupational therapy
 - physiotherapy
 - nursing
 - nutrition

b. Private third party services

Private third party services are those retained and/or paid for by parents/guardians. The request for services has come from parents/guardians. They have not been requested by the Board.

DIRECTION

Because of the difficulties listed in the Background section, private third party services delivered directly to students during the school day are not allowed in the school setting.

The Board does not allow individual parents to provide in-school or in-classroom student direct therapy/assistance.

Privately retained and community health professionals may visit a classroom only to observe a student and **not** for the purpose of providing instruction or therapy.

Privately retained and/or community health professionals are permitted in schools for the following purposes:

1. For observation, where this assists the privately retained or community health professionals to set appropriate goals for the child in non-school environments and to ensure consistency of programming outside the school environment.
2. To attend school meetings in order to share information regarding the child's participation in an outside program or to report results of outside evaluations or testing which may have taken place.
3. A private therapist or community health professional may act as an advocate for a child in the Special Education Identification and Placement Review Committee (IPRC) or Individual Education Plan (IEP) process, upon the written authorization of the parents or guardians of the child.

PROCEDURES RE: REQUESTS FOR INVOLVEMENT OF COMMUNITY AGENCY STAFF OR PRIVATELY RETAINED STAFF

The following are administrative procedures for schools when parents request involvement of community agency staff or privately retained staff:

1. As noted above, requests for involvement in a classroom or school by a privately retained or community health professional must be for observation, exchange of information or IPRC/IEP advocacy purposes only, and not for the delivery of direct services to students.
2. A request by a privately retained therapist or community health professional to observe a student in a classroom must be made by the parent/guardian to the school principal.
3. Privately retained or community health professionals must be accompanied by a member of the school administration or designate, or by a Board special services staff person during the observation period.
4. In your sensitivity in working with parents you as the principal of the school can determine and schedule the number and duration of parental requests in an effort to minimize the disruption to the delivery of the instructional program.
5. A community health professional/private therapist must keep confidential any personal information obtained about other students, teachers or staff while observing a particular student in a classroom, in accordance with relevant legislation including the *Education Act* and the *Municipal Freedom of Information and Protection and Privacy Act*.

6. A privately retained or community health professional who makes a classroom visit for the purpose of observation must provide a copy of the written report of the observation to the Board.
7. A criminal background check of all private therapists or community health professionals is required prior to any direct contact with pupils. (Ontario Regulation 521/01 "Collection of Personal Information" requires a personal criminal history of every individual who is an employee or a "service provider" who comes into direct contact with pupils on a regular basis (period of time to be established by TCDSB).
8. A sample letter is included in Appendix I. This can be adapted for use when community agency staff and private professionals request access to schools.

QUESTIONS REGARDING REQUESTS FOR INVOLVEMENT OF COMMUNITY AGENCY STAFF OR PRIVATELY RETAINED STAFF

Questions or concerns regarding requests for involvement of community agency staff or privately retained staff should be directed to the Superintendent of Special Services.

Approved by Education Council, March, 2006

(School Letterhead)

Dear:

This letter is in follow-up to the meeting/request for a classroom observation by _____.

TCDSB would like to continue to work in partnership with you and we would like to accommodate your request in a mutually agreeable fashion.

The following are the steps that would need to take place to set up this observation:

1. An appointment for observation would be set up through the Principal.
2. The purpose of the visit is for classroom observation only, with the classroom teacher retaining responsibility for the educational program.
3. The observers should not review or comment on the performance of the teacher, or other school staff and should not interrupt the flow of instruction.
4. Confidentiality of staff and of other students in the class must be maintained. The observers must not make any specific comments about students or staff in oral or written reports.
5. A copy of the written report about the observation would be provided to the school board, to my attention.
6. Outside service providers must have a criminal background check as prescribed by the *Education Act*. The Board has contracted with the Ontario Education Service (OESC) to gather this information. This documentation is required prior to access to schools and classrooms.

Please contact me if you would like to discuss this further.

Sincerely,

(Principal)

Special Education Plan – Input from SEAC Informal Working Group

- *Staff Development*
- *Educational and Other Assessments*
- *Coordination of Services with other Ministries or Agencies*
- *Protocol for Partnerships with External Agencies for provision of services by Regulated health Professionals, Regulated Social Service Professionals, and Paraprofessionals (PPM 149) posted on school board website*

For each section of the TCDSB Special Education Plan we have commented with 3 sections:

1. “Required” refers to what is required by the ministry guidelines.
2. “Findings” are what the working group observed in the TCDSB Spec Education Plan currently on the website.
3. “Recommendations” are what we think needs to change in the TCDSB plan, and in some areas, our suggested changes.

1. Staff Development

a. Required by the Ministry Guidelines

- i. Details of the board’s professional development plans for special education staff
- ii. The overall goal of the special education staff development plan
- iii. Ways in which staff provide input for the plan
- iv. Ways in which the school board’s SEAC is consulted about staff development
- v. Methods of determining priorities in the area of staff development
- vi. Courses, in-service training, and other types of professional development activities offered by the board
- vii. Ways in which staff are trained with regard to the legislation and ministry policy on special education, with particular attention to training for new teachers
- viii. Details of the board’s budget allocation dedicated to the staff development plan in the area of special education
- ix. Any cost-sharing arrangements with other ministries or agencies for staff development
- x. Ways in which school board staff are made aware of the board’s special education plan and of professional development opportunities
- xi. Include training to reflect any new legislation and Ministry PPMs and the results of any consultations (to set training priorities)

b. Findings in the TCDSB plan

- i. There is a detailed chart of the board’s professional development plans for special education staff.
- ii. Overall goal of the special education staff development plan is missing.
- iii. Ways in which staff provide input for the plan is missing.
- iv. Ways in which the school board’s SEAC is consulted about staff development is missing.
- v. Methods of determining priorities in the area of staff development is missing.
- vi. Courses, in-service training, and other types of professional development activities offered by the board are listed in the chart in a very detailed manner.
- vii. There are a very limited number of courses offered that reference changes in legislation or PPM in the staff training chart on special education. Most of it is focused on specific programs or activities like SNAP, IEPs, report cards, Empower etc... The chart is organized based on spec ed departments. The guidelines expect some training that is focused on legislation, PPM, the legal framework. There are no specific courses offered that cover these topics.
- viii. New spec ed teacher training focuses on programs and activities and not necessarily legislation, PPM and legal responsibilities. Only 2 NTIP courses are offered covering Anxiety and Mental Health.
- ix. Details of the board’s budget allocation dedicated to the staff development plan in the area of special education are missing.
- x. Cost-sharing arrangements with other ministries or agencies for staff development are not listed.
- xi. The ways in which school board staff are made aware of the board’s special education plan and of professional development opportunities are not documented in this document.
- xii. There is no reference to new legislation and Ministry PPMs in the document.

- xiii. Results from any consultations with regards to setting priorities are missing.
- c. Recommendations
 - i. Create a section that states the overall goal of the special education staff development plan
 - ii. The chart is useful but a great deal of information is missing. The chart should follow all of the missing information.
 - iii. Most of the subsequent points will need their own header above the related information.
 - iv. Add a section with the ways in which staff provide input for the staff development plan.
 - v. Add the ways SEAC is consulted about staff development.
 - vi. Add the method of determining priorities in the area of staff development.
 - vii. Add the courses offered that address changes in legislation or PPM to the staff training chart on special education.
 - viii. Add a break down of training expected to be taken by the various categories of staff. Suggested breakdown:
 - 1. Senior Administration, Principals and Vice-Principals
 - 2. New teachers
 - 3. All teachers
 - 4. New special education teachers
 - 5. Education assistance and Child & Youth Workers (CYWs)
 - 6. New EAs and CYWs
 - 7. Support service staff
 - ix. Add the board's budget allocation dedicated to the staff development plan in the area of special education.
 - x. If they exist, add any cost-sharing arrangements with other ministries or agencies for staff development. If none exist, the report should indicate this.
 - xi. Add the ways in which school board staff are made aware of the board's special education plan and of professional development opportunities.
 - xii. Create a section that refers to new legislation, Ministry PPMs, Ministry guides and other the documents that are used or referenced in this section.
 - xiii. Add the results from any consultations with regards to setting priorities. If none occurred, the report should indicate this.

2. Educational and Other Assessments

- a. Required by the Ministry Guidelines
 - i. Details of the board's assessment policies and procedures to make parents aware of the types of assessment tools used.
 - ii. Ways in which assessments are obtained by IPRCs.
 - iii. Ways in which assessments are used.
 - iv. Types of assessment tools used within the board, including educational assessments.
 - v. For each type of assessment tool describe:
 - 1. the qualifications of categories of staff who conduct the assessment and/or provide diagnoses.
 - 2. what organization or legislation governs the professional.
 - 3. average waiting times for assessments to be conducted.
 - 4. the criteria for managing waiting lists.
 - 5. an acknowledgement that requirements for obtaining parental consent are met prior to conducting the assessment.
 - 6. an explanation of how results of an assessment are communicated to parents.

7. a description of protocols for sharing information with staff and outside agencies.
8. an explanation of how the privacy of information is protected.

b. Findings in the TCDSB plan

- i. The opening paragraph explains the procedures but there is no formal Policy statement.
- ii. There is no clear section and description of the ways in which assessments are obtained by IPRCs. At several points it is stated that assessments may be used for IPRC purposes. There is no mention of assessments from outside sources except assessments done by other school boards.
- iii. There is no clear section describing the ways in which assessments are used. Related information is sprinkled all over this section, but it is not clear if it is complete.
- iv. The types of assessment tools used within the board is broken down by area of expertise first, not by assessment type.
- v. The list of information for each type of assessment tool described only has the name of the assessment by staff category. It does not include required specifics such as:
 1. the qualifications of categories of staff who conduct the assessment and/or provide diagnoses.
 2. what professional organization and legislation govern those professionals.
 3. average waiting times for assessments to be conducted.
 4. the criteria for managing waiting lists if they exist.
 5. an acknowledgement that requirements for obtaining parental consent are met prior to conducting the assessment.
 6. an explanation of how results of an assessment are communicated to parents.
 7. a description of protocols for sharing information with staff and outside agencies.
 8. an explanation of how the privacy of information is protected.
- vi. Each assessment is listed by professional area but the guidelines only require information by assessment type.

c. Recommendations

- i. This is a section that has some of the information expected but it does not follow the Ministry guidelines and is not in a consistent, logical format.
- ii. Create a Policy statement on assessments. Place it ahead of the procedure section with an appropriate heading.
- iii. Add a header for the procedure section.
- iv. Create a section that describes the ways in which assessments are obtained by IPRCs. Include an appropriate heading and add a section on assessments from all outside sources, other school boards, privately obtained, etc.
- v. Create a section describing the ways in which assessments are used and add an appropriate heading.
- vi. Organize the assessment types used within the board by professional area.
 1. Each type of assessment should include a subsection for:
 - a. the qualifications of staff who conduct the assessment and/or provide diagnoses.
 - b. who they are governed by (OCT, CPO, etc... and legislation such as the Education Act; the Regulated Health Professions Act, 1993; the Health Care Consent Act, 1996; or other legislation, as appropriate).
 - c. average waiting times for assessments to be conducted.
 - d. the criteria for managing waiting lists.
 - e. requirements for obtaining parental consent.
 - f. an explanation of how results of an assessment are communicated to parents.

- g. a description of protocols for sharing information with staff and outside agencies.
- h. an explanation of how the privacy of information is protected.
- i. a list of all assessments included under this assessment type and if is part of a group of assessments done together as part of an overall assessment such as a Psychological Educational Assessment.
- vii. Set up data collection to track the waiting times for assessments.

3. Coordination of Services with Other Ministries and Agencies

a. Required by the Ministry Guidelines

- i. Specific details about advance special education planning that is done for students with special needs who are arriving from other programs, such as the following:
 - 1. preschool nursery programs
 - 2. preschool programs for students who are Deaf
 - 3. preschool speech and language programs
 - 4. intensive early intervention programs for children with autism
 - 5. custody, care and/or treatment centres (CCTCs), and correctional facilities
 - 6. programs offered by other boards of education
- ii. The special education plan must indicate whether it is the board's policy or practice to accept assessments accompanying the students from these programs or whether it is the board's policy or practice to reassess all incoming students.
- iii. If reassessment is the policy or practice, the plan must state the estimated waiting time for completing an assessment.
- iv. Details about the way in which information is shared for students leaving the board to attend programs offered by other school boards or by CCTCs and correctional facilities.
- v. The board must identify the position of the person responsible for ensuring the successful admission or transfer of students from one program to another.

b. Findings in the TCDSB plan

- i. The opening statement only lists preschool programs and then "coordination of services with students with special needs". It does not specifically mention:
 - 1. preschool programs for students who are Deaf
 - 2. preschool speech and language programs
 - 3. intensive early intervention programs for children with autism
 - 4. CCTCs and correctional facilities
 - 5. programs offered by other boards of education
- ii. There is no statement on whether it is board policy or practice to accept assessments accompanying the students from these programs or whether it is the board's policy or practice to reassess all incoming students.
- iii. There is no statement on reassessment policy or practice and estimated waiting time for completing assessments.
- iv. There is no section with the details about the way in which information is shared for students leaving the board to attend programs offered by other school boards or by CCTCs and correctional facilities. There is a section on students arriving from CCTC programs but nothing addressing students leaving TCDSB to go to other boards, CCTC facilities, as required in the guidelines.

- v. The position of the person responsible for ensuring the successful admission or transfer of students from one program to another is referenced several times but it is not explicitly stated that they are the person responsible for this process.
- vi. There is an initiative section covering Autism, Mental Health and Best Start.
- c. Recommendations
 - i. Rework the opening statement to include:
 - 1. preschool programs
 - 2. preschool programs for students who are Deaf
 - 3. preschool speech and language programs
 - 4. intensive early intervention programs for children with autism
 - 5. CCTCs and correctional facilities
 - 6. programs offered by other boards of education
 - ii. Make a statement, with an appropriate heading, on whether it is board policy or practice to accept assessments accompanying the students from these programs or whether it is the board's policy or practice to reassess all incoming students.
 - iii. Make a statement with an appropriate heading on reassessment policy or practice and estimated waiting time for completing assessments.
 - iv. Create a section with the appropriate header on the details about the way in which information is shared for students leaving the board to attend programs offered by other school boards or by CCTCs and correctional facilities.
 - v. Although not required, keep the section on arriving students from CTCC programs. Include, as an appendix, a blank Demission Form and package information to be provided to the CCTC Principal.
 - vi. Add a section with appropriate the person responsible for ensuring the successful admission or transfer of students from one program to another and how to contact them.
 - vii. Keep the initiative section and ensure it is up-to-date and includes any appropriate new initiatives. Move the initiative section to the end of "Coordination of services with other ministries and agencies".

4. Protocol for Partnership with External Agencies

- a. Required by the Ministry Guidelines
 - i. This is not required by the Ministry Guidelines for the Special Education Plan.
- b. Findings in the TCDSB plan
 - i. The opening 3 pages of the protocol is a copy of the Ministry PPM 149.
 - ii. PPM 149 indicates that the board should have its own policy and protocols for Programs and Services that are delivered: i) by external agencies, ii) by the TCDSB and iii) what could be delivered by the TCDSB.
 - iii. The TCDSB Protocol that starts on page 4 is an important document, but it is not the Protocol envisioned by the Ministry issued PPM 149.
- c. Recommendations
 - i. Create TCDSB policies and protocols for programs and services that deal with special education needs, including those delivered by the board and those delivered by external agencies.
 - ii. It is important to include these TCDSB policies and protocols, including those based on PPM 149, in the Special Education Plan.

The SEAC Working Group reviewing the TCDSB Special Education Plan recommends the following sections of the Special Education Plan as priorities to address by July 2021:

- 1) IPRC process
- 2) IEP process
- 3) Special Education placements provided by the board
- 4) Parent Guide to Special Education
- 5) Board's consultation process