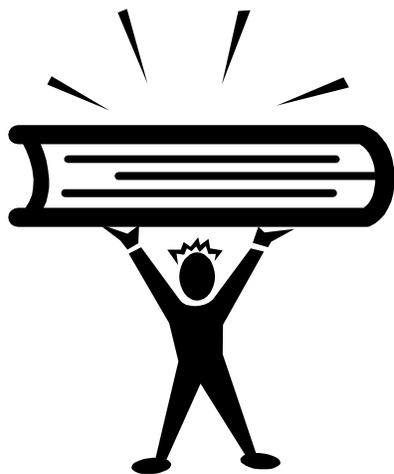


**Handbook
for the
Identification and Review
of Students with
Severe Disabilities**



August 2005

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Section I – General Information

Introduction

Alberta Education provides funding to school authorities to support the development and implementation of programming for students with severe disabilities. The *Handbook for the Identification and Review of Students with Severe Disabilities* presents case studies to assist school authorities in identifying students who may be eligible for special education programming and services. Specific information related to severe disabilities funding conditions and requirements is in the *Funding Manual for School Authorities 2005-2006 School Year* as follows:

- School Jurisdictions and Charter Schools, Section 1.7
- Private Schools and Designated Special Education Private Schools (DSEPS), Section 3.3
- Severe Disabilities Definitions, Glossary of Terms.

Funding for students with severe disabilities in school jurisdictions is based on the established severe disabilities jurisdiction profile. Funding for students with severe disabilities in private schools, designated special education private schools and charter schools continues to be based on the review of students on an individual basis.

School authority personnel should direct enquiries regarding the identification of students with severe disabilities and related funding to the Special Programs Branch at (780) 422-6326 or toll-free in Alberta at 310-0000.

Severe Disabilities Funding 2005/2006 Process At A Glance

	REQUIREMENT	ACTION	RESPONSIBILITY	DATE
All school authorities	Identify students	<ul style="list-style-type: none"> Schools code students with severe disabilities 	Schools/School Authority	Complete by September 30, 2005
	Special Programs Branch Report	<ul style="list-style-type: none"> Send report via Edulink 	School Authority	Count as of September 30, 2005 Submission by October 5, 2005
Private, DSEPS, and Charter Schools	Identification of students to be monitored	<ul style="list-style-type: none"> Special Programs Branch (SPB) provides school with list of students to be monitored 	SPB Education Managers	Mid-October to mid-November 2005
	Preparation of documentation for monitoring	<ul style="list-style-type: none"> complete <i>Student Monitoring Form 2005/2006</i> include copies of recent assessment/diagnostic reports include IPP include anecdotal notes, where applicable 	School staff	Complete by mid-November 2005
	Monitoring of student files	<ul style="list-style-type: none"> Either on-site visit or copies of file information sent to SPB when requested Optional: <ul style="list-style-type: none"> classroom observation of students discussion with school staff regarding student needs and supports 	SPB Education Managers	November 2005 to January 2006
	Severe Disabilities Funding Payment based on September 30 enrolment	<ul style="list-style-type: none"> school authority advised of number of approved students and next monitoring dates School Finance Branch advised of number of approved students and finalize payments 	SPB Education Managers School Finance Branch	Mid-January 2006
	March Pro-rated Funding	<ul style="list-style-type: none"> identify students with severe disabilities who enrol after September 30 resolve any priority conflicts resolve any transfer payments between private schools send student coding to Information Services and School Finance send Special Programs Branch Report via Edulink 	School/school authority	Count as of March 1, 2006 Submission by March 6, 2006
	Preparation of documentation for pro-rated funding monitoring	<ul style="list-style-type: none"> complete <i>Student Monitoring Form 2005/2006</i> include copies of recent assessment/diagnostic reports include IPP include anecdotal notes, where applicable 	School staff	Complete by March 30, 2006
	Pro-rated funding monitoring of student files	<ul style="list-style-type: none"> Send documentation to SPB for monitoring when requested 	SPB Education Managers	March 30 to mid-April 2006
	Severe Disabilities Funding Payment based on March 1 enrolment	<ul style="list-style-type: none"> school authority advised of number of approved students and next monitoring dates School Finance Branch advised of number of approved students and finalize payments 	SPB Education Managers School Finance Branch	Mid-April to May 2006

NOTE:

School Jurisdictions – Refer to *Funding Manual for School Authorities 2005-2006 School Year*, section 1.7.

Private Schools & Designated Special Education Private Schools – Refer to *Funding Manual for School Authorities 2005-2006 School Year*, section 3.3.

Charter Schools – Refer to *Funding Manual for School Authorities 2005-2006 School Year*, sections 1.7 & 3.3

Documentation Requirements for All School Authorities

School jurisdictions, charter, private, and designated special education private schools that receive funding from Alberta Education for students with severe disabilities must ensure that the following conditions are met.

- Funding for students with severe disabilities will be based on all of the following requirements being met and implemented at the school level:
 - assessment and diagnosis by qualified personnel (note: diagnosis alone is not sufficient to qualify for funding)
 - documentation/assessment of the student’s current level of functioning in the learning environment
 - a current Individualized Program Plan (IPP) which addresses the student’s diagnosed needs
 - identification of the levels of support and service being provided to the student.
- The IPP must be supported by appropriate medical, psychological or other professional documentation for each student with a severe disability identified and attending a school of the authority.
- Students with severe disabilities must receive three or more of the levels of support identified below:
 - a minimum 0.5 FTE one-to-one instruction/intervention (e.g., teacher and/or teacher assistant time)
 - specialized equipment or assistive technology
 - assistance with basic care (e.g., toileting, grooming, catheterization)
 - frequent documentation of medical and/or behaviour status
 - direct support services at a cost to the system (e.g., behaviour specialist, orientation and mobility specialist).
- School authorities will use the severe disabilities categories/codes and related criteria outlined in the *Funding Manual for School Authorities 2005-2006 School Year*, Glossary of Terms, and the *Handbook for the Identification and Review of Students with Severe Disabilities* to determine a student’s disabling condition for severe disabilities identification purposes.
- School authorities must report students with severe disabilities as of September 30, and submit the information to Information Services Branch by October 5, 2005.
- School jurisdictions that identify students with severe disabilities after September 30 can submit changes during the year to School Finance Branch on Form 05 AEI.2c *Base Instruction Add, Modify, Delete Form For Enrolments*.

Appeal of Severe Disabilities Funding

Charter, Private, and Designated Special Education Private Schools

In situations where charter or private schools, including designated special education private schools, disagree with the outcome of the monitoring process for individual student severe disabilities funding, an appeal of the decision(s) can be made to the Director of Special Programs Branch using the process outlined below.

- School staff review the monitoring decision to clarify the rationale for the appeal.
- School administrator writes the Director of the Special Programs Branch to request an appeal of the decision(s) of the monitoring process.
- The request for an appeal must be received by Special Programs Branch within 10 working days of the school receiving written notification that the student was not approved for severe disabilities funding.
- The information submitted to the Director of the Special Programs Branch, when requesting an appeal, must include:
 - student's name
 - severe disabilities code
 - Alberta Student Number (ASN)
 - a copy of all documentation contained in the student file that was **initially submitted** for monitoring.
- No new information can be added or considered during the appeal process.
- Student documentation to support the appeal will be reviewed by an independent contractor.
- After review of the appeal documentation, the contractor may recommend that:
 - the original decision stands or
 - that funding is approved.
- The final decision regarding the appeal will be made by the Director of Special Programs Branch and communicated in writing to the school authority and School Finance Branch.

School Jurisdictions

School jurisdictions may request an audit of severe disabilities profile funding by writing the Director of Special Programs Branch by November 1, 2005. The Director of Special Programs Branch will arrange for a review team to visit the jurisdiction.

- The audit will consider the eligibility and approval of severe disabilities funding based on a review of each student's file. Each file must contain all the following information:
 - assessment and diagnosis by qualified personnel (note: a diagnosis alone is not sufficient to qualify for funding)
 - documentation/assessment of the student's current level of functioning in the learning environment
 - a current IPP

- identification of the levels of support and services being provided to the student. Students claimed for severe disabilities funding must receive three or more levels of support.
- The review team will recommend to the Director of Special Programs Branch that the severe disabilities jurisdiction profile:
 - be increased
 - be decreased or
 - remain the same.
- The results of the audit will be communicated in writing to the school jurisdiction and School Finance Branch.

Section 2 – Severe Disabilities Categories

Severe Cognitive Disability (Code 41)

Definition

A funded student with a severe cognitive disability is one who:

- has severe delays in all or most areas of development
- frequently has other disabilities including physical, sensory, medical and/or behavioural
- requires constant assistance and/or supervision in all areas of functioning including daily living skills and may require assistive technology
- should have a standardized assessment, which indicates functioning in the severe to profound range (standardized score of 30 ± 5 or less). Functional assessments by a qualified professional will also be considered in cases where the disabilities of the student preclude standard assessments.
- has scores equivalent to the severe to profound levels on an adaptive behavioural scale (e.g., AAMR Adaptive Behaviour Scales-School: Second Edition (ABS-S:2); Vineland Adaptive Behaviour Scales; Scales of Independent Behaviour-Revised).

Questions and Answers

What are the main characteristics of a student with a Severe Cognitive Disability Code 41?

- The functional level is less than one third of his/her chronological age on an adaptive behaviour scale.
- Students may also:
 - be medically fragile
 - require assistive technology
 - have autistic-like, aberrant behaviours
 - have limited, if any, receptive or expressive language.
- The student's level of dependency requires mostly one-to-one and hand-over-hand assistance to perform tasks for ambulation or daily living and functioning.
- These students usually require extensive supports and services including one-to-one teacher assistant time, assistance with basic care and additional therapeutic services.
- It is unlikely that these students will acquire basic numeracy and literacy skills.

What documentation is required to determine eligibility for special education coding?

- The use of adaptive behaviour scales to obtain functional ability scores in the severe to profound range is required. These students are not usually assessable using the WISC-IV or Stanford-Binet V.
- Once an initial diagnosis has been given and the student has a chronic disability that has not changed significantly, documentation from the Regional Educational Consulting Service providers (REACH, CASE, Edmonton Regional Educational Consulting Service, RÉSEAU) or other personnel specializing in the field may be sufficient for programming.

What other supporting documentation relevant to the student’s disabling condition and programming requirements should be provided for Alberta Education?

- Physical therapy reports, occupational therapy reports, speech-language therapy reports, as required.
- Current (within 3 years) relevant medical reports.

For additional information please refer to the following case studies, completed Student Monitoring Forms and sample IPPs on pages 8–19.

Case Study — Brandon

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Brandon is a seventeen-year-old student in a Life Skills Program at Uphill High School. • A recent AAMR Adaptive Behaviour Scales School: Second Edition and the Leiter International Performance Scale: Revised, were completed by S. Adams, Chartered Psychologist, indicating that Brandon’s intellectual functioning and adaptive functioning in January 2004 was less than one third of his chronological age. • Brandon is ambulatory, non-verbal and requires ongoing assistance with his personal care.
<p>Current supports/ services in place</p>	<ul style="list-style-type: none"> • Brandon is in a special education class with nine students, a 1.0 FTE teacher and 3.0 FTE teacher assistants. • Brandon requires one-on-one assistance for personal care, feeding and communication. • In consultation with a speech-language pathologist, a Picture Communication Symbols (PCS) communication board has been developed. • Teacher Assistant uses the Mayer-Johnson PCS program on a classroom computer to modify class materials to Brandon’s level. • Brandon is receiving consultation support from an occupational therapist to assist with fine motor skills and feeding issues. • His family is also accessing support from Family Support for Children with Disabilities and the I CAN Centre at the Glenrose Rehabilitation Hospital.
<p>Individualized Program Plan</p>	<ul style="list-style-type: none"> • Brandon’s IPP was developed by the learning team including his parents. • Goals reflect his needs in communication, fine motor skills, personal care and life skills development.

SAMPLE
Student Monitoring Form
Brandon
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority ABC Authority

School Uphill High School

Student Name Brandon

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 88/07/15 Grade Ungraded – Life Skills Program

Placement (describe) Special Education class; no integration

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Intellectual and Adaptive functioning: < 1/3 chronological age	January 2004	S. Adams, Chartered Psychologist

Additional assessment information (please attach copies):

2. How does the condition/disability affect the student in the learning environment?:

Ambulatory, non-verbal and requires assistance with personal care.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities Funding*, (e.g., Section 1.7 for Jurisdictions & Section 3.3 for Private/Charter Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention

- specialized setting with teacher 7 (hours per day); 1:9 (staff/student ratio)
- small group work with teacher and/or teacher assistant _____ (hours per day) _____ (staff/student ratio)
- teacher assistant 7 (hours per day); 1:3 (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) _____

b) Specialized equipment and/or assistive devices:

- communication devices
- assistive technology/devices
- free field amplification
- other (specify) _____
- OT/PT equipment
- specialized furniture
- personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|--|--|--|
| <input type="checkbox"/> toileting program | <input checked="" type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input checked="" type="checkbox"/> dressing | <input checked="" type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input type="checkbox"/> management of equipment | <input checked="" type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____
	Frequency → <input type="checkbox"/> hourly <input type="checkbox"/> daily <input type="checkbox"/> weekly <input type="checkbox"/> monthly			
<input checked="" type="checkbox"/> Medical	<input type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input checked="" type="checkbox"/> other	Monitor personal care
	Frequency → <input type="checkbox"/> hourly <input checked="" type="checkbox"/> daily <input type="checkbox"/> weekly <input type="checkbox"/> monthly			

e) Direct support services for the student at a cost to the system:

For example: Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and SHIP.

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input checked="" type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input checked="" type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system.

- | | |
|---|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input checked="" type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input type="checkbox"/> other _____ |
| <input checked="" type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 18, 2005
Date

T. Jones
Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)**Student Name:** Brandon Smith

Student Information		Date: September 10, 2005
Student I.D. # <u>12300987</u>	Funding Code: <u>41</u>	
Name: <u>SMITH, Brandon</u>		
Birth date (mm/dd/yyyy): <u>07</u> / <u>15</u> / <u>1988</u>	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
Address: <u>1234 - 56 St.</u>		
<u>Anywhere, Alberta</u>		
Telephone No.: <u>(403) 456-7890</u>		
Parent/Guardian: <u>Mr. & Mrs. John Smith</u>		
School: <u>Uphill High School</u>	Grade/Learning Group: <u>Life Skills Program</u>	

Relevant Medical Information

Brandon is in good health. Any medication he requires is administered at home and not during school hours.

No medical information available at this time.

IPP Team Members	Position
<u>Mr. & Mrs. Smith</u>	<u>Parents</u>
<u>Brandon Smith</u>	<u>Student</u>
<u>Ms. Jones</u>	<u>Special Education Teacher (Life Skills Program)</u>
<u>Mark Chatty</u>	<u>Speech-Language Pathologist</u>
<u>Jody Helper</u>	<u>Teacher Assistant</u>
<u>Dorothy Pickle</u>	<u>Occupational Therapist</u>

Additional Information

Brandon enjoys being around his peers and uses his communication board to exchange greetings. He is familiar with the school building and is able to go from his classroom to the cafeteria with minimal supervision. Brandon continues to need light physical prompts to initiate grooming routines but he responds positively to the assistance. During breaks and lunch, Brandon requires close supervision to ensure that he chews food thoroughly, as he tends to rush when eating. This year the focus of programming is to prepare Brandon for entry into a supported living situation by mastering functional life skills with the greatest level of independence so that he has a positive transition into an adult setting two years from now.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: SMITH, Brandon

Special Education and Related Support Services (additional school staff/support personnel/agencies)

- Jody Helper, teacher assistant, is assigned to work with Brandon and two other students 7 hours/day.
- Mark Chatty, speech-language pathologist, will make a visit at the end of each term to modify Brandon's augmentative communication board and will also support the introduction and trial with four simple voice output communication aids (VOCA).
- Dorothy Pickle, occupational therapist, will observe Brandon in the classroom and during lunchtime and demonstrate basic care intervention techniques to Jody Helper, at the beginning of the 1st, 3rd & 4th terms.

Areas of Strength

- imitates well
- likes to make people laugh
- very social and likes to be around people at school, home and in the community
- can consistently use 100 Mayer-Johnson graphics to make needs known to others

Areas of Need

- continue to develop communication skills
- development of pre-vocational skills
- develop food preparation skills
- gain independence performing simple routines

Required Classroom Accommodations (changes to instructional and assessment strategies, materials and resources, facilities or equipment)

- special education class with no subject area integration
- requires hand-over-hand assistance to complete personal care routines
- use light, physical prompting to initiate tasks in a small group
- keep Mayer-Johnson graphics consistent for names of school staff and family members
- use Boardmaker to adapt all curriculum areas and to create work sheets and tests
- arrange for trials of four simple VOCAs from the I CAN Centre, Glenrose Rehabilitation Hospital.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: SMITH, Brandon

A. Specialized Assessment Results

Date Given	Assessment Tools	Results
January 2004	<ul style="list-style-type: none"> • AAMR Adaptive Behaviour Scales: Second Edition • Leiter International Performance Scale: Revised 	<ul style="list-style-type: none"> • adaptive behaviour rating and cognitive ability both scored <1/3 chronological age

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

Date Given	Assessment Tools	Results
June 2005	<ul style="list-style-type: none"> • classroom functional communication assessment • observation checklist of personal care skills 	<ul style="list-style-type: none"> • can consistently use 100 graphic symbols to express basic needs • consistently uses "yes" and "no" symbols during choice making activities • able to consistently maintain two hand grasp on a plastic mug or glass • requires hand-over-hand to use a fork, knife and spoon during lunch time • with light physical prompting can assist in completing grooming and washroom routines

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: SMITH, Brandon

Long-term goal related to assessment results: Brandon will be able to communicate choices.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By November, Brandon will make choices in menu planning by pointing to an item in each food group with no errors or duplications/five trials per week.	<ul style="list-style-type: none"> • November 30 	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist for data collection 	
By January, Brandon will select the program he wants from a list of 10 icons on the computer desktop, with 80% accuracy/four trials per week.	<ul style="list-style-type: none"> • January 30 	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist for data collection 	
By May, Brandon will choose two of five students he wants to work with on four of five occasions/four trials per week.	<ul style="list-style-type: none"> • May 30 	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist for data collection 	
By June, Brandon will choose four of five students he wants to work with on four of five occasions/four trials per week.	<ul style="list-style-type: none"> • June 30 	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist for data collection 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Smith, Brandon

Long-term goal related to assessment results: Brandon will demonstrate a working knowledge of signage commonly found in the community.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By October 30, when presented with a series of eight signs that direct (e.g., push, keep left), Brandon will point to the correct sign when verbally requested on five consecutive days.	<ul style="list-style-type: none"> • October 30 	<ul style="list-style-type: none"> • teacher aide observation • checklist 	
By December 15, when presented with a series of 20 warning and safety signs (e.g., emergency exit, poison, no smoking), Brandon will point to the correct sign when verbally requested on four out of five days.	<ul style="list-style-type: none"> • December 30 	<ul style="list-style-type: none"> • teacher aide observation • checklist 	
By February 28, Brandon will be able to match pictorial representations of the 28 signs to signs in the school building, with 20 matches on four consecutive days.	<ul style="list-style-type: none"> • February 28 	<ul style="list-style-type: none"> • teacher aide observation • checklist 	
By April 30, when presented with a series of 20 community signs (e.g., mail, restroom, use crosswalk), Brandon will point to the correct sign when verbally requested on five consecutive days.	<ul style="list-style-type: none"> • April 30 	<ul style="list-style-type: none"> • teacher aide observation • checklist 	
By June 30, Brandon will demonstrate an understanding of directional safety and community signs by complying with the intent of the signs he encounters on any given day.	<ul style="list-style-type: none"> • June 30 	<ul style="list-style-type: none"> • teacher aide observation • checklist 	

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** SMITH, Brandon

Long-term goal related to assessment results: Brandon will gain independence in simple routines.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By October 30, Brandon will get his own apron and join his cooking group, at each occasion, without prompting.	<ul style="list-style-type: none"> • October 30 	<ul style="list-style-type: none"> • teacher observation • checklist 	
By January 30, Brandon will look at his picture schedule and point to what comes next, eight times out of 10/eight trials per day.	<ul style="list-style-type: none"> • January 31 	<ul style="list-style-type: none"> • teacher/teacher aide observation • checklist 	
By April, Brandon will sequence 10 pictures illustrating preparation for school, nine times out of ten on three consecutive days.	<ul style="list-style-type: none"> • April 30 	<ul style="list-style-type: none"> • parent observation • teacher aide observation • checklist 	
By June 30, Brandon will complete his work routine with a maximum of four verbal cues per routine (total compliance/five trials per week).	<ul style="list-style-type: none"> • June 30 	<ul style="list-style-type: none"> • teacher/teacher aide observation • checklists 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Smith, Brandon

Long-term goal related to assessment results: Brandon will demonstrate an understanding of food safety and safe handling of kitchen utensils.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By October 30, when given a verbal prompt, Brandon will wash his hands before handling food without resistance each and every time. Brandon will get his own apron and join his cooking group, at each occasion, without prompting.	<ul style="list-style-type: none"> • October 30 	<ul style="list-style-type: none"> • teacher/teacher aide observation • checklist 	
By January 30, Brandon will demonstrate hygienic washing of pots and pans, using a rinse cycle and the loading of a dishwasher completing the steps using his communication board only, 12 of 15 times.	<ul style="list-style-type: none"> • January 31 	<ul style="list-style-type: none"> • teacher/teacher aide observation • checklist 	
By April, Brandon will sequence 10 pictures illustrating preparation for school, nine times out of ten on three consecutive days.	<ul style="list-style-type: none"> • April 30 	<ul style="list-style-type: none"> • parent observation • teacher aide observation • checklist 	
By June 30, Brandon will complete his work routine with a maximum of four verbal cues per routine (total compliance/five trials per week).	<ul style="list-style-type: none"> • June 30 	<ul style="list-style-type: none"> • teacher/teacher aide observation • checklists 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: SMITH, Brandon**Transition Plans** (recommendations, services required, strategies and materials that were effective)

Mr. & Mrs. Smith are exploring options for community-based living arrangements for Brandon upon completion of high school. Due to the degree of independence required by many of the agencies, the focus of both home and school interventions will be providing Brandon with the opportunity to master as many basic care routines and skills as possible over the next two years. Both school staff and parents will ensure that all assessments and reports are updated and submitted to the appropriate agencies so that Brandon receives necessary benefits upon completing high school. Brandon uses a static display communication board. To increase his opportunities to communicate with peers, he should be introduced to a simple voice output communication aid that is durable and portable, using the same Mayer-Johnson symbols and board arrangement. This should support him in becoming more confident and independent when initiating contact with friends and peers.

Signature of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: <u>Mr. & Mrs. Smith</u>	Date: <u>September 10, 2005</u>
Student (if applicable): <u>Brandon Smith</u>	Date: <u>September 10, 2005</u>
Principal: <u>Ms. I. M. Busy</u>	Date: <u>September 10, 2005</u>
Teacher(s): <u>Ms. Jones (Classroom Teacher)</u> <u>Jody Helper (Teacher Assistant)</u>	Date: <u>September 10, 2005</u>

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: SMITH, Brandon

Year-end Summary

Date: _____

Goals and Objectives Achieved

Strategies That Worked Well

Goals and Objectives Requiring Ongoing Focus

Support Services Required

Recommendations

Severe Emotional/Behavioural Disability (Code 42)

Definition

A funded student with a severe emotional/behavioural disorder is one who:

- displays chronic, extreme and pervasive behaviours, which require close and constant adult supervision, high levels of structure, and other intensive support services in order to function in an educational setting. The behaviours significantly interfere with both the learning and safety of the student and other students. For example, the student could be dangerously aggressive and destructive (to self and/or others), violent and/or extremely compulsive; and
- has a diagnosis including conduct disorder, schizophrenia or bi-polar disorder, obsessive/compulsive disorders, or severe chronic clinical depression; and may display self-stimulation or self-injurious behaviour. In the most extreme and pervasive instances, severe Oppositional Defiant Disorder may qualify.

A clinical diagnosis within the last 2 years of a severe emotional/behavioural disorder by a psychiatrist, chartered psychologist or a developmental pediatrician is required, in addition to extensive documentation of the nature, frequency and severity of the disorder by school authorities. The effects of the disability on the student's functioning in an educational setting must be described. An ongoing treatment plan/behaviour plan should be available and efforts should be made to ensure that the student has access to appropriate mental health and therapeutic services.

A clinical diagnosis of a severe emotional/behavioural disorder is not necessarily sufficient to qualify under this category. Some diagnoses with behavioural components that are not sufficient to qualify are: Attention Deficit/Hyperactivity Disorder (AD/HD), Attention Deficit Disorder (ADD).

Note: Students diagnosed with Fetal Alcohol Spectrum Disorder (FASD), in the most severe cases, should be reported under Code 44 rather than Code 42.

Questions and Answers

What documentation is required to determine eligibility for coding students with a Severe Emotional/Behavioural Disability Code 42?

- Documentation in the student's file should include the following type of information:
 - a behaviour assessment report that includes a specific clinical diagnosis
 - anecdotal notes that describe the nature, frequency and severity of the aberrant behaviour and the impact on learning
 - behaviour plan.

What type of information may be included in a behaviour assessment report?

- The type of information typically found in a behaviour assessment report includes:
 - assessment/diagnostic information which clarifies and documents history which may have precipitated the current behaviours
 - recent medical history noting any medication which modifies the student's behaviour and further assessments/follow-up appointments
 - interviews/surveys; e.g., Behaviour Assessment System for Children, Second Edition (BASC-2) or Conners Rating Scales-Revised, filled out by parents, teacher(s), and student (if appropriate), that outline the concerns with the student's behaviour, as well as the nature, frequency and severity of the specific behaviour and steps taken so far to mitigate it
 - observations and assessment results from the psychiatrist/chartered psychologist making the clinical diagnosis.

The student's behaviour has improved significantly with all the programming supports that are in place. Will the student still meet criteria at the time of the file review?

- It is anticipated that a student's behaviour will improve with appropriate programming and support.
- The student may continue to meet the criteria provided that appropriate behaviours are maintained because of the level and degree of supports and programming that are aligned with an appropriate diagnosis.

How can I demonstrate that the student's behaviour was severe?

- In addition to the behaviour assessment report, anecdotal notes and checklists that describe the nature, frequency and severity of the student's behaviour at the time s/he was identified by the school authority should be included (see Appendix C – *Recording Anecdotal Information – Code 42*).

Should the teacher/parent communication book and/or the teacher's daily checklist be included in the review package for a student?

- Communication books and daily checklists are useful for sharing information with parents and tracking behavioural incidents, however, they do not usually provide sufficient descriptive information.
- A summary of behaviours may be included.
- It should be noted on the Student Monitoring Form that these records are kept and available upon request, but are not included in the student information package.

For additional information, please refer to the following case study, completed Student Monitoring Form, and sample IPPs on pages 22–32.

Case Study — Harley

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Harley is a fifteen-year-old boy in grade 10 at Dry Creek High School. • Harley currently resides in a foster home near the school. • Harley was diagnosed as having Bi-polar Disorder by Dr. Bunton in July 2004. • Harley’s behaviours include emotional instability, overactivity and impulsiveness. His manic and depressive episodes have increased over the past several months. • Harley is currently under the care of Dr. Campbell, psychiatrist, who has prescribed medication to help control Harley’s episodes. • Some of the features of Harley’s behaviours include: <ul style="list-style-type: none"> – truancy – failure to complete school assignments – anxiety attacks – depression – mood swings, manic episodes (e.g., grandiose talk, agitation, withdrawal) – extreme withdrawal, no peer relations, unresponsive, constant crying – self-injurious behaviour.
<p>Current supports/ services in place</p>	<ul style="list-style-type: none"> • Harley is in a regular grade 10 program. He has the assistance of an educational assistant for three hours each day for one-on-one support. • He receives one-on-one counsellor support for one-half hour each day from the school counsellor, who also is trained in management of emotional and behavioural disorders. • A special education consultant works with the teachers and educational assistant on a monthly basis to review and revise programming strategies. • Daily behavioural checklists are completed to track Harley’s behaviours.

	<ul style="list-style-type: none"> • The school has regular contact with Harley’s psychiatrist, who also is part of Harley’s support team. • Harley meets with his psychiatrist on a monthly basis. • Harley also has regular meetings with the social worker in charge of his case.
<p>Individualized Program Plan</p>	<ul style="list-style-type: none"> • Harley’s IPP was developed by the learning team, in consultation with his legal guardian, psychiatrist, special education consultant and social worker. • Harley’s overall program focuses on helping him cope with social, emotional and academic needs. • The major behaviour management goals identified are: <ul style="list-style-type: none"> – teaching self-regulation strategies – increasing organizational skills and reducing off-task behaviours – learning coping skills for anxiety episodes.

SAMPLE
Student Monitoring Form
Harley
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority ABC Authority

School Dry Creek High School

Student Name Harley

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 90/03/17 Grade 10

Placement (describe) Regular grade 10 program

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Bi-polar Disorder	July 2004	Dr. Bunton

Additional assessment information (please attach copies):

2. How does the condition/disability affect the student in the learning environment?:

Mood swings, manic episodes, extreme withdrawal, no peer relations, unresponsive, constant crying, self-injurious behaviour, depression.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for Jurisdictions & Section 3.3 for Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention:

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
- small group work with teacher and/or teacher assistant _____ (hours per day) _____ (staff/student ratio)
- teacher assistant 3 (hours per day); 1:1 (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) School Counsellor 30 min/day 1:1

b) Specialized equipment and/or assistive devices:

- | | |
|--|--|
| <input type="checkbox"/> communication devices | <input type="checkbox"/> OT/PT equipment |
| <input type="checkbox"/> assistive technology/devices | <input type="checkbox"/> specialized furniture |
| <input type="checkbox"/> free field amplification | <input type="checkbox"/> personal FM system |
| <input checked="" type="checkbox"/> other (specify) <u>Laser PC6</u> | |

c) Assistance with personal care/health-related interventions:

- | | | |
|--|--|---|
| <input type="checkbox"/> toileting program | <input type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input checked="" type="checkbox"/> administration of medicine | <input type="checkbox"/> management of equipment | <input type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input checked="" type="checkbox"/> Behaviour	<input checked="" type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____
	Frequency →	<input type="checkbox"/> hourly	<input checked="" type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly
<input checked="" type="checkbox"/> Medical	<input checked="" type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____	
	Frequency →	<input type="checkbox"/> hourly	<input checked="" type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system.

For example: Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and SHIP:

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input checked="" type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker - | <input checked="" type="checkbox"/> school counsellor: <u>½ hr/day; 1:1</u> |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system:

- | | |
|--|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input checked="" type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input checked="" type="checkbox"/> Alberta Mental Health Board | <input checked="" type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input type="checkbox"/> other _____ |
| <input type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 18, 2005

Date

B. Moore

Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)**Student Name:** JONES, Harley

Student Information		Date: September 12, 2005
Student I.D. # <u>10023489</u>	Funding Code: <u>42</u>	
Name: <u>JONES, Harley Edward</u>		
Birth date (mm/dd/yyyy): <u>03 / 17 / 1990</u>	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
Address: <u>R.R #3</u>		
<u>Rural Alberta T0Z 1X0</u>		
Telephone No.: <u>(780) 456-7890</u>		
Parent/Guardian: <u>Susan and Henry Smith</u>		
School: <u>Dry Creek High School</u>	Grade/Learning Group: <u>10 Regular</u>	

Relevant Medical Information

Harley is on medication for bi-polar disorder, which is to be taken before lunch under the supervision of the teacher assistant. The time and dosages are to be recorded on a daily basis and sent to his psychiatrist at the end of each month. Refusals to take medication should be recorded and his guardians notified immediately when these situations occur. Information sheets explaining bi-polar disorder and the side effects of medication have been distributed to all his teachers and teacher assistant. Staff who observe possible side effects from the medication are requested to contact Harley's guardians immediately.

No medical information available at this time.

IPP Team Members	Position
<u>Harley Jones</u>	<u>Student</u>
<u>Susan and Henry Smith</u>	<u>Guardians</u>
<u>Dr. Jim Campbell</u>	<u>Psychiatrist</u>
<u>Jane Glass</u>	<u>School counsellor</u>
<u>Mike Peters</u>	<u>Teacher Assistant</u>
<u>Judy Cook</u>	<u>Special Education Consultant</u>
<u>Brenda Lively</u>	<u>Vice-Principal</u>

Additional Information

Harley continues to adjust to living with the diagnosis of bi-polar disorder. It is critical that all teachers maintain regular and consistent communication with his guardians, either by telephone or e-mail. General strategies for supporting Harley's social interactions with staff and peers have been distributed and should be reviewed by staff on a regular basis. Harley has begun to experience more intense fine motor tremors, a side effect of the medication. For this reason he will continue to use a Laser PC6 to assist with completing written activities and his Palm Pilot for tracking assignments and recording mood chart information.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: JONES, Harley

Special Education and Related Support Services (additional school staff/support personnel/agencies)

- daily counsellor support to assist Harley in understanding his diagnosis and to complete his mood chart
- teacher assistant support 3 hours/day
- special education consultant to assist teachers with developing programming and adapt instructional strategies
- Harley meets monthly with his psychiatrist
- quarterly meetings with his social worker

Areas of Strength

- interested in theatre set design
- enjoys watching sports

Areas of Need

- continue to develop self-regulation strategies
- improving social interactions with peers and teachers

Required Classroom Accommodations (changes to instructional and assessment strategies, materials and resources, facilities or equipment)

- reduced course load and attend classes only in the morning
- afternoon work experince with local theater company in the carpentry department
- extra set of text books at home
- allow additional time for tests/examinations
- allow student to write in a small group setting, with teacher assistant supervision, to reduce performance anxiety
- modify classroom and homework assignments according to fluctuations in his emotional status
- permit and encourage use of the Laser PC6 features (e.g., word processing, spreadsheets, scientific calculator, text-to-speech, etc.) to support note taking and assignment completion
- use Palm Pilot for recording assignments and scheduling timelines for completing projects
- use Palm Pilot to complete daily mood chart record

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: JONES, Harley**A. Specialized Assessment Results**

Date Given	Assessment Tools	Results
November 2003 January 2004 June 2005	<ul style="list-style-type: none"> • psycho-educational assessment • hospitalization • referred for psycho-educational and functional behavioural assessments 	<ul style="list-style-type: none"> • Harley was unable to complete the assessment. • Diagnosed with bi-polar disorder. • School counsellor will consult with Dr. Campbell to determine the optimal time for these assessments to take place.

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

Date Given	Assessment Tools	Results
June 2005	<ul style="list-style-type: none"> • Provincial Achievement Tests 	<ul style="list-style-type: none"> • Harley was hospitalized and did not write the grade 9 tests. • NOTE: Due to his illness, Harley has not been assessed in the last two years. Should he improve, achievement testing will be done during this school year.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: JONES, Harley

Long-term goal related to assessment results: Harley will independently identify situations that make him anxious and demonstrate strategies to reduce his anxiety.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
When asked by the counsellor, Harley will be able to verbally describe two types of classroom situations that make him anxious on four of five days and record this information on his mood chart.	<ul style="list-style-type: none"> • September 30 	<ul style="list-style-type: none"> • counsellor and teacher assistant will record and chart incidents to identify patterns related to the onset of feelings of anxiety. • daily assistance to record and review of entries on the mood chart 	
By December 20, Harley will be able to describe three actions he can take to reduce his anxiety in classroom situations and successfully demonstrate these actions in four instances, for five consecutive days.	<ul style="list-style-type: none"> • December 20 	<ul style="list-style-type: none"> • teacher assistant and counsellor observation • daily checklist 	
By February 28, Harley will be able to respond in a positive manner to potentially anxiety-producing situations for ten consecutive days.	<ul style="list-style-type: none"> • March 1 	<ul style="list-style-type: none"> • teacher, teacher assistant and counsellor observations • daily checklist 	
When asked by the counsellor, Harley will independently complete his mood chart with 100% accuracy at the end of each morning.	<ul style="list-style-type: none"> • June 30 	<ul style="list-style-type: none"> • counsellor observation 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: JONES, Harley

Long-term goal related to assessment results: Harley will work cooperatively with peers in the classroom.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By October, Harley will work cooperatively with a teacher-selected partner and complete assigned tasks four out of six periods, within the time allocated and with teacher aide supervision, in each class.	<ul style="list-style-type: none"> • October 15 	<ul style="list-style-type: none"> • teachers/teacher assistant observations of process and number of completed assignments 	
By February, when given a cooperative small-group assignment (teacher-selected peers), Harley will work cooperatively and complete assigned tasks 85% of the time with teacher assistant supervision.	<ul style="list-style-type: none"> • February 28 	<ul style="list-style-type: none"> • teachers/teacher assistant observations of process and number of completed assignments 	
By May, when given the free choice of working with a partner, Harley will work cooperatively and complete assigned tasks three times out of four.	<ul style="list-style-type: none"> • May 	<ul style="list-style-type: none"> • teacher/teacher assistant observations and number of completed assignments 	

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** JONES, Harley

Transition Plans (recommendations, services required, strategies and materials that were effective)

- course selection and timetabling for second semester will be finalized in November
- arrangements will be made for a home-bound teacher to provide services either at home or in the hospital, should Harley be unable to attend school for periods of time this year
- the counsellor will arrange for three case conferences to be held this school year involving the learning team and Harley's psychiatrist and social worker
- the counsellor will review the purpose and importance of the mood chart with teachers and the teacher assistant
- the counsellor and Harley will determine if and when they will do a short presentation to his peers and teachers regarding the impact of his illness on his learning and social interactions

Signature of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: _____	Date: _____
Student (if applicable): _____	Date: _____
Principal: _____	Date: _____
Teacher(s): _____	Date: _____

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** JONES, Harley

Year-end Summary

Date: _____

Goals and Objectives Achieved

Strategies That Worked Well

Goals and Objectives Requiring Ongoing Focus

Support Services Required

Recommendations

Severe Multiple Disability (Code 43)

Definition

A funded student with severe multiple disabilities is one who:

- has two or more non-associated moderate to severe cognitive and/or physical disabilities which, in combination, result in the student functioning at a severe to profound level; and
- requires significant special programs, resources and/or therapeutic services.

Students with a severe disability and another associated disability should be identified under the category of the primary severe disability. For example:

- A student with a severe cognitive disability and another associated disability is not designated under this category, but is designated under severe cognitive disability.
- A student with a severe emotional/behavioural disability and another associated disability is not designated under this category, but is designated under severe emotional/behavioural disability.

The following mild or moderate disabilities cannot be used in combination with other disabilities to qualify under Code 43:

- Attention Deficit/Hyperactivity Disorder (AD/HD), Attention Deficit Disorder (ADD) (ECS - grade 12)
- Emotional Behavioural Disabilities (ECS - grade 12)
- Learning Disability (LD) (grades 1-12 only)
- Speech and Language Related Disabilities (ECS - 12).

Questions and Answers

What are the main characteristics of a student with a Severe Multiple Disability Code 43?

A student with a Severe Multiple Disability may exhibit two or more of the following:

- moderate cognitive disability (standard score of $30 - 50 \pm 5$)
- bilateral hearing loss in the moderate to severe range; average of 56 – 70 decibels over 500 – 4000 Hz in the better ear reported by the appropriate specialist
- visual impairment that is moderate to severe (20/100 in the better eye), but not legally blind, degeneration prognosis reported by the appropriate specialist
- moderate to severe autistic-like behaviour
- moderate to severe physical disability or medical condition that interferes with learning.

NOTE: Low cognitive ability in the mild/moderate cognitive disability ranges combined with severe receptive/expressive language deficits do not qualify.

What documentation is required for eligibility?

- Diagnoses by professionals for each of the two or more non-associated disabling conditions. This may include reports from chartered psychologists, audiologists, ophthalmologists and medical professionals.
- Documentation, which is less than three years old, should be available in the student's file.
- If a student has two or more non-associated disabilities that have not changed significantly, a current functional assessment from Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RÉSEAU), Student Health Initiative Partnership (SHIP), school jurisdiction specialists or other contracted consulting agencies may be sufficient.
- A diagnosis of each of the disabling conditions is required but not necessarily sufficient to qualify. Eligibility is dependent on the student's current level of functioning within the learning environment.

What other supporting documentation from a school relevant to the student's disabling condition and programming requirements may be included with the student package for review?

- physical therapy, occupational therapy, speech-language therapy reports
- vision and/or hearing consultant reports
- current (within 3 years) and relevant medical reports
- additional documentation, including anecdotal information, reflecting the student's needs in the learning environment.

For additional information please refer to the following case studies, completed Student Monitoring Forms, and sample IPPs on pages 35–49.

Case Study — Sabindar

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Sabindar is a twelve-year-old student who is included in a regular grade 6 program at Happy School. • A cognitive assessment in June 2004 by S. Smith, Chartered Psychologist, indicates that Sabindar’s full scale IQ is 48. Sabindar’s intellectual functioning and adaptive functioning is less than one half of her chronological age. • Sabindar has moderate to severe binaural sensorineural (63 dB unaided in the better ear) hearing loss diagnosed by Roy Dean, audiologist, in May 2003 and wears hearing aides. • Sabindar is ambulatory, has fine motor difficulties and requires cueing for personal care.
<p>Current supports/ services in place</p>	<ul style="list-style-type: none"> • Sabindar is in a class with 22 students, a teacher and a 1.0 FTE educational assistant. • She works in a small group setting for an additional hour each day. • Sabindar requires cueing and sometimes needs assistance for grooming and personal care. • In addition to purchasing an individual FM system for Sabindar’s teacher to use during options, a free field sound system also has been purchased and installed in the classroom. • Sabindar is receiving services from a private speech-language pathologist once a week (paid by parents). She is also receiving consultation support from an occupational therapist through SHIP to assist her with fine motor difficulties, and a RECS hearing consultant. • Sabindar meets with an audiologist for an annual audiogram and check up.

Individualized Program Plan	<ul style="list-style-type: none">• Sabindar’s IPP was developed in consultation with her learning team, including her parents, the chartered psychologist, reading specialist, speech-language pathologist, occupational therapist and hearing consultant.• The goals of her education program address her needs resulting from the combination of disabling conditions and are reflected in the classroom accommodations.• A transition plan has been put in place for Sabindar’s move to a junior high setting for next year.• Sabindar’s parents have visited the junior high school and observed the program Sabindar will be in.• Sabindar also had the opportunity to meet her new teachers and will be in a class with two other students with similar needs.
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SAMPLE
Student Monitoring Form
Sabindar
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority ABC Authority

School Happy School

Student Name Sabindar

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 93/01/06 Grade 6

Placement (describe) Inclusion in a regular grade 6 program

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Full Scale IQ 48	June 2004	S. Smith, Chartered Psychologist
Moderate to severe binaural (63 dB) sensorineural hearing loss	May 2004	R. Dean, Audiologist

Additional assessment information

2. How does the condition/disability affect the student in the learning environment?:

Difficulty accessing information through verbal instruction.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for Jurisdictions & Section 3.3 for Charter/Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention:

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
- small group work with teacher and/or teacher assistant 1 (hours per day) 1:3 (staff/student ratio)
- teacher assistant 5 (hours per day); 1:1 (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) _____

b) Specialized equipment and/or assistive devices:

- communication devices
- assistive technology/devices
- free field amplification
- other (specify) _____
- OT/PT equipment
- specialized furniture
- personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> toileting program | <input checked="" type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input checked="" type="checkbox"/> management of equipment | <input checked="" type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____
	Frequency →	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly
<input type="checkbox"/> Medical	<input type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____	
	Frequency →	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system.

For example: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and SHIP:

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input checked="" type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input checked="" type="checkbox"/> hearing consultant | <input checked="" type="checkbox"/> chartered psychologist | <input checked="" type="checkbox"/> audiologist |
| <input checked="" type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system:

- | | |
|---|--|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input checked="" type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input checked="" type="checkbox"/> other <u>Speech-language therapist (private)</u> |
| <input checked="" type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 18, 2005
Date

A. Jonson
Signature of School Authority Designate

Case Study – Zachary

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Zachary is an eight-year-old student currently in grade 3 at Caldwell School. • Dr. Brown diagnosed Zachary in 2003 as having Kabuki Make-Up Syndrome and moderate cognitive delay. In October 2002 he was diagnosed with a mild to moderate hearing loss by R. Dean, audiologist. • He presents with generalized low muscle tone, decreased physical strength, delays in gross and fine motor development, poor social skills and mild to moderate bilateral hearing loss. • The occupational therapist and physical therapist both report Zachary’s need for assistance with toileting, dressing, feeding and constant supervision, as he has a danger of falling, especially on the stairs.
<p>Current supports/ services in place</p>	<ul style="list-style-type: none"> • Zachary currently receives individual support 4 hours a day from a part-time teacher assistant and 30 minutes a day in a small group from a teacher assistant who is assigned to the classroom. • Zachary receives small group instruction for mathematics and pro-social skills. He also receives ongoing individual assistance to maintain attention to task and to complete all tasks in the classroom environment. • Zachary requires assistance with dressing and in the washroom. He receives stand-by assistance for all transitions and walking the stairs. • Zachary receives individual assistance at lunch and recess times. • Zachary requires an augmentative/alternative communication system and has been referred for assessment at the I Can Centre, Glenrose Rehabilitation Hospital.
<p>Individualized Program Plan</p>	<ul style="list-style-type: none"> • Zachary’s IPP was developed in consultation with his learning team, including his parents, the speech-language pathologist, occupational therapist, physical therapist, behaviour specialist and hearing consultant. • The goals of Zachary’s education program address his needs and result from the combination of disabling conditions and are reflected in the classroom accommodations and level of supervision.

SAMPLE
Student Monitoring Form
Zachary
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

- 41 Severe Cognitive
- 42 Severe Emotional/Behavioural
- 43 Severe Multiple
- 44 Severe Physical or Medical, including Autism
- 45 Deafness
- 46 Blindness

School Authority ABC Authority

School Caldwell School

Student Name Zachary

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 97/08/30 Grade 3

Placement (describe) Regular grade 3 classroom

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Kabuki Make Up Syndrome	October 2003	Dr. Brown
Moderate cognitive delay	October 2003	Dr. Brown
Mild to moderate hearing loss	October 2002	R. Dean (Audiologist)

Additional assessment information:**2. How does the condition/disability affect the student in the learning environment?:**

Zachary has generalized low muscle tone, delays in gross and fine motor development, poor social skills and a mild to moderate hearing loss. He frequently loses his balance which limits his participation in classroom and specialized activities, such as PE, as he is at danger of falling. He requires individual assistance with dressing and personal hygiene.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for Jurisdictions & Section 3.7 for Charter/ Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:**a) Frequent specialized one-on-one intervention**

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
- small group work with teacher and/or teacher assistant 0.5 (hours per day) 1:4 (staff/student ratio)
- teacher assistant 4 (hours per day); 1:1 (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) _____

b) Specialized equipment and/or assistive devices:

- communication devices
- assistive technology/devices
- free field amplification
- other (specify) _____
- OT/PT equipment
- specialized furniture
- personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> toileting program | <input checked="" type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input checked="" type="checkbox"/> dressing | <input checked="" type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input checked="" type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input checked="" type="checkbox"/> management of equipment | <input checked="" type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____
Frequency →		<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly
<input type="checkbox"/> Medical	<input checked="" type="checkbox"/> medical logs	<input checked="" type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____	
Frequency →		<input type="checkbox"/> hourly	<input checked="" type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system.

For example: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and SHIP:

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input checked="" type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input checked="" type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input checked="" type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system. For example:

- | | |
|--|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input checked="" type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input type="checkbox"/> other _____ |
| <input type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 25, 2005
Date

M. Thompson
Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)**Student Name:** PETERS, Zachary

Student Information		Date: September 15, 2005
Student I.D. # <u>20103096</u>	Funding Code: <u>43</u>	
Name: <u>PETERS, Zachary Mark</u>		
Birth date (mm/dd/yyyy): <u>8</u> / <u>30</u> / <u>1997</u>	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
Address: <u>567-10 Avenue</u>		
<u>Big City, Alberta T0P S6X</u>		
Telephone No.: <u>(403) 555-5151</u>		
Parent/Guardian: <u>Amy and John Peters</u>		
School: <u>Caldwell School</u>	Grade/Learning Group: <u>3 regular</u>	

Relevant Medical Information No medical information available at this time.

IPP Team Members	Position
<u>Amy and John Peters</u>	<u>Parents</u>
<u>Donna Major</u>	<u>Grade 3 teacher</u>
<u>Angel Young</u>	<u>Special education consultant/IPP coordinator</u>
<u>Pat White/John Gregory</u>	<u>Teacher Assistants</u>
<u>Michael Hall</u>	<u>Speech/language pathologist/audiologist</u>
<u>Mary Smart</u>	<u>Occupational therapist</u>

Additional Information

Zachary is a happy individual who is shy around peers. He has had limited opportunity to interact with age peers, preferring to spend time in the company of older students and adults. His parents are concerned and have agreed to work with the learning team to have Zachary become involved with age peers outside of school through swimming and horse back riding lessons. Mr. and Mrs. Peters found the communication book useful last year and would like that method of information sharing to continue this year. Mary Smart, occupational therapist, is concerned about Zachary's difficulty maintaining his balance and has referred him to the seating clinic for assessment and input regarding the purchase of a power scooter that could be used on the playground, school field trips and in the community.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: PETERS, Zachary

Special Education and Related Support Services (additional school staff/support personnel/agencies)

- teacher assistant support 4.5 hours/day
- RECS: hearing consultant, occupational therapist, speech therapist, physical therapist, behaviour specialist
- special education consultant

Areas of Strength

- desire to please
- cooperates with teacher assistant to complete transfers during personal care routines
- enjoys using the computer

Areas of Need

- communication
- social skills
- mathematics concept and skill development

Required Classroom Accommodations (changes to instructional and assessment strategies, materials and resources, facilities or equipment):

- schedule teacher assistants to provide direct supervision when Zachary is in the hallways, physical education class and on the playground
- provide preferential seating
- provide instruction in a variety of ways (hands-on, visual, multi-sensory)
- provide manipulatives and models during all mathematics classes
- increase use of computer software to support development of social problem solving skills
- continue to use word and symbol processing software to develop vocabulary, reading and communication skills
- have well lighted teaching/small group work areas
- individualize all tests and allow extra time
- improve vocalization and/or correct articulation of new vocabulary in the therapy situation and facilitate carry-over speech skills into everyday speech in the classroom.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: PETERS, Zachary

A. Specialized Assessment Results

Date Given	Assessment Tools	Results
November 2004	<ul style="list-style-type: none"> • Vineland Adaptive Behavior Scale 	<ul style="list-style-type: none"> • all domains were below the 1st percentile
November 2004	<ul style="list-style-type: none"> • Test of Non-verbal Intelligence, Third Edition (TONI-3) 	<ul style="list-style-type: none"> • total test standard score 54

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

Date Given	Assessment Tools	Results
May 2005	<ul style="list-style-type: none"> • teacher observation and checklists 	<ul style="list-style-type: none"> • Zachary enjoys sharing his lunch hours with the teacher assistants, however, he is shy around age peers. • Peer interaction is developing slowly and Zachary continues to benefit from having social interactions mediated by the teacher assistants. • Zachary's motivation to read increased during the year as he modeled the actions of his grade 6 reading buddy. • Zachary's self help skills have improved and he is able to eat and drink independently. • Due to fine motor challenges, Zachary has begun to use word prediction software and story starter templates to write stories. He has responded positively to the use of the computer and can now write a four sentence story.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: PETERS, Zachary

Long-term goal related to assessment results: Zachary will maximize his residual hearing through amplification (hearing aids and FM systems).

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By December, Zachary will discriminate between the presence and absence of a spoken syllable or word in a quiet environment. Zachary will respond correctly on 40 consecutive presentations.	<ul style="list-style-type: none"> December 10 	<ul style="list-style-type: none"> teacher/teacher assistant observations recorded on checklist 	
By June, Zachary will discriminate between familiar environmental sounds which are interrupted (car horn) versus continuous (vacuum cleaner) in a quiet environment 80% of the time.	<ul style="list-style-type: none"> June 15 	<ul style="list-style-type: none"> teacher/teacher assistant observations recorded on checklist 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: PETERS, Zachary

Long-term goal related to assessment results: Zachary will play and work appropriately with his peers.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By October, Zachary will, verbally and in actions, show pride in his school work 80% of the time.	• October 31	<ul style="list-style-type: none"> • teacher observation • sociogram • anecdotal notes 	
By November, Zachary will demonstrate appropriate classroom manners 80% of the time.	• November 30	<ul style="list-style-type: none"> • teacher observation • checklist based on classroom rules 	
By January, Zachary will make at least three positive comments during a 15 minute classroom discussion on five of seven occasions.	• January 30	<ul style="list-style-type: none"> • teacher observation • checklist 	
By June, Zachary will make two positive comments about his peers when he works in a small group on three of four occasions.	• June 30	<ul style="list-style-type: none"> • teacher observation • checklist • anecdotal notes • sociogram 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: PETERS, Zachary

Long-term goal related to assessment results: Zachary will demonstrate awareness of addition and subtraction.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By November, Zachary will use manipulatives to add and subtract whole numbers where the maximum sum is 9, using a place value chart, with 80% accuracy on ten problems.	• November 30	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist • teacher made tests 	
By February, Zachary will use manipulatives and a place value chart to add and subtract whole numbers to 12, with 80% accuracy on ten problems.	• February 28	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist • teacher made tests 	
By April, Zachary will use diagrams and symbols to demonstrate the process of addition and subtraction of whole numbers, where the maximum sum is 9, with 80% accuracy on ten problems.	• April 30	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist • teacher made tests 	
By June, Zachary will use diagrams and symbols to demonstrate the process of addition and subtraction of whole numbers, where the maximum sum is 12, with 80% accuracy on ten problems.	• June 20	<ul style="list-style-type: none"> • teacher/teacher assistant observation • checklist • teacher made tests 	

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** PETERS, Zachary

Transition Plans (recommendations, services required, strategies and materials that were effective)

- Angel Young will arrange for three case conferences during the year to involve all learning team members to review Zachary's IPP goals and objectives as well as updating any assessment information that becomes available during the school year.
- Mr. and Mrs. Peters would like to visit a district senior elementary special education class to determine if that might be a more appropriate placement in which Zachary could receive more focused instruction in sign language.
- Angel Young and Donna Major will arrange for assessment and consultation service referrals to be made in January 2006 for complete re-assessments to assist with programing for 2006/2007.

Signature of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: _____ Date: _____

Student (if applicable): _____ Date: _____

Principal: _____ Date: _____

Teacher(s): _____ Date: _____

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: PETERS, Zachary

Year-end Summary

Date: _____

Goals and Objectives Achieved

Strategies That Worked Well

Goals and Objectives Requiring Ongoing Focus

Support Services Required

Recommendations

Severe Physical or Medical Disability (Code 44) — including Autism Spectrum Disorder

Definition

A funded student with a severe physical, medical or neurological disability is one who:

- a) has a medical diagnosis of a physical disability, specific neurological disorder or medical condition which creates a significant impact on the student's ability to function in the school environment (note: some physical or medical disabilities have little or no impact upon the student's ability to function in the school environment); and
- b) requires extensive adult assistance and modifications to the education environment in order to benefit from schooling.

A student with severe autism, or another severe Pervasive Developmental Disorder, is included in this category. A clinical diagnosis by a psychiatrist, chartered psychologist, or medical professional specializing in the field of Autism Spectrum Disorder is required. A clinical diagnosis of autism is not necessarily sufficient to qualify under this category. Eligibility for funding is determined by the functioning level of the student.

In order for a diagnosis of autism to be made, the student needs to demonstrate impairment in the following areas:

- social interaction;
- communication; and
- stereotyped pattern of behaviour (i.e., hand flapping, body rocking, echolalia, insistence on sameness and resistance to change).

A student diagnosed with severe Fetal Alcohol Spectrum Disorder (FASD) may have Fetal Alcohol Syndrome (FAS) or Alcohol-Related Neurodevelopmental Disorder (ARND) and is included in this category. A clinical diagnosis by a psychiatrist, chartered psychologist with specialized training, or medical professional specializing in developmental disorders is required. A clinical diagnosis of FASD is not necessarily sufficient to qualify under this category. Eligibility for funding is determined by the functioning level of the student. Students with severe FASD who exhibit significant impairment in the areas of social functioning, life skills, behaviour, learning, attention and concentration, will need extensive intervention and support.

Questions and Answers

What documentation is required to determine eligibility for coding students with Severe Physical or Medical Disability?

- a medical diagnosis of a physical, medical or neurological disability dated within the last three years.
- once Alberta Education has given the initial approval and the student has a chronic disability that has not changed significantly, a current functional assessment that demonstrates the impact of the student's disability while at school may be sufficient. Such functional assessments may be obtained from one of the Regional Educational Consulting Service (RECS) providers (REACH, CASE, Edmonton Regional Educational Consulting Services, RÉSEAU) or other personnel specializing in the field.

What are some examples of severe medical or physical disabilities?

Students who are diagnosed with the following may fit the criteria for Code 44, depending upon the severity of the impact in the educational setting:

- Tourette's Syndrome
- Cerebral Palsy
- Fetal Alcohol Spectrum Disorder
- Autism Spectrum Disorder
- Brain injury
- Cancer patient

What documentation is required for eligibility for Autism Spectrum Disorder?

- a clinical diagnosis by a psychiatrist, chartered psychologist, or medical professional specializing in the field of autism is required.
- a functional assessment and anecdotal information that documents the degree of difficulty with social interaction, communication and stereotypic patterns of behaviours.

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package?

- cognitive assessment reports, speech-language therapy reports, occupational therapy reports, physical therapy reports (as required)
- any current, relevant medical reports
- anecdotal records reflecting ongoing monitoring of identified behaviours.

For additional information, please refer to the following case studies, completed Student Monitoring Forms, and sample IPPs on pages 52–75.

Case Study — Kayla

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Kayla is an eight-year-old grade 3 student • Kayla is new to the school this year. • Kayla has a diagnosis of Spina Bifida (myelomeningocele – the most severe form of Spina Bifida) and was shunted for hydrocephalus by Dr. Smith in March 1997. • Kayla uses a walker and a wheelchair during the school day. Kayla also has leg splints, which she must wear for a specific period of time each day. • Kayla requires daily catheterizing and is diapered due to bowel accidents.
<p>Current supports/ services in place:</p>	<ul style="list-style-type: none"> • Kayla is in a combined regular grade 3/4 class with 20 students. • Kayla requires ongoing assistance for toileting, supervision at recess/lunch time to ensure her safety, assistance getting on and off the bus and in the classroom setting. She has 5 hours per day of educational assistant time available to her. • Kayla receives consultation and ongoing program support from a special education consultant, an occupational therapist and a physical therapist. • One of the washrooms in the school was modified to be wheelchair accessible. A commode is provided. • Kayla has very slow fine motor skills (printing) and is being introduced to an AlphaSmart Neo for class work.
<p>Individualized Program Plan</p>	<ul style="list-style-type: none"> • Kayla recently had a WISC IV administered and has a Full Scale IQ of 127, which is in the gifted and talented range. Her program requires modifications to ensure she is challenged academically. • Kayla’s IPP was developed in consultation with the learning team, including her parents, occupational therapist, physical therapist and special education consultant. • Goals reflect Kayla’s physical limitations and needs, her safety issues and her need for a more challenging class curriculum. • A goal this year is to explore Kayla’s use of a powered wheelchair to increase her mobility independence. • An adaptive physical education program will be developed around power chair mobility skills. • Personal care programming and supports around assisted toileting, clean intermittent self-catheterization, and increased bowel control are being introduced.

Sample
Student Monitoring Form
Kayla
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

- 41 Severe Cognitive
 42 Severe Emotional/Behavioural
 43 Severe Multiple
 44 Severe Physical or Medical, including Autism
 45 Deafness
 46 Blindness

School Authority ABC Authority

School Riverdale Elementary

Student Name Kayla

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 97/02/06

Grade 3

Placement (describe) Included in combined grade 3/4 program

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Spina Bifida (myelomeningocele) with shunted hydrocephalus	March 1997	Dr. Smith
Superior IQ: 127	June 2003	C. Parsons, C. Psych.

Additional assessment information (please attach copies):

March 2003: RECS OT Consultation (report attached).

June 2004: WISC-IV: FS IQ 127 with relative weakness in math computation (report attached).

May 2005: Gates-McGinitie Reading Comprehension Test: mid grade 6 reading level (protocol and results attached).

October 2005: Academic Achievement Assessment scheduled.

2. How does the condition/disability affect the student in the learning environment?

Kayla is currently unable to look after her own toileting needs, unable to manoeuvre independently through the school and is at risk of injury or falls (personal safety).

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for School Jurisdictions and Section 3.3 for Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
 small group work with teacher and/or teacher assistant 3 (hours per day) 1:4 (staff/student ratio)
 teacher assistant 5 (hours per day); 1:1 (staff/student ratio)
 Interpreter _____ (hours per day); _____ (staff/student ratio)
 Transliterator _____ (hours per day); _____ (staff/student ratio)
 other (specify) Supervision at lunch/recess

b) Specialized equipment and/or assistive devices:

- communication devices
 assistive technology/devices: AlphaSmart Neo
 free field amplification
 other (specify) Wheelchair accessible washroom, commode, counter for changing diapers, walker, wheelchair, leg splints
- OT/PT equipment
 specialized furniture
 personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> toileting program | <input type="checkbox"/> grooming | <input checked="" type="checkbox"/> diapering |
| <input checked="" type="checkbox"/> catheterizing-encouraging clean intermittent self-catheterization | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input checked="" type="checkbox"/> management of equipment | <input type="checkbox"/> OT/PT |
| <input type="checkbox"/> orientation and mobility training | | |
| <input checked="" type="checkbox"/> other <u>power wheelchair mobility skills</u> | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____
Frequency →				
	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly
<input checked="" type="checkbox"/> Medical	<input checked="" type="checkbox"/> medical logs	<input checked="" type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____	
Frequency →				
	<input type="checkbox"/> hourly	<input checked="" type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system.

For example: Regional Educational Consulting Service teams: (REACH, CASE, ERECS, RESEAU), Student Health Initiative Partnership:

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input type="checkbox"/> special education consultant | <input checked="" type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input checked="" type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input checked="" type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system. For example:

- | | |
|---|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input checked="" type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input checked="" type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input type="checkbox"/> other _____ |
| <input checked="" type="checkbox"/> Family Support for Children with Disabilities | |

3. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 21, 2005

Date

A. Jackson

Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)**Student Name:** Kayla

Student Information		Date: Sept. 2005
Alberta Student Number (ASN) <u>XXX XXX XXX</u>	Funding Code: <u>44 (Severe Physical/Medical)</u>	
Name: <u>Kayla</u>		
Birth date (mm/dd/yyyy): <u>02</u> / <u>06</u> / <u>1997</u>	Sex: <input type="checkbox"/> M <input checked="" type="checkbox"/> F	
Address: _____ <u>Alberta</u>		
Telephone No.: _____		
Parent/Guardian: _____		
School: <u>Riverdale Elementary, ABC Authority</u>	Grade/Learning Group: <u>3/4</u>	

Relevant Medical Information

Kayla has a diagnosis of Spina Bifida (myelomeningocele, the most severe form of Spina Bifida) and was shunted for hydrocephalus in March 1997. Kayla uses a walker and a wheelchair during the school day. Kayla also has leg splints, which she must wear for a specific period of time each day. Kayla requires daily catheterizing and is diapered in the event of a bowel accident.

IPP Team Members	Position
<u>Mr. Jackson</u>	<u>Principal</u>
<u>Mrs. Jones</u>	<u>Classroom Teacher</u>
<u>Mr. and Mrs. Parent</u>	<u>Kayla's parents</u>
<u>Mrs. Smith</u>	<u>Teacher Assistant</u>
<u>Ms. Roberts</u>	<u>Occupational Therapist</u>
<u>Ms. Collins</u>	<u>Assistive Technology Consultant</u>
<u>Mrs. Deal</u>	<u>Special Education Facilitator</u>

Additional Information

Goals reflect Kayla's physical limitations and needs, safety issues and her need for a more challenging academic program. For example, Kayla will be introduced to the AlphaSmart Neo to increase her independence in written work. Powered mobility will also be explored this year to increase Kayla's mobility independence. Powered mobility skills will be taught through an adaptive physical education program in consultation with the occupational and physical therapists from the RECS team. Additionally, Kayla will be trained to conduct clean, intermittent self-catheterization. Increasing Kayla's bowel control is another personal care goal. These mobility and self-care goals are being introduced to increase Kayla's availability to benefit from an educational program in line with her superior cognitive abilities.

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** Kayla

Special Education and Related Support Services (additional school staff/support personnel/agencies)

<ul style="list-style-type: none"> • small group work with teacher and/or TA for 3 hours/day with 3 other students • individual and individualized work with TA for 5 hours/day • OT • PT 	<ul style="list-style-type: none"> • Family Support for Children with Disabilities • family physician and clinical nurse • Special Education Consultant
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Areas of Strength

- sense of humour
- highly motivated to challenge herself
- strong reader
- grasps concepts quickly and easily
- excellent peer interaction; makes friends easily

Areas of Need

- increased independent mobility
- personal care issues around toileting
- needs an academically challenging program with enrichment activities
- math concepts need strengthening

Required Classroom Accommodations (changes to instructional and assessment strategies, materials and resources, facilities or equipment)

- AlphaSmart Neo is being introduced to increase Kayla's independence in completing written work.
- Kayla reads at a mid grade 6 level, but still lacks many of the grade 3 curriculum concepts, so needs enrichment activities that challenge her thinking, while meeting the grade 3 curriculum outcomes.
- Kayla requires a longer period of time to complete written tasks.
- Kayla's math skills are weak relative to her other academic areas so she will require extra learning time and practice.
- Time must be allowed for Kayla's daily use of her leg splints and walker during the school day.
- Time out of the classroom will be required to accommodate Kayla's toileting needs.
- An Adaptive Physical Education program will be developed in consultation with the OT to teach power chair mobility skills which will be supported by the teacher and the TA.
- Kayla requires access to adult support/supervision (e.g., TA) at all times to meet her toileting, mobility and safety needs (instability with leg splints and walker and requires help getting on and off the bus and during unstructured times such as recess).

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Kayla**A. Specialized Assessment Results**

Date Given	Assessment Tools	Results
June 2004 Scheduled for October 2005	<ul style="list-style-type: none"> • WISC IV • Kayla requires an individual standardized academic assessment to determine more clearly her areas of strengths and weaknesses. 	<ul style="list-style-type: none"> • FS IQ 127, with a relative weakness in math computation • TBA

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

Date Given	Assessment Tools	Results
May 2005 June 2005 (end of Grade 2)	<ul style="list-style-type: none"> • Gates-McGinitie Reading Comprehension Test • Year-end report card marks 	<p>Kayla's reading comprehension level is at mid grade 6.</p> <p>All of Kayla's grade 2 year-end report card marks were well above average compared to her classmates, commensurate with her cognitive abilities, with the exception of math, where her recall of basic facts is within the average to below average range.</p> <p>Kayla requires additional time to complete written assignments and accommodations were made to reduce the writing expectations for her classwork. In testing situations, Kayla used a scribe, a laptop or presented her responses orally. The RECS consultant recommended that an AlphaSmart Neo be introduced in Grade 3.</p>

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Kayla

Long-term goal related to assessment results: Kayla will increase her independence with and speed of completing written work using an AlphaSmart Neo

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
<p>Beginning in September, Kayla will receive individual time with the technology, OT and PT consultants and their recommendations will be implemented by the TA for a minimum of half an hour 3 times a week to master her use of the AlphaSmart Neo.</p> <p>Individual training will occur until Kayla has mastered the AlphaSmart Neo and can work independently in class with requests for adult support no more than 3 times per class period.</p>	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • teacher and TA observations and records • support and training provided by the assistive technology consultant and OT 	
<p>By mid June, Kayla will complete her written assignments independently using the AlphaSmart Neo with adult support available when she experiences frustration.</p> <p>Achievement will occur when Kayla requests and receives adult support/intervention no more than once during any class period during 3 out of 5 opportunities (goal date: June 15, 2005)</p>	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • teacher and TA observations and records • support and training provided by the assistive technology consultant and OT 	

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** Kayla

Long-term goal related to assessment results: Kayla's academic independence and need for challenge will be met through academic enrichment activities aligned with the grade 3 curricula and learning outcomes.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
Throughout the school year, Kayla will complete at least one enrichment activity for each Science unit/theme completed by her class.	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • teacher and TA observation and records 	
Throughout the school year, Kayla will complete at least one enrichment activity for each Social unit completed by her class.	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • teacher and TA observation and records 	
Kayla will be provided with enrichment reading materials and comprehension activities to accompany each Language Arts theme throughout the year.	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • teacher and TA observation and records 	

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** Kayla

Long-term goal related to assessment results: Kayla will increase her skills in independent wheelchair mobility

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By March, Kayla will travel down the right hand side of the hallway consistently, without crossing over the midline at least 50% of the time.	<ul style="list-style-type: none"> • November • March 	<ul style="list-style-type: none"> • observations and documentation by the OT and TA. 	
By mid June, Kayla will increase her mobility proficiency with a power wheelchair to participate in at least one recess period per day, unattended by her TA.	<ul style="list-style-type: none"> • weekly 	<ul style="list-style-type: none"> • observations and documentation by the OT, TA and teacher. • monitoring chart on Kayla's desk. 	
By mid-June, Kayla will position her chair appropriately for the task required at least 75% of the time with no more than 3 re-adjustments.	<ul style="list-style-type: none"> • November • March • June 	<ul style="list-style-type: none"> • observations and documentation by the OT and TA. 	
By mid-June, Kayla will manoeuvre her wheelchair around obstacles without incident, such as bumping the obstacle, at least 75% of the opportunities.	<ul style="list-style-type: none"> • November • March • June 	<ul style="list-style-type: none"> • observations and documentation by the OT and TA. 	

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** Kayla

Long-term goal related to assessment results: Kayla will increase her toileting independence.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By June, Kayla will successfully complete two clean intermittent self-catheterizations per month under adult supervision.	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • observations and records of nurse and TA 	
By June report card, Kayla will average no more than 3 bowel accidents per month while at school.	<ul style="list-style-type: none"> • monthly 	<ul style="list-style-type: none"> • observations and records of nurse and TA • success will be achieved with support from the family physician, clinical nurse and the TA. 	

Format A – Individualized Program Plan (IPP) (cont’d) **Student Name:** Kayla

Transition Plans (recommendations, services required, strategies and materials that were effective)

Kayla will continue to require physical support for her mobility and toileting needs. Kayla continues to struggle with gross motor skills, but using a power wheelchair will continue to increase her independence. New goals will be added, in consultation with the appropriate consultants, as she achieves her current IPP goals in these areas.

Despite Kayla’s physical difficulties, she is an avid reader and participates actively in oral class discussions and projects. Kayla will continue to need to be challenged academically, but care must be given to ensuring she meets her grade level learning outcomes and that her reading material, although at a higher vocabulary, remains age appropriate and should be monitored periodically.

To accommodate for Kayla’s rapid grasp of concepts combined with weak writing ability due to fine motor involvement, allowing her to present her responses to written work orally or to audio- and/or video-record her projects, etc., allows her the freedom to expand her knowledge without being restricted by her physical disabilities. She is easily engaged when she can display her cognitive and academic abilities in ways that prevent frustration.

As Kayla improves her skills in math computation through strategies that teach her to use her memory skills more effectively, she will increase her success rate with math word problems and help to reduce some of her frustration over not knowing her basic facts by rote. She is a hard worker, eager to learn and willing to do extra academic practice, but it is important to monitor her physical fatigue level when considering enrichment activities or additional practice assignments.

As Kayla moves through the grades, it is also recommended that she develop an ongoing relationship with the school counsellor to maintain a positive self-image, self-concept, self-esteem and to help her to appreciate all of her gifts and talents.

Signature of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: _____	Date: _____
Student (if applicable): _____	Date: _____
Principal: _____	Date: _____
Teacher(s): _____	Date: _____

Year-end Summary

Date: _____

Goals and Objectives Achieved

Strategies That Worked Well

Goals and Objectives Requiring Ongoing Focus

Support Services Required

Recommendations

Case Study — William

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • William is a twelve-year-old student in grade 6. • At the Autism Clinic, Dr. Gold diagnosed William with Severe Autistic Disorder in November 1998 and reconfirmed the diagnosis in June 2005. • William has extreme difficulties with: <ul style="list-style-type: none"> – social interaction and with peers – expressive/receptive communication – stereotypic behaviours including resistance to change in routine/transitions. • William uses some Picture Communication Symbols to enhance communication (expressive and receptive). • William also exhibits compulsive and obsessive behaviours as well as preoccupation with <i>Star Trek</i>. • William requires assistance in the classroom setting and in a more social setting including the playground.
<p>Current supports/ services in place</p>	<ul style="list-style-type: none"> • William is included in a regular grade 6 classroom. • William receives support for language arts and math, in a small group work setting (with 2 other students) for 2 hours daily. • William has 5 hours of Educational Assistant/Teacher Assistant support available daily to assist him with some academics in the classroom setting and to provide support on the playground at recess and during lunch breaks. • William is supervised during eating. • William’s learning team monitors and records his behaviours daily which include: <ul style="list-style-type: none"> – initiated social interactions – use of oral communication and communication board – temper outbursts – obsessive compulsive behaviours. • William has been assessed by an occupational therapist and receives on-going consultative support. • The speech therapist from RECS provides communication consultation. • William’s teachers and staff meet bi-monthly with his parents and home support worker to review his program.

Individualized Program Plan	<ul style="list-style-type: none">• William’s IPP was developed with his learning team, including his parents, home support staff, school staff and occupational therapist.• His IPP reflects William’s need for routine and identifies goals for communication, social/behaviour and academic progress.
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SAMPLE FORM
Student Monitoring Form
William
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority DEF Authority

School Valley School

Student Name William

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 93/12/16 Grade 6

Placement (describe) Included in a regular grade 6 program

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Severe Autistic Disorder	November 1998- updated June 2005	Dr. Gold, Autism Clinic

Additional assessment information (please attach copies):

- May 2005: Key Math— Grade 3.2
 - May 2005: Gates-McGinitie Reading Comprehension—Grade 1.3
 - May 2005: Gates-McGinitie Spelling—Grade 2.4
- William's receptive and expressive vocabularies are significantly below expected age and grade levels. He does relatively well with mathematics computations but has difficulty with problem solving. He is reading significantly below expected age and grade levels.

2. How does the condition/disability affect the student in the learning environment?

Difficulties with social interaction; expressive/receptive communications; stereotypical behaviours; compulsive and obsessive behaviours; preoccupation with *Star Trek*.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for School Jurisdictions and Section 3.3 for Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention

- specialized setting with teacher 2 (hours per day); 1:3 (staff/student ratio)
- small group work with teacher and/or teacher assistant 2 (hours per day) 1:3 (staff/student ratio)
- teacher assistant 3 (hours per day); 1:1 (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) _____

b) Specialized equipment and/or assistive devices:

- communication devices (Picture Communication Symbols)
- assistive technology/devices
- free field amplification
- other (specify) _____
- OT/PT equipment
- specialized furniture
- personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|--|--|---|
| <input type="checkbox"/> toileting program | <input type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input type="checkbox"/> management of equipment | <input checked="" type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input checked="" type="checkbox"/> other <u>Supervision at lunch and recess</u> | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input checked="" type="checkbox"/> Behaviour	<input checked="" type="checkbox"/> checklist	<input checked="" type="checkbox"/> anecdotal notes	<input checked="" type="checkbox"/> behaviour plan	<input checked="" type="checkbox"/> other <u>Ongoing behaviour program</u>
Frequency →				
	<input type="checkbox"/> hourly	<input checked="" type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly
<input type="checkbox"/> Medical	<input type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____	
Frequency →				
	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system.

For example: Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and SHIP:

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input checked="" type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input checked="" type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input checked="" type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system. For example:

- | | |
|---|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input checked="" type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input checked="" type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input checked="" type="checkbox"/> other <u>Autism Clinic</u> |
| <input checked="" type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 12, 2005

Date

M. Walker

Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)**Student Name:** William

Student Information		Date: September 2005 Update: June 2006
Alberta Student Number <u>555 555 555</u>	Funding Code: <u>44 (Severe Autism)</u>	
Name: <u>William</u>		
Birth date (mm/dd/yyyy): <u>12 / 16 / 1993</u>	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
Address: _____ _____		
Telephone No.: _____		
Parent/Guardian: _____		
School: <u>Valley School, DEF Authority</u>	Grade/Learning Group: <u>6</u>	

Relevant Medical Information

Dr. Gold, Autism Centre Report 2003:

- Diagnosis of severe Autism Disorder with abnormal language development and social interaction, unusual interests, self-stimulatory behaviours, obsessive compulsive behaviours and resistance to change.

IPP Team Members	Position
<u>W. Mathews</u>	<u>School Administrator</u>
<u>Fred & Sylvia</u>	<u>Parents</u>
<u>J. Reiche</u>	<u>Resource Teacher</u>
<u>P. O'Grady</u>	<u>Classroom Teacher</u>
<u>G. Eady</u>	<u>Teacher Assistant</u>
<u>R. Lannigan</u>	<u>Speech Language Pathologist</u>
<u>S. Ellis</u>	<u>Home Support Worker</u>
<u>A. Holt</u>	<u>Occupational Therapist</u>

Additional Information

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: William

Special Education and Related Support Services (additional school staff/support personnel/agencies)	
Resource Teacher — J. Reiche Teacher Assistant — G. Eady Classroom Teacher — P. O'Grady	Speech-Language Pathologist — R. Lannigan Home Support Worker — S. Ellis Occupational Therapist — A. Holt
Parental Involvement and Expectations: <ul style="list-style-type: none"> Involved in development of IPP Parents will reinforce communication and behaviour objectives at home 	

Areas of Strength
<ul style="list-style-type: none"> follows instructions with visual prompts uses word processing programs for writing uses a timer to monitor on-task behaviour uses visual schedule to prepare for changes

Areas of Need
<ul style="list-style-type: none"> to develop increased independence at school to learn to cope with transitions to learn to calm himself when anxious to develop more appropriate social behaviours

Required Classroom Accommodations (changes to instructional and assessment strategies, materials and resources, facilities or equipment)
<ul style="list-style-type: none"> use Picture Communication Symbols provide instruction in a variety of ways (e.g., hands on, visual, multisensory) use a daily communication book between home and school use visual cues and visually scripted instructional routines (drawings, picture symbols) to support William's learning provide instructional opportunities for William to make choices in the classroom provide a verbal cue paired with a visual cue prior to transitions between activities provide modeling and explicit instruction in social skills strategies (e.g., visually scripted instructional routines for tasks and transitions).

A. Specialized Assessment Results

Date Given	Assessment Tools	Results
May 2005	<ul style="list-style-type: none"> Leiter International Performance Scale: Revised Stanford Binet Intelligence Scale: Fifth Edition (SB-V) 	<ul style="list-style-type: none"> Nonverbal reasoning skills appear to be at the borderline level (approximately two years below age level). Assessment with the SB-V was attempted and discontinued. Psychologist felt that William's verbal reasoning skills and oral skills were considerably weaker than his nonverbal skills.
April 2005	<ul style="list-style-type: none"> Peabody Individual Achievement Test (PIAT) Alberta Diagnostic Reading Test 	<ul style="list-style-type: none"> William's performance was very inconsistent. His decoding skills were somewhat stronger (late grade 2, but his articulation problems made it difficult to understand all of his responses) than his comprehension skills (late grade 1). William relies primarily on a sight word approach although he does seem to be developing some phonological awareness. William can answer very simple comprehension questions involving literal recall.

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

- Language Arts: reading decoding at late Grade 2 level, comprehension at late Grade 1 (estimated)
- William's receptive and expressive communication skills are significantly below age/grade levels. He can follow simple written/drawn instructions that are accompanied by familiar language patterns or examples.
- William is able to use the computer for word processing simple stories.
- Mathematics: computation at Grade 3, problem solving at Grade 1.
- William has mastered addition, subtraction and multiplication at Grade 3 level.
- William requires visual prompts to attempt word problems. He refuses to attempt geometry problems.

Format A – Individualized Program Plan (IPP) (cont’d) **Student Name:** William

Long-term goal related to assessment results: William will use oral and visual communication strategies to achieve his desires and function more independently in the classroom and at home.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
1. By November, with a physical prompt, William will use a detailed picture schedule to follow the class routine in 4 out of 4 class periods for 4 consecutive days.	<ul style="list-style-type: none"> • November 30 	<ul style="list-style-type: none"> • teacher and TA observation • parent observation (home) 	<ul style="list-style-type: none"> • achieved • At home, William uses his picture schedule (scripted with PCS for dinner routines) with verbal prompts.
2. By February, with a verbal prompt, William will use a detailed picture schedule to follow the class routine in 4 out of 4 class periods for 4 consecutive days.	<ul style="list-style-type: none"> • February 28 	<ul style="list-style-type: none"> • teacher and TA observation and documented records 	<ul style="list-style-type: none"> • With a verbal prompt, William will complete his work independently, follow the instructional routine for the assignment and return his work to the “finished basket” about half the time. He still requires a physical prompt the rest of the time.
3. By April, William will use his choosing book paired with oral language to support 85% of his communication attempts in the classroom.	<ul style="list-style-type: none"> • April 30 	<ul style="list-style-type: none"> • teacher/TA observation 	<ul style="list-style-type: none"> • Emerging; William will use his choosing book to express his wants.
4. By June, when using his choosing book for communication support, William will: a) select and verbalize five appropriate social script sentences to interact with a peer during partner or small group work on three out of five occasions b) orient himself toward and attend to a peer’s attempt to reply using the choosing book.	<ul style="list-style-type: none"> • June 1 	<ul style="list-style-type: none"> • teacher/TA observation and documentation 	<ul style="list-style-type: none"> • requires prompting • attends to a peer’s attempt but does not respond back or initiate further exchange

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: William

Long-term goal related to assessment results: William will further develop his functional academic skills in reading and math.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
1. By November, when using the classroom computer and his personal dictionary, William will write and illustrate sentences using five new words per week.	<ul style="list-style-type: none"> • November 30 	<ul style="list-style-type: none"> • teacher observation of written product • checklist of sight words in personal diction 	<ul style="list-style-type: none"> • achieved
2. By January, when silently reading a series of short instructional level passages, William will be able to recall (in written form using the class computer) two details in two of three passages.	<ul style="list-style-type: none"> • January 30 	<ul style="list-style-type: none"> • teacher will select passages from computer software reading program • TA will measure criteria and document progress 	<ul style="list-style-type: none"> • achieved
3. By March, when given math word problems, William will select the correct strategy card for solving one-step problems on 8 out of 10 attempts.	<ul style="list-style-type: none"> • March 30 	<ul style="list-style-type: none"> • teacher provides problem sheets; TA will monitor and document strategy selection 	<ul style="list-style-type: none"> • achieved; create strategy cards for two-step problems
4. By May, when silently reading a series of short instructional level passages, William will be able to sequence pictures of the story events in three of four passages.	<ul style="list-style-type: none"> • May 30 	<ul style="list-style-type: none"> • teacher selects passages and sequence cards • TA will measure criteria and record progress 	<ul style="list-style-type: none"> • achieved

Format A – Individualized Program Plan (IPP) (cont'd) **Student Name:** William

Long-term goal related to assessment results: William will develop increasing control of compliant and positive behaviours in order to achieve his desires.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
1. By October, when a self-calming strategy is modeled, William will imitate the demonstrated routine on 70% of opportunities.	<ul style="list-style-type: none"> • October 30 	<ul style="list-style-type: none"> • TA models and monitors token reinforcers and documents progress 	<ul style="list-style-type: none"> • achieved
2. By November, when working independently in the classroom, William will use a visual cue card to signal his request for adult attention or his desire to be left alone on 50% of opportunities.	<ul style="list-style-type: none"> • November 30 	<ul style="list-style-type: none"> • teacher/TA observation and documentation 	<ul style="list-style-type: none"> • achieved; increase to 75% use by June
3. By January, when prompted verbally and paired with a visual cue, William will initiate a self-calming strategy 50% of the time.	<ul style="list-style-type: none"> • January 30 	<ul style="list-style-type: none"> • teacher/TA observation and documentation 	<ul style="list-style-type: none"> • achieved
4. By March, when working on assignments, William will use a visual cue card to signal when he needs a break on 60% of opportunities.	<ul style="list-style-type: none"> • March 30 	<ul style="list-style-type: none"> • teacher/TA observation and documentation 	<ul style="list-style-type: none"> • Emerging; William uses his break card 40% of the time. • When frustrated, William refuses to do a task rather than ask for help or a break. • Continue to model and reinforce use of the break card before seeing signs of agitation.
5. By June, when anxious or frustrated, William will use his calming strategy 75% of the time without prompting.	<ul style="list-style-type: none"> • June 1 	<ul style="list-style-type: none"> • teacher/TA observation and documentation 	<ul style="list-style-type: none"> • William requires verbal prompts to use his calming strategy 100% of the time.

Format A – Individualized Program Plan (IPP) (cont'd)

Student Name: William

Transition Plans (recommendations, services required, strategies and materials that were effective)

- William will continue to need a computer next year in junior high, so arrangements for portable technology should be explored by June 1, 2007.
- The junior high resource teacher has already visited with William and observed him in the classroom and playground settings.
- A volunteer peer helper from Grade 7 will visit William in June and accompany him and his mother on two visits to the junior high school.
- Arrangements will be made for the same volunteer peer helper to participate in some activities with William next year as part of the peer helper program.
- During Grade 7, William's IPP team and parents will help William explore areas of strength for future vocational and community participation.

Signatures of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: _____	Date: _____
Student (if applicable): _____	Date: _____
Principal: _____	Date: _____
Teacher(s): _____	Date: _____

Year-end Summary

Date: June 2005

Goals and Objectives Achieved

- William has demonstrated gains in his understanding and use of oral and visual communication strategies over the year. William will use his picture schedule with a verbal prompt about half of the time. The rest of the time, he still requires physical prompts.
- William is developing independent skills (supported by visual scripts) to work in the classroom and is less reliant on the teaching assistant.
- William has mastered using his red/green symbol to indicate desire for attention and desire to be left alone.
- William is beginning to use his portable schedule to support himself in transitioning between activities throughout the school (e.g., at recess, lunch, gym).

Strategies That Worked Well

- Instructional routines (scripted with PCS) facilitated William's independence in the classroom.
- Colour coding assignment folders and providing colour coded "finished baskets" for finished work were effective in helping William find, organize and return his work.
- Visual cues supported William's communication and positive behaviours while participating in activities.
- William willingly used the computer reading programs.
- The choosing book is an effective system for enhancing William's receptive and expressive communication.

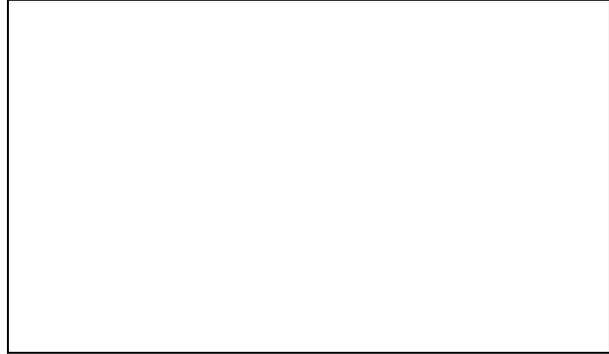
Goals and Objectives Requiring Ongoing Focus

- William uses his choosing book enthusiastically, but he occasionally fails to comprehend that he must follow through with his choices. This needs re-teaching and reinforcement to firm up skill and understanding.

Support Services Required

- Teacher aide support to continue at the present level for the 2006/2007 school year then re-evaluate.

- When anxious, William still uses disruptive behaviours about 50% of the time (yelling, banging). William’s parents will continue to reinforce William’s use of self-calming strategies and visual communication strategies over the summer. Before September, a meeting will be arranged to discuss effective reinforcers for calming time.
- Continued focus on developing functional reading and writing skills.



Recommendations

- Set up a classroom quiet area and provide strong positive reinforcement when William asks appropriately to use the quiet area.
- Maintain close communication and coordination of strategies between home and school to maintain consistency.
- Suggested focus for the Grade 7 year: help William develop coping skills for new challenges in the junior high school environment (e.g., changing classes, use of lockers, multiple teachers, and increase functional reading and writing skills).

Deafness (Code 45)

Definition

A funded student with a severe to profound hearing loss is one who:

- a) has a hearing loss of 71 decibels (dB) or greater unaided in the better ear over the normal speech range (500 - 4000 hertz (Hz)) which interferes with the use of oral language as the primary form of communication, or has a cochlear implant,
- b) requires extensive modification and specialized educational supports; and
- c) has a diagnosis by a clinical or educational audiologist. New approvals require an audiogram within the past 3 years.

If a student has a severe to profound sensorineural hearing loss that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of deafness outlining the severity of the hearing loss and modifications to the learning environment may be sufficient to support eligibility.

Questions and Answers

What are the main characteristics of a student with a severe to profound hearing loss (deaf)?

- hearing loss of 71 dB or more unaided in the better ear over the normal speech range on an audiogram
- hearing loss precludes the use of oral language as the primary form of communication and use of some form of signed language (e.g., Signing Exact English [SEE II] or American Sign Language [ASL])
- requires extensive modifications and specialized educational supports.

What documentation is required for eligibility?

- Current audiogram from an audiologist must be in the student's file.
- If a student has a severe to profound hearing loss that has not changed significantly, an updated audiogram is not necessary. A recent functional assessment from Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RÉSEAU) or other personnel specializing in the field may be sufficient for programming purposes.
- A functional assessment report specifies the amount and type of personal assistance, specialized programming, equipment and/or communication access required by the student.
- Average hearing loss is calculated by a hearing health professional by averaging unaided hearing readings between 500hz and 4000hz.

- Hearing level classification equivalents:

<u>Descriptor</u>	<u>Decibel (dB) range</u> (how loud sound must be in order to be heard)
• Normal Hearing for children	• 0-15 dB
• Minimal Loss	• 16-25 dB
• Mild Loss	• 26-40 dB
• Moderate Loss	• 41-55 dB
• Moderate-Severe Loss	• 56-70 dB
• Severe Loss	• 71-90 dB
• Profound Loss	• 90 + dB

Which other supporting documentation relevant to the student’s disabling condition and programming requirements may be included with the student package?

- additional reports from hearing specialists, speech-language therapy reports or other professionals working with the student
- current relevant medical reports
- any documentation, including anecdotal records, reflecting the student’s needs in the learning environment.

For additional information, please refer to the case study, completed Student Monitoring Form and sample IPP on pages 78–91.

Case Study — Trevor

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Trevor is a nine-year-old boy in a regular grade 4 classroom. • Trevor has a congenital severe sloping to profound, binaural (involving both ears) sensorineural hearing loss, diagnosed by Rob Ring, Audiologist, in September 1997 at age 16 months. • Shortly after diagnosis, Trevor began speech therapy. It was discontinued at the end of last school year. • Beginning when he was about 3 years old, Trevor attended a preschool designated for children with hearing loss whose parents choose Signing Exact English (SEE II) as the mode of communication for their children. • Trevor’s hearing loss has resulted in academic, language and articulation delays. He also has delays in his SEE II communication skills. • An update by S. Town, RECS hearing consultant, was provided in May 2005 for programming, following an updated audiology assessment in April 2005. There has been no significant change in Trevor’s hearing. • Trevor continues to use SEE II as his primary mode of communication at home and at school.
<p>Current supports/ services in place</p>	<ul style="list-style-type: none"> • Trevor’s teacher has access to a technology consultant to assist with computer software and hardware selections to support Trevor’s educational programming. • Trevor’s learning environment and presentation of materials are modified and/or adapted to address his communication and academic needs. • A RECS hearing consultant supports Trevor in his school program and assists the teacher and other staff in the development and implementation of his IPP. • A transliterator changes spoken English into SEE II for Trevor and voices his signs (expressive communication) for non-signers for the full school day, with the exception of recesses and lunch breaks. • Trevor has access to a laptop computer for additional literacy support and for communicating with non-signers when the transliterator is unavailable during breaks.

Individualized Program Plan	<ul style="list-style-type: none">• Trevor’s IPP was developed with the learning team consisting of his parents, hearing consultant, technology consultant and school staff.• Goals reflect Trevor’s hearing impairment and his need for language and literacy development, modified lesson presentation, modified classroom setting and additional program supports.
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SAMPLE FORM
Student Monitoring Form
Trevor
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority Vista Authority

School South School

Student Name Trevor

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 96/05/12 Grade 4

Placement (describe) Included in a regular grade 4 classroom

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Congenital severe sloping to profound, binaural sensorineural hearing loss	September 1997	Rob Ring, Audiologist
	April 2005 updated	P. Saunders, Audiologist
	audiogram attached	

A formal psycho-educational assessment, including an evaluation of Trevor's cognitive processes, is scheduled for early September 2005 by P. Roberts, C. Psych., to assist with programming.

Additional assessment information (please attach copies):

- May 2005: update for programming by S. Town, RECS hearing consultant
- April 2005: Test of Written Language-Third Edition (TOWL-3) — well below average on all subtests
- March 2005: Gates-McGinitie Reading Comprehension Test — 20th Percentile
- October 2004: Raven's Standard Progressive (RSP) Matrices — Average range IQ
- June 2003: K-Bit — Below average IQ (verbal only)

2. How does the condition/disability affect the student in the learning environment?

Trevor has academic, language, communication and literacy delays. Trevor has no auditory access to oral information and uses a transliterator of Signing Exact English (SEE II) for receptive and expressive communication.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for School Jurisdictions and Section 3.3 for Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
- small group work with teacher and/or teacher assistant 1 (hours per day) 1:4 (staff/student ratio)
- teacher assistant _____ (hours per day); _____ (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator 6 (hours per day); 1:1 (staff/student ratio)
- other (specify) _____

b) Specialized equipment and/or assistive devices:

- communication devices
- assistive technology/devices
- free field amplification
- other (specify) Laptop and software for academic skill development, particularly in literacy, and for communicating when the transliterator is unavailable for short periods of time (e.g., lunch breaks).
- OT/PT equipment
- specialized furniture
- personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|--|--|---|
| <input type="checkbox"/> toileting program | <input type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input type="checkbox"/> management of equipment | <input type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____	
	Frequency →	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly
<input type="checkbox"/> Medical	<input type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____		
	Frequency →	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system:

For example: Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and Student Health Initiative Partnerships (SHIP):

- | | | |
|--|--|---|
| <input type="checkbox"/> itinerant teacher | <input type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input checked="" type="checkbox"/> special education consultant | <input checked="" type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input checked="" type="checkbox"/> hearing consultant | <input checked="" type="checkbox"/> chartered psychologist | <input checked="" type="checkbox"/> audiologist |
| <input type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input checked="" type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system. For example:

- | | |
|--|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> Family/Community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input checked="" type="checkbox"/> other <u>Support Group for Families of Children with Hearing Loss</u> |
| <input type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of the five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 28, 2005

Date

M. Simpson

Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)

Student Name: Trevor

Student Information		Date: September 2005
Alberta Student Number (ASN)	<u>XXX XXX XXX</u>	Funding Code: <u>45</u>
Name:	<u>Trevor</u>	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F
Birth date (mm/dd/yyyy):	<u>05 / 12 / 1996</u>	Age at September 1, 2005: 9-4
Address:	_____	
Telephone No.:	_____	
Parent/Guardian:	<u>Mr. and Mrs. Parent</u>	
School:	<u>South School</u>	Grade/Learning Group: <u>4</u>

Relevant Medical Information
Congenital severe-sloping-to-profound sensorineural binaural hearing loss; no auditory access to oral information.
<input checked="" type="checkbox"/> No medical information available at this time.

IPP Team Members	Position
<u>M. Simpson</u>	<u>Principal</u>
<u>Mr. & Mrs. (Parent)</u>	<u>Parents</u>
<u>A. Parsons</u>	<u>Grade 4 home room teacher</u>
<u>S. Town</u>	<u>RECS Hearing Consultant</u>
<u>J. Campbell</u>	<u>Special Ed. Consultant</u>
<u>P. Gaudet</u>	<u>Transliterater</u>
<u>D. Jones</u>	<u>School Counsellor</u>
<u>T. Smith</u>	<u>Technology/Computer software Consultant</u>

Additional Information
<ul style="list-style-type: none"> • Trevor and his family communicate in SEE II. Trevor’s parents are very involved with his education and supportive of the school. • Full-time SEE II transliteration is required at school for Trevor to access his academic programming and all oral communication. • The introduction of the laptop in March 2005 increased Trevor’s communication independence with his peers and staff. Improving his keyboarding skills and accessing appropriate software programs to improve his sign language proficiency and English literacy skills are reflected in his IPP. • Results of the September 2005 psycho-educational assessment will assist further in the development of Trevor’s IPP to ensure that he is presented with materials at the appropriate level and to identify effective strategies. • Currently, the hearing consultant has recommended that the special education consultant refer to Book 4 of Alberta Education’s <i>Programming for Students with Special Needs Series: Teaching Students who are Deaf or Hard of Hearing</i> for strategies and programming considerations. Trevor’s IPP was developed in consultation with the entire learning team. • The school counsellor meets with Trevor bi-weekly to support and maintain his self-image, self-esteem and self-confidence. The counsellor also helps to arrange for Trevor to attend at least one group social activity per year with other students in the area with hearing loss for friendship and role-modelling.

Format A – Individualized Program Plan (IPP) (cont’d) Student Name: Trevor

Special Education and Related Support Services (additional school staff/support personnel/agencies)		
<u>S. Town: RECS Hearing Consultant</u>	<u>P. Gaudet: Transliterater</u>	<u>D. Jones: School Counsellor</u>
<u>J. Campbell: Special Ed. Consultant</u>	<u>T. Smith: Technology/Computer Software Consultant</u>	

<u>Areas of Strength</u>	<u>Areas of Need</u>
<ul style="list-style-type: none"> • enjoys playing sports • supportive family • math computation • willingness to try new things • enjoys hands-on activities • friendly and outgoing 	<ul style="list-style-type: none"> • sign language vocabulary (expressive and receptive) and skills • communication repair skills • keyboarding skills • English literacy skills • focusing his visual attention where/when needed • greater independence in completing all academic assignments

<u>Required Classroom Accommodations</u>
(changes to instructional and assessment strategies, materials and resources, facilities or equipment)
<ul style="list-style-type: none"> • In all situations where there is academic oral communication while at school or off-site, Trevor will have access to a SEE II transliterater (e.g., class discussions, testing situations for all oral instructions and potential questions from other students; oral reading, etc). • Use of captioned videos as much as available. • Trevor needs to be seated facing the transliterater who will stand or sit near to the speaker. This allows Trevor greater opportunity to see the facial expressions of the speaker as well as understand the transliterated spoken words. Consequently, Trevor must be allowed to move about the area, as necessary, to clear his line of vision. • Trevor cannot read or look at something that is being explained and watch the transliterater at the same time. Therefore, when he is required to read something from the board or a book, for example, he is unavailable to follow transliteration so speakers need to allow pause time for Trevor to read and then resume the oral communication. • Because Trevor’s literacy skills are below his grade level, he also has difficulty with math word problems and written text material in all subjects. His sign vocabulary is also delayed, so he will require time outside of class for pre-teaching and review of written and signed vocabulary when new content is introduced in all areas. The transliterater can assume this role under the guidance of the subject teacher and the hearing consultant. These sessions may be done individually while the rest of the class receives instruction in music and/or a second language, for example. Following the normal developmental steps of language development leading to literacy, Trevor, too, must develop his expressive and receptive language skills that are acquired through listening and speaking in hearing children but are in sign for him. Consequently, he needs much greater exposure to signed language while also learning English literacy skills. His language delays are much more likely a result of not having as many years of exposure to language as his hearing peers, but he can catch up.

- Much of Trevor’s individualized language arts instruction, assignments and extra practice can be done with computer software support. Encourage reading-for-pleasure as often as possible, perhaps as a home-reading program.
- During an oral spelling test, where the word is dictated and then written by the students, the teacher and the transliterator must pre-determine which words will be included on Trevor’s test. He should not be evaluated on spelling words that are ordinarily fingerspelled and not signed. A similar situation presents itself with vocabulary-defining activities. When students are expected to define a dictated vocabulary word, a pre-conference with the teacher and the transliterator must occur to decide either to remove vocabulary words that are iconic signs (look like what they are and/or identify the concept/meaning) or that such conceptual signs would be fingerspelled for this type of assignment only.
- Trevor will have access to a laptop computer for communicating with non-signers when the transliterator is unavailable, such as during breaks. Trevor and his communication partner can type back and forth to each other, which also provides opportunities for both Trevor and his classmates to practice their keyboarding and literacy skills.
- Ensure that the light source is on the face of the speaker and that Trevor’s back is to the light source.

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Trevor**A. Specialized Assessment Results**

Date Given	Assessment Tools	Results
P. Roberts, C. Psych., is scheduled to administer a formal psycho-educational assessment, including cognitive functioning, to Trevor in early September 2005.		

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

Date Given	Assessment Tools	Results
April 2005	Test of Written Language-3 rd Edition (TOWL-3)	well below average on all subtests
March 2005	Gates-McGinitie Reading Comprehension Test	20 th Percentile
October 2004	Raven's Standard Progressive (RSP) Matrices	high average range IQ (non-verbal)
June 2003	Kaufman Brief Intelligence Test (K-Bit)	below average IQ (verbal)

Format A – Individualized Program Plan (IPP) (cont’d) Student Name: Trevor

1. Long-term goal related to assessment results: Trevor will increase his receptive and expressive sign language vocabulary and subject area concepts at the level of his ability, with increased clarity of hand movements.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
<p>For each unit/theme for all subject areas, Trevor will learn a minimum of 5 new words in sign, both receptive and expressive, with 100% accuracy at the end of each unit/theme and 75% accuracy in June.</p>	<ul style="list-style-type: none"> • At the completion of each unit/theme for all subject areas. 	<ul style="list-style-type: none"> • teacher-prepared formal and informal assessment and records • transliterator observations regarding clarity of sign (hand movements) for others' understanding 	
<p>Trevor will preview and review concepts in both written and signed form with his transliterator under the guidance of each subject teacher to raise his average in each subject area by at least 1% each reporting period.</p>	<ul style="list-style-type: none"> • November • March • June 	<ul style="list-style-type: none"> • teacher and transliterator observations and records • formal and informal assessments of subject content • line graphs displaying his progress on each formal assessment in each subject area. Trevor should have access to these graphs, but they must also be kept out of his line of vision while engaged in learning activities 	
<p>During social activities with deaf children and others who are learning to sign, Trevor will spontaneously engage in and respond positively to others' signed communication at least 80% of the time by the end of June.</p>	<ul style="list-style-type: none"> • November • March • June 	<ul style="list-style-type: none"> • teacher and transliterator observations and documentation 	

Format A – Individualized Program Plan (IPP) (cont’d) **Student Name:** Trevor

2. Long-term goal related to assessment results: Trevor will learn and utilize effective and age-appropriate communication repair strategies.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By the end of June, with no prompting, Trevor will have learned and used correctly, at least 3 effective communication repair strategies in 75% of the opportunities.	<ul style="list-style-type: none"> • weekly 	<ul style="list-style-type: none"> • observation and documentation by the transliterator, teacher and hearing consultant 	
By June, Trevor will indicate appropriately when he needs communication rescue from the transliterator, after making at least 2 independent attempts to repair the communication breakdown in 85% of the opportunities.	<ul style="list-style-type: none"> • weekly 	<ul style="list-style-type: none"> • observation and documentation by the transliterator and hearing consultant 	

Format A – Individualized Program Plan (IPP) (cont’d) Student Name: Trevor

3. Long-term goal related to assessment results: Trevor will improve his ability to focus his visual attention appropriately.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By mid-June, Trevor will independently refocus his visual attention appropriately with no more than two prompts in at least 3 out of 4 situations.	<ul style="list-style-type: none"> • daily 	<ul style="list-style-type: none"> • teacher, hearing consultant and transliterator observations and documentation 	
By mid-June, Trevor will ignore visual distractions, after a brief visual check to determine the source, 75% of the opportunities and needing no prompts 50% of the time.	<ul style="list-style-type: none"> • daily 	<ul style="list-style-type: none"> • teacher, hearing consultant and transliterator observations and documentation 	

Format A – Individualized Program Plan (IPP) (cont’d) Student Name: Trevor

4. Long-term goal related to assessment results: Trevor will improve his English literacy skills.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
Each month of the school year, Trevor will participate in the Home Reading Program, beginning with one book each week at his reading level. By June, Trevor will complete the reading and accompanying activities on average of 3 books each week.	<ul style="list-style-type: none"> • weekly 	<ul style="list-style-type: none"> • teacher documentation in consultation/ correspondence with Trevor’s parents 	
By June, Trevor will write an average of one creative writing story each week with a 40% reduction in errors of conventions, sentence structure and sequencing appropriate to his developmental/ achievement level.	<ul style="list-style-type: none"> • weekly 	<ul style="list-style-type: none"> • teacher formal and informal assessment and documentation 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Trevor

5. Long-term goal related to assessment results: Trevor will demonstrate greater independence in starting and completing academic assignments.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
By December, Trevor will begin his work within 2 minutes of being instructed to begin with no prompts 50% of the time.	<ul style="list-style-type: none"> • daily 	<ul style="list-style-type: none"> • teacher and transliterator observation and documentation 	
By June, Trevor will work independently at the appropriate assignment for at least 10 minutes before requesting help appropriately, 75% of the time with no prompts.	<ul style="list-style-type: none"> • daily 	<ul style="list-style-type: none"> • teacher and transliterator observation and documentation 	

Format A – Individualized Program Plan (IPP) (cont’d) Student Name: Trevor

Transition Plans (recommendations, services required, strategies and materials that were effective)

- By January 2006, schedule a formal assessment of Trevor’s and his transliterator’s signing skills by qualified certifiers of the SEE Centre (from US) while they are in the local area in July 2006. Use the results of Trevor’s assessment to continue working with the hearing consultant next year to identify goals and strategies to enhance his use of SEE II.
- Allow Trevor use of the laptop computer and software over winter break and spring break. If all goes well, then allow him to take the computer home for the summer, with specific keyboarding and literacy software assigned/contracted to be completed according to a pre-set schedule.
- As Trevor’s grade 4 year progresses and he moves into grade 5, increase his participation in group sports activities, both community- and school-based, to enhance his visual attending skills, including his peripheral vision.
- During the summer of 2006, help Trevor maintain contact with other signing deaf students as well as signing deaf adult role models.

Signature of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: _____ Date: _____

Student (if applicable): _____ Date: _____

Principal: _____ Date: _____

Teacher(s): _____ Date: _____

Year-end Summary

Date: _____

Goals and Objectives Achieved

Strategies That Worked Well

Goals and Objectives Requiring Ongoing Focus

Support Services Required

Recommendations

Blindness (Code 46)

Definition

A funded student with severe vision impairment is one who:

- a) has corrected vision so limited that it is inadequate for most or all instructional situations, and information must be presented through other means; and
- b) has visual acuity ranging from 6/60 (20/200) in the better eye after correction, to having no usable vision or field of vision reduced to an angle of 20 degrees.

If a student has a severe to profound visual impairment that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of vision outlining the severity of the disability and modifications to the learning environment may be sufficient to support eligibility.

For those students who may be difficult to assess (e.g., cortical blindness and developmentally delayed), a functional visual assessment by a qualified specialist in the field of vision or a medical professional may be sufficient to support eligibility.

Questions and Answers

What are the main characteristics of a student with a severe visual disability?

- students who require and receive specialized instruction (e.g., Braille, orientation and mobility).
- students who require instruction material and assignments scribed, transcribed or taped.

Are there other considerations?

- For designation under this category, a student would be eligible for registration with the Canadian National Institute for the Blind (CNIB).
- These students could be registered with Alberta Education's Materials Resource Centre for the Visually Impaired (MRC) and schools would be able to receive materials from the MRC (check with the designated school authority contact person for registration procedures).

What documentation is required for eligibility?

- Reports or results from a medical doctor, ophthalmologist, vision consultants or other medical professionals specializing in the field and documenting the severity of the disability, must be in the student's file.

What other supporting documentation relevant to the student’s disabling condition and programming requirements may be included with the student package?

- additional reports from vision specialists, orientation and mobility specialists or other professionals working with the student
- current relevant medical reports
- any documentation including anecdotal information reflecting the student’s needs in the learning environment.

For additional information, please refer to the following case study, completed Student Monitoring Form and sample IPP on pages 94–105.

Case Study — Shannon

<p>Background information, description of severe disabling condition(s)</p>	<ul style="list-style-type: none"> • Shannon is a nine-year-old girl who is new to this school. • She was diagnosed at age 2 in June 1998, with Ocular Albinism and nystagmus (involuntary movement of the eyes) by Dr. Lee. • Visual acuity was recorded at that time as 6/60 in each eye. This is consistent with the definition of legal blindness. • Shannon is of above average intelligence and is integrated for most of her school day in a regular grade 4 classroom. • An updated functional assessment in March 2005 by Tom Brown, vision consultant, includes programming recommendations.
<p>Current support/services in place</p>	<ul style="list-style-type: none"> • Itinerant consultation/teaching services for the visually impaired are provided on a bi-monthly basis. • Shannon is provided with Braille and tactile modifications, preferred seating and the use of assistive technology that includes magnification devices. • Shannon receives orientation and mobility instruction bi-monthly from a qualified orientation and mobility instructor. • Shannon is supported by a full-time educational assistant whose primary responsibilities include the following: <ul style="list-style-type: none"> – ensures that all visual materials presented within the classroom environment are available to Shannon in an alternate format – provides one-to-one assistance in the follow-up of Braille instruction, including nemeth code – provides follow-up and support for orientation and mobility needs – provides support in the use of assistive technology.

Individualized Program Plan	<ul style="list-style-type: none">• Shannon’s IPP was developed in consultation with her learning team, which includes Shannon, her mother, teacher, vision consultant, orientation and mobility specialist and teaching assistant.• The goals of her educational program reflect her needs for the development of specialized skills including Braille, orientation and mobility, and the use of assistive technology.• Shannon’s program goals also reflect the need for her to learn skills in the areas of personal grooming and care, social interaction and recreation.• Shannon’s primary medium for reading is Braille, due to fatigue factors associated with print reading.
------------------------------------	--

SAMPLE
Student Monitoring Form
Shannon
Severe Disabilities Funding
2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority XY Authority

School Battner School

Student Name Shannon

Alberta Student Number (ASN) XXXXXXXXXX

Birth date (yy/mm/dd) 96/06/30 Grade 4

Placement (describe) Included in a regular grade 4 classroom.

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment
Ocular Albinism; visual acuity 6/60 in both eyes after correction	June 1998	Dr. Lee
Nystagmus	June 1998	Dr. Lee

Additional assessment information (please attach copies):

Tom Brown, Vision consultant – programming recommendations, March 2005.

2. How does the condition/disability affect the student in the learning environment?:

Shannon is not able to access visual materials as they are visually presented in the educational environment.
She requires alternate format and orientation and mobility (O & M) training.

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year, Severe Disabilities*, (e.g., Section 1.7 for School Jurisdictions and Section 3.3 for Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention:

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
- small group work with teacher and/or teacher assistant _____ (hours per day) _____ (staff/student ratio)
- teacher assistant 6 (hours per day); 1:1 (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) O & M instruction and Braille instruction with teacher in specialized setting (8 hours per month).

b) Specialized equipment and/or assistive devices:

- communication devices
- assistive technology/devices
- free field amplification
- other (specify) Braille, magnification equipment and enlarged print, white cane
- OT/PT equipment
- specialized furniture desk to accommodate CCTV or Braille
book shelf for larger print books, slant board
- personal FM system

c) Assistance with personal care/health-related interventions:

- | | | |
|---|---|---|
| <input type="checkbox"/> toileting program | <input checked="" type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input checked="" type="checkbox"/> management of equipment | <input type="checkbox"/> OT/PT therapy |
| <input checked="" type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____
	Frequency →	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly
<input type="checkbox"/> Medical	<input type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____	
	Frequency →	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly <input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system.

For example: Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU); and SHIP:

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> itinerant teacher | <input type="checkbox"/> speech therapist | <input checked="" type="checkbox"/> vision consultant |
| <input type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input checked="" type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system. For example:

- | | |
|--|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input checked="" type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input checked="" type="checkbox"/> CNIB | <input type="checkbox"/> other _____ |
| <input type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

September 30, 2005
Date

L. Clark
Signature of School Authority Designate

Format A – Individualized Program Plan (IPP)

Student Name: Shannon

Student Information	Date: September 2005
Alberta Student Number (ASN) <u>XXX XXX XXX</u> Funding Code: <u>46</u>	
Name: <u>Shannon</u>	
Birth date (mm/dd/yyyy): <u>06</u> / <u>30</u> / <u>1996</u> Sex: <input type="checkbox"/> M <input checked="" type="checkbox"/> F	
Address: _____ _____	
Telephone No.: _____	
Parent/Guardian: _____	
School: <u>Battner School</u> Grade/Learning Group: <u>4</u>	

Relevant Medical Information
<input checked="" type="checkbox"/> No medical information available at this time.

IPP Team Members	Position
<u>Shannon</u>	<u>Student</u>
<u>Mrs. (Parent)</u>	<u>Mother</u>
_____	<u>Teacher</u>
<u>Tom Brown</u>	<u>Vision Consultant</u>
_____	<u>Orientation and Mobility Teacher (specialist)</u>
_____	<u>Educational Assistant</u>
_____	<u>Assistive Technology Consultant</u>

Additional Information

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Shannon

Special Education and Related Support Services (additional school staff/support personnel/agencies)

- RECS (Regional Educational Consulting Services)
- CNIB (Canadian Institute for the Blind)
- MRC (Materials Resource Centre)

Areas of Strength

- academically bright
- supportive family
- enthusiastic
- good fine motor skills
- sense of humour
- loves pets

Areas of Need

- Braille skills
- visual efficiency skills
- orientation and mobility
- use of assistive technology
- social skills
- personal grooming

Required Classroom Accommodations (changes to instructional and assessment strategies, materials and resources, facilities or equipment)

- white cane
- BrailleNote, Braille, Braille printer, computer, printer
- CCTV and monocular
- slant board
- desk magnifier
- desk to accommodate Braille and CCTV materials
- shelving for Braille books, large print materials.

Format A – Individualized Program Plan (IPP) (cont'd)

Student Name: Shannon

A. Specialized Assessment Results

Date Given	Assessment Tools	Results
March 2005	<ul style="list-style-type: none"> • functional vision assessment – Tom Brown 	<ul style="list-style-type: none"> • see report
Sept 2004	<ul style="list-style-type: none"> • eye report – on file 	<ul style="list-style-type: none"> • visual acuity 6/60 in best eye with correction • Nystagmus (varies from mild to severe depending on fatigue, degree of visual challenge and wellness).
March 2005	<ul style="list-style-type: none"> • Peabody Mobility Kit for Blind Students 	<ul style="list-style-type: none"> • see report
March 2005	<ul style="list-style-type: none"> • Assessment for Low Vision for Educational Programs 	<ul style="list-style-type: none"> • see report

B. Level of Educational Performance and Achievement; e.g., teacher observation, interview, informal and formal assessment

Date Given	Assessment Tools	Results

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Shannon

Long-term goal related to assessment results: Shannon will master 4th grade work as measured by classroom criterion referenced course tests, while addressing her specific needs through modified techniques of accessing print and classroom materials.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
<ul style="list-style-type: none"> Shannon participates fully in Grade 4 Language Arts using Braille. Shannon's Braille reading rate will increase by 10 words per minute by December 2005. 	<ul style="list-style-type: none"> Dec. 2005 	<ul style="list-style-type: none"> Tom Brown will assess Shannon's Braille skills including reading rate in December 2005. 	
<ul style="list-style-type: none"> Shannon will use her Braille reading and writing skill to complete 100% of social studies assignments without loss of performance by December 2005. 	<ul style="list-style-type: none"> Dec. 2005 	<ul style="list-style-type: none"> Shannon is assessed in social studies using classroom criterion. 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Shannon

Long-term goal related to assessment results: Shannon will use assistive technology commensurate with her abilities to complete Grade 4 classroom work.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
<ul style="list-style-type: none"> Shannon will use a monocular, CCTV and desk magnifier to read information from the board and her textbook well enough to complete all Grade 4 math assignments. 	<ul style="list-style-type: none"> Dec. 2005 	<ul style="list-style-type: none"> Tom Brown will assess Shannon's monocular CCTV and organization skills. Shannon is completing assignments and tests as measured by classroom criterion. 	
<ul style="list-style-type: none"> Shannon will use the BrailleNote and computer to complete 3 assignments per week by December 2004. Her accuracy with assignments will be consistent with her performance on other assignments. 	<ul style="list-style-type: none"> Dec. 2005 	<ul style="list-style-type: none"> Tom Brown and teacher determine which assignments Shannon will complete and track this information. 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Shannon

Long-term goal related to assessment results: Shannon will be able to travel safely and efficiently anywhere within the school building with 100% accuracy by the end of the school year.

Short-term Objectives Related to Long-term Goal (observable/measurable)	Review Dates	Assessment Procedures	Results and Recommendations
<ul style="list-style-type: none"> Shannon will be able to instruct individuals assisting her with sighted guide by providing correct information regarding techniques by December 2005 with 100% accuracy. 	<ul style="list-style-type: none"> Dec 2005 	<ul style="list-style-type: none"> orientation and mobility specialist will assess Shannon's knowledge of sighted guide and her ability to transfer these skills. 	
<ul style="list-style-type: none"> Shannon will effectively transfer the skills taught by the O & M instructor into her daily routine at school with 80% efficiency by December 2005. 	<ul style="list-style-type: none"> Dec 2005 	<ul style="list-style-type: none"> orientation and mobility specialist will assess Shannon's ability to transfer her O & M skills into her daily routine. 	

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Shannon

Transition Plans (recommendations, services required, strategies and materials that were effective)

- Shannon has access to curriculum materials at the same time as her sighted peers
- Shannon has access to teacher prepared materials at the same time as her classmates
- order materials from MRC by April 2006 for the 2006/2007 school year
- meet with CNIB in April to determine availability of summer programming opportunities
- inform family of CNIB library services so that Shannon has access to reading materials in leisure time
- outline orientation and mobility needs for Grade 5 as well as in the home and community
- identify members of the learning team for the 2006/2007 school year and outline roles and responsibilities. Determine frequency and level of involvement
- ensure that Shannon's furniture requirements are moved into the receiving environment

Signature of IPP Team Members (Signature indicates that you understand the IPP)

Parent/guardian: _____ Date: _____

Student (if applicable): _____ Date: _____

Principal: _____ Date: _____

Teacher(s): _____ Date: _____

Format A – Individualized Program Plan (IPP) (cont'd) Student Name: Shannon

Year-end Summary

Date: _____

Goals and Objectives Achieved

Strategies That Worked Well

Goals and Objectives Requiring Ongoing Focus

Support Services Required

Recommendations

Section 3 — Appendices

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Appendix A – Student Monitoring Form

Student Monitoring Form

Severe Disabilities Funding 2005/2006

PLEASE CHECK CODE

41 Severe Cognitive

42 Severe Emotional/Behavioural

43 Severe Multiple

44 Severe Physical or Medical, including Autism

45 Deafness

46 Blindness

School Authority _____

School _____

Student Name _____

Alberta Student Number (ASN) _____

Birth date (yy/mm/dd) _____ Grade _____

Placement (describe) _____

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis(es)	Year of Diagnosis(es)	Professional Conducting Assessment

Additional assessment information (please attach copies):

2. How does the condition/disability affect the student in the learning environment?:

3. Services provided in accordance with the *Funding Manual for School Authorities 2005-2006 School Year*, (e.g., Section 1.7 for School Jurisdictions and Section 3.3 for Private Schools). Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a) Frequent specialized one-on-one intervention: (attach extra sheet if needed for clarification)

- specialized setting with teacher _____ (hours per day); _____ (staff/student ratio)
- small group work with teacher and/or teacher assistant _____ (hours per day) _____ (staff/student ratio)
- teacher assistant _____ (hours per day); _____ (staff/student ratio)
- interpreter _____ (hours per day); _____ (staff/student ratio)
- transliterator _____ (hours per day); _____ (staff/student ratio)
- other (specify) _____

b) Specialized equipment and/or assistive devices:

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> communication devices <input type="checkbox"/> assistive technology/devices <input type="checkbox"/> free field amplification <input type="checkbox"/> other (specify) _____ | <ul style="list-style-type: none"> <input type="checkbox"/> OT/PT equipment <input type="checkbox"/> specialized furniture <input type="checkbox"/> personal FM system |
|--|---|

c) Assistance with personal care/health-related interventions:

- | | | |
|--|--|---|
| <input type="checkbox"/> toileting program | <input type="checkbox"/> grooming | <input type="checkbox"/> diapering |
| <input type="checkbox"/> catheterizing | <input type="checkbox"/> dressing | <input type="checkbox"/> feeding assistance |
| <input type="checkbox"/> g-tube feeding | <input type="checkbox"/> respiratory therapy | <input type="checkbox"/> oxygen |
| <input type="checkbox"/> administration of medicine | <input type="checkbox"/> management of equipment | <input type="checkbox"/> OT/PT therapy |
| <input type="checkbox"/> orientation and mobility training | | |
| <input type="checkbox"/> other _____ | | |

d) Frequent documentation of behavioural and/or medical status (please attach examples or summaries):

<input type="checkbox"/> Behaviour	<input type="checkbox"/> checklist	<input type="checkbox"/> anecdotal notes	<input type="checkbox"/> behaviour plan	<input type="checkbox"/> other _____	
	Frequency ➔	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly
<input type="checkbox"/> Medical	<input type="checkbox"/> medical logs	<input type="checkbox"/> medical emergency plan	<input type="checkbox"/> other _____		
	Frequency ➔	<input type="checkbox"/> hourly	<input type="checkbox"/> daily	<input type="checkbox"/> weekly	<input type="checkbox"/> monthly

e) Direct support services for the student at a cost to the system:

For example: Regional Educational Consulting Service teams: (REACH, CASE, Edmonton Regional Educational Consulting Services, RESEAU), Student Health Initiative Partnership.

- | | | |
|--|---|---|
| <input type="checkbox"/> itinerant teacher | <input type="checkbox"/> speech therapist | <input type="checkbox"/> vision consultant |
| <input type="checkbox"/> special education consultant | <input type="checkbox"/> technology consultant | <input type="checkbox"/> nursing services |
| <input type="checkbox"/> hearing consultant | <input type="checkbox"/> chartered psychologist | <input type="checkbox"/> audiologist |
| <input type="checkbox"/> occupational therapist | <input type="checkbox"/> physical therapist | <input type="checkbox"/> behaviour specialist |
| <input type="checkbox"/> orientation and mobility specialist | <input type="checkbox"/> school liaison worker | <input type="checkbox"/> school counsellor |
| <input type="checkbox"/> other _____ | | |

Other service providers not at a cost to the system. For example:

- | | |
|--|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> family/community agencies, specify _____ |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input type="checkbox"/> medical professional services |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> local police authority/RCMP |
| <input type="checkbox"/> CNIB | <input type="checkbox"/> other _____ |
| <input type="checkbox"/> Family Support for Children with Disabilities | |

4. Individualized Program Plan (IPP):

- The current IPP identifies the assessed needs of the student and includes specific educational programming to address those needs.
- This IPP has been developed, implemented and signed by the learning team including the parent/guardian.

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.

Date

Signature of School Authority Designate

Annexe B

**Profil de l'élève ayant
une déficience grave
(formulaire)**

Financement 2005-2006

SVP COCHEZ UNE CATÉGORIE	
<input type="checkbox"/>	41 Déficience cognitive grave
<input type="checkbox"/>	42 Déficience émotive et comportementale grave
<input type="checkbox"/>	43 Déficiences graves multiples
<input type="checkbox"/>	44 Déficience physique ou médicale grave (autisme)
<input type="checkbox"/>	45 Surdit�
<input type="checkbox"/>	46 C�cit�

Autorit  scolaire _____

 cole _____

Nom de l' l ve _____

Num ro d'identification de l' l ve _____

Date de naissance (aa/mm/jj) _____ Niveau scolaire _____

Placement (d crivez) _____

1. Documentation d'appui des professionnels concern s (veuillez inclure dans le dossier de l' l ve) :

Diagnostic.s :	Date du/des diagnostic.s :	Professionnel.s faisant le/les diagnostic.s :
_____	_____	_____
_____	_____	_____
_____	_____	_____

Information suppl mentaire (telle que rapports des conseillers) :

2. De quelle fa on est-ce que cette condition affecte l' l ve dans l'environnement d'apprentissage?

3. Services offerts selon le manuel des autorit s scolaires pour le financement des personnes ayant des d ficiences graves (*Funding Manual for School Authorities 2005-2006 School Year*, article 1.7 pour les autorit s scolaires et article 3.3 pour les  coles priv es). Identifiez au moins trois services d'appui (de « a »   « e ») pr sentement offerts   l' l ve :

a) Instruction/intervention courante qui est sp cialis e et individuelle (utiliser une feuille suppl mentaire si n cessaire) :

- enseignant/aide-enseignant _____ (heures par jour); _____ (rapport  l ves/personnel scolaire)
- petit groupe de travail avec aide-enseignant _____ (heures par jour); _____ (rapport  l ves/personnel scolaire)
- local sp cialis  avec enseignant _____ (heures par jour); _____ (rapport  l ves/personnel scolaire)
- interpr te _____ (heures par jour); _____ (rapport  l ves/personnel scolaire)
- translitt ration _____ (heures par jour); _____ (rapport  l ves/personnel scolaire)
- autre (sp cifiez) _____

b)  quipement sp cialis  ou adapt . Par exemple :

- appareils de communication
- aide par technologie d'ordinateur
- amplificateur de voix
- autre (sp cifiez) _____
-  quipement pour l'ergoth rapie ou la physioth rapie
- mobilier sp cialis 
- syst me FM

c) Aide pour les besoins essentiels. Par exemple :

- | | | |
|---|--|--|
| <input type="checkbox"/> programme d'entraînement à la propreté | <input type="checkbox"/> soins de toilette | <input type="checkbox"/> couches |
| <input type="checkbox"/> sonde | <input type="checkbox"/> habillement | <input type="checkbox"/> aide pour l'alimentation |
| <input type="checkbox"/> alimentation par tube-g | <input type="checkbox"/> thérapie respiratoire | <input type="checkbox"/> oxygène |
| <input type="checkbox"/> administration de médicaments | <input type="checkbox"/> gestion d'appareils | <input type="checkbox"/> ergothérapie/physiothérapie |
| <input type="checkbox"/> entraînement à l'orientation et à la motricité | | |
| <input type="checkbox"/> autre (spécifiez) _____ | | |

d) Documentation courante :

<input type="checkbox"/> Comportement	<input type="checkbox"/> liste de contrôle	<input type="checkbox"/> notes anecdotiques	<input type="checkbox"/> plan de comportement	<input type="checkbox"/> autre _____
	Fréquence →	<input type="checkbox"/> par heure	<input type="checkbox"/> par jour	<input type="checkbox"/> par semaine <input type="checkbox"/> par mois
<input type="checkbox"/> Médical	<input type="checkbox"/> journal médical	<input type="checkbox"/> plan de soins médicaux d'urgence	<input type="checkbox"/> autre _____	
	Fréquence →	<input type="checkbox"/> par heure	<input type="checkbox"/> par jour	<input type="checkbox"/> par semaine <input type="checkbox"/> par mois

e) Services de soutien direct financés par le système. Par exemple : Les équipes de services de consultation en adaptation scolaire (*REACH, CASE, ERECS, Consulting Services et Réseau provincial d'adaptation scolaire*) ; *Student Health Initiative Partnership*

- | | | |
|--|--|--|
| <input type="checkbox"/> enseignant itinérant | <input type="checkbox"/> orthophoniste | <input type="checkbox"/> spécialiste de la vision |
| <input type="checkbox"/> conseiller en adaptation scolaire | <input type="checkbox"/> consultant en technologie | <input type="checkbox"/> services d'infirmière |
| <input type="checkbox"/> spécialiste de l'ouïe | <input type="checkbox"/> psychologue agréé | <input type="checkbox"/> audiologiste |
| <input type="checkbox"/> ergothérapeute | <input type="checkbox"/> physiothérapeute | <input type="checkbox"/> spécialiste du comportement |
| <input type="checkbox"/> psychiatre | <input type="checkbox"/> agent de liaison | <input type="checkbox"/> conseiller pédagogique |
| <input type="checkbox"/> autre (spécifiez) : _____ | | |

Autres fournisseurs de services. Par exemple:

- | | |
|--|---|
| <input type="checkbox"/> AADAC | <input type="checkbox"/> Agences familiales/communautaires. Spécifiez : |
| <input type="checkbox"/> Alberta Health and Wellness | <input type="checkbox"/> Family and Community Support Services (FCSS) |
| <input type="checkbox"/> Alberta Children's Services | <input type="checkbox"/> Materials Resource Centre (MRC) |
| <input type="checkbox"/> Alberta Mental Health Board | <input type="checkbox"/> services médicaux professionnels |
| <input type="checkbox"/> Alberta Justice | <input type="checkbox"/> police/GRC locale |
| <input type="checkbox"/> INCA/CNIB | <input type="checkbox"/> autre _____ |
| <input type="checkbox"/> Family Support for Children with Disabilities | |

4. Plan d'intervention personnalisée (PIP) :

- Un PIP en cours, pertinent à la déficience décrite ci-dessus et aux besoins individuels de l'élève, est élaboré, signé par l'équipe-école et par le parent/gardien, et implanté formellement.

DÉCLARATION

Une documentation pertinente à la demande est disponible, trois des cinq appuis énumérés au numéro 3 (a – e) en place, un PIP en cours est inclus dans le dossier de l'élève. L'élève répond aux critères de financement pour les personnes ayant des déficiences graves (*Severe Disabilities Funding*).

_____ Date

_____ Signature de l'autorité scolaire désignée

Appendix C — Recording Anecdotal Information – Code 42

How much detail does Alberta Education require in the anecdotal documentation for students with severe emotional/behavioural disabilities?

What is required?

- We would like to know what specific behaviours the student exhibits that are extreme, pervasive and impact the educational setting. For example, what does a typical week look like?
- To document this, you could prepare a chart (see example below) that shows what the actual student's behaviours are and the frequency of these behaviours over a period of time (e.g., a week).
- The information gathered should assist in programming for each student and would therefore have a functional purpose and not be completed solely to comply with the requirements for approval of funding.
- The information can be in point form.
- You may want to consider adding time of day to the chart in order to see if the student functions better in the morning or afternoon. This will help to determine what preventative strategies you need to put into place or what changes to routines/direct teaching of social or adaptive skills would benefit the student.

SAMPLE CHART

Student _____

Grade _____

School _____

Week _____

Behaviour	Frequency	Location	Context	Function of Behaviour	Adult Response	Result
What does the student say or do that is problematic? (No judgments or conclusions, just what was observed.)	How many times during the week was each behaviour observed?	Where is each behaviour occurring?	What was the student asked to do? What happened immediately prior to the student engaging in the problematic behaviour?	What was the student trying to get or to avoid?	How did the observing adults respond to the student's behaviour?	Did the student comply or was there further escalation immediately following the adult response? How was the incident resolved?

SAMPLE CHART

Student _____

Grade _____

School _____

Week _____

Behaviour	Frequency	Location	Context	Function of Behaviour	Adult Response	Result

Teacher's Signature _____

Date _____

Appendix D — Resources

The following Alberta Education resources are available on the department's Web site at: www.education.gov.ab.ca.

Funding Manual for School Authorities 2005-2006 School Year

The manual is authorized for the use of school authorities (school jurisdictions, charter schools, private schools and private ECS operators) in accessing funds. The manual explains what funding is available to school authorities and the applicable conditions and requirements. It also includes the principles that Alberta Education uses to provide fair and equitable funding to school authorities. This document is available on the Alberta Education Web site at: www.education.gov.ab.ca/funding/FundingManual.

K-12 Education System Policy, Regulations and Forms Manual

The manual outlines the expectations of Alberta Education with regard to the delivery of and reporting on educational programs and services and on the implementation of the department's Business Plan. The emphasis on a policy-driven and results-based management system is a key characteristic of the education management cycle. It encourages a system of shared responsibility with school boards, schools and school councils and includes:

- Special Education Policies 1.6.1; 1.6.2; 3.5.1; 3.5.2; 3.6.4; 3.6.5
- Student Record Regulation (Alberta Regulation 71/99).

The manual is available on the Alberta Education Web site at:

www.education.gov.ab.ca/educationguide/pol-plan/polregs/toc.asp.

Standards for Special Education, Amended June 2004

This document sets out Alberta Education's requirements and expectations for the development and delivery of programs for students with special education needs in jurisdictions and designated special education private schools. It is available on the Alberta Education Web site at: www.education.gov.ab.ca/k_12/specialneeds/.

Information Package for Alberta School Authorities for the 2005/2006 School Year

In preparation for data exchange activities for the 2005/2006 school year, Information Services Branch has consolidated some information material that is applicable to the operations in your school. This material is available on the Alberta Education Web site at: www.education.gov.ab.ca/technology/isb/schinfo2005/.

Student Information System User's Guide

This is a complete guide to submitting student registrations. The Student Information System (SIS) is a provincial student information database developed and maintained by Learner Records and Data Exchange (LRDE) at Alberta Education. This document is available on the Alberta Education Web site at:

www.education.gov.ab.ca/technology/isb/schinfo2005/sis_User_Guide_2005_2006.pdf.

Programming for Students with Special Needs

The following series is available from the Learning Resources Centre.

Order information is on the Web site at:

www.lrc.education.gov.ab.ca/pro/resources/item-title.htm or
telephone (780) 427 5775; toll-free in Alberta at 310-0000.

- **Book 1 — *Teaching for Student Differences* (1995)**
Highlights strategies for differentiating instruction within the regular classroom for students who may be experiencing learning or behavioural difficulties, or who may be gifted and talented. It also describes a process for modifying the regular program and includes forms to assist in teacher planning.
- **Book 2 — *Essential and Supportive Skills for Students with Developmental Disabilities* (1995)**
Includes developmental checklists for communication skills, gross and fine motor skills, as well as charts and checklists, which provide a continuum of life skills by domain (domestic and family life, personal and social development, leisure/recreation/arts, citizenship and community involvement, career development). It replaces the Alberta Education curricula (1983) for educable mentally handicapped, trainable mentally handicapped and dependent mentally handicapped students.
- **Book 3 — *Individualized Program Plans (IPPs)* (1995)**
This resource describes a process for IPP development and includes strategies for involving parents. It provides information on writing long-term goals and short-term objectives. Forms and checklists are included to assist in planning. Transition planning also is addressed, along with case studies and samples of completed IPPs.
- **Book 4 — *Teaching Students who are Deaf or Hard of Hearing* (1995)**
Includes information on the nature of hearing loss, various communication systems, program planning and teaching strategies. A section on amplification and educational technologies includes hints for troubleshooting hearing aids and FM systems.
- **Book 5 — *Teaching Students with Visual Impairments* (1996)**
This resource offers basic information to help provide successful school experiences for students who are blind or visually impaired. The information in this book addresses:
 - the nature of visual impairment
 - educational implications
 - specific needs
 - instructional strategies
 - the importance of orientation and mobility instruction
 - the use of technology.

- **Book 6 — *Teaching Students with Learning Disabilities* (1996)**
This resource provides practical strategies for regular classroom and special education teachers. Section I discusses the conceptual model and applications of the domain model. Section II includes identification and program planning, addressing early identification, assessment, learning styles and long-range planning. Section III contains practical strategies within specific domains including meta-cognitive, information processing, communication, academic and social/adaptive. Section IV addresses other learning difficulties including attention-deficit/hyperactivity disorder and fetal alcohol syndrome/possible prenatal alcohol-related effects. The appendices contain lists of annotated resources, test inventories, support network contacts and black line masters.
- **Book 7 — *Teaching Students who are Gifted and Talented* (2000)**
This resource provides practical strategies for regular classroom and special education teachers. Section I addresses administration of programs for the gifted and talented at both the district and school levels. Section II discusses conceptions of giftedness, highlighting nine theoretical models. Section III discusses identification of gifted and talented students, including information on gathering and recording data using several different measures, developing IPPs, and communicating with and involving parents. Section IV discusses giftedness in the visual and performing arts. Section V contains strategies for designing and implementing programs, including curriculum modification. Section VI discusses post-modernism and gifted education. The appendices contain lists of annotated resources, test inventories, support network contacts and black line masters.
- **Book 8 — *Teaching Students with Emotional Disorders and/or Mental Illnesses* (2000)**
This resource takes a comprehensive look at six emotional disorders or mental illnesses: eating disorders, anxiety disorders, depression, schizophrenia, oppositional defiant disorder or illness, and presents strategies for teachers, parents and other caregivers to use to assist students.
- **Book 9 — *Teaching Students with Autism Spectrum Disorders* (2003)**
This resource provides basic knowledge about this spectrum of disabilities, educational programming implications and programming strategies. For a free PDF version of this resource go to: www.education.gov.ab.ca/k_12/specialneeds/autism.asp.
- **Book 10 — *Teaching Students with Fetal Alcohol Spectrum Disorder: Building Strengths, Creating Hope*, 2004**
This resource is a revision and expansion of the resource *Teaching Students with Fetal Alcohol Syndrome and Possible Prenatal Alcohol-related Effects* (1997), a teacher handbook developed by Alberta Education and the Alberta Partnership on Fetal Alcohol Syndrome.

This resource includes information on FASD that are key considerations for planning effective education programs, and strategies for creating a positive classroom climate, organizing for instruction and responding to students' individual needs. For a free PDF version of this resource, go to:
www.education.gov.ab.ca/k_12/specialneeds/fasd.asp.

Other Resources

The following resources are available from the Learning Resources Centre. Order information can be located at: www.lrc.education.gov.ab.ca/pro/default.html or telephone (780) 427 5775; toll-free in Alberta at 310-0000.

A Handbook for Aboriginal Parents of Children with Special Needs (2000)

This handbook was developed by Alberta Education in collaboration with the Siksika Board of Education. It provides Aboriginal parents with information regarding the education of their child with special needs. It also includes tips to enhance communication between home and school. The accompanying video, *Our Treasured Children*, highlights intergenerational stories from members of the Aboriginal community.

Make School Work for You (2001)

A collaborative project with the Learning Disabilities Association of Alberta, this resource is for junior and senior high students who want to be more successful learners. It includes information and strategies to help students know about themselves, get organized, make every class count, get along with others, do well on tests and projects and stay motivated.

This resource is a companion to *Teaching Students with Learning Disabilities* and *The Parent Advantage*. It has an accompanying teacher guide and an audio CD set to support students with reading difficulties.

The Journey: A Handbook for Parents of Children Who are Gifted and Talented (2003)

Alberta Education collaborated with the Alberta Association for Bright Children in the development of this handbook for parents of gifted children. For a free PDF version of this resource, go to: www.education.gov.ab.ca/K_12/curriculum/resources/TheJourney/journey.asp.

The Learning Team: A Handbook for Parents of Children with Special Needs (2003)

This information booklet for parents of children with special needs is a revision and expansion of the resource *Partners During Changing Times (1996)*. It provides a general overview of how parents can be involved in the education of their children and includes:

- strategies for participating in their child’s learning team
- suggestions for ways parents can enhance and enrich their child’s learning at home
- practical information and suggestions for:
 - helping children make successful transitions
 - voicing parent concerns
 - staying informed.

This document is available on the Alberta Education Web site at: www.education.gov.ab.ca/educationguide/spec-ed/partners.

The Parent Advantage: Helping Children Become More Successful Learners at Home and School, Grades 1- 9 (1998)

A collaborative project with the Learning Disabilities Association of Alberta, this resource includes strategies parents can use to help their child improve organizational, reading, writing, spelling, math taking and project skills.

Unlocking Potential: Key Components of Programming for Students with Learning Disabilities (2003)

Alberta Education, in collaboration with the Calgary Learning Centre, identified nine key components of programming for students with learning disabilities. Includes sample strategies and outcomes for each of the following nine components: collaboration, meaningful parent involvement, identification and assessment, ongoing assessment, IPPs, transition planning, self-advocacy, accommodations and instruction. It also lists other Alberta Education resources that connect to these components. This document is available on the Alberta Education Web site at:
www.education.gov.ab.ca/k_12/specialneeds/unlock.asp.