

Early and Ongoing Identification/Intervention Procedures

Procedures and communication should be sensitive to each student's family background especially as more than 50 percent of TDSB students live in homes where standard Canadian English is not the primary language.

*Ontario Secondary Schools,
Grades 9 to 12
Section 5.5, p. 25*

(Policy/Program Memorandum No. 11)

www.edu.gov.on.ca/ppm/11.html

Early and Ongoing Identification and Intervention are recognized as contributing to the well-being of all children. A continuous assessment and program planning process should be initiated when a student is first enrolled in a TDSB school, and should be ongoing throughout a student's school life. Procedures to identify each student's level of development, learning abilities, and needs should be in place and educational programs should be designed to support these needs and to facilitate each student's growth and development.

It is critical that early and ongoing identification and intervention strategies for students at risk be a priority at ALL grades, not just the primary grades. This is especially important as students make the transition to secondary school. Students who have difficulty achieving curriculum expectations are at risk of not completing their diploma requirements and dropping out of school.

Boards are therefore expected to provide a range of programs to assist students in meeting the curriculum expectations. These programs should include early identification of learning needs, appropriate teaching strategies, ongoing assessment, and communication with parents and students.

Process and Procedures

Early and Ongoing Identification and Intervention procedures are designed to be used for all students in Junior Kindergarten to Grade 2wo.

Teachers should meet with the parents of every student new to JK to Grade 2, to gather information about the student's preschool development, background, and health history no later than the next reporting period. There should be a means to promote liaison with child care services and community agencies to share, with informed parental consent, information about the student, prior to entering the school system.

Teachers should observe the student in a variety of learning situations to gain understanding of the student's development: physical, social, emotional, language, intellectual, and record significant details of the student's growth and learning. Where program modifications and accommodations are necessary, the teacher consults with resource personnel to recommend strategies, results and next steps.

When further planning or consultation is needed, a referral is made to the School Support Team.

The School Support Team will contact professional support staff from School Services: Instruction and Special Education and Support Services to assist the teacher in successfully programming for a student with special needs and determining next steps.

Implementation

The current procedure for Early and Ongoing Identification began in the 2003–2004 school year to:

- provide compliance with Ministry of Education standards and the requirements of the TDSB Special Education Plan
- ensure that schools are able to identify each student's level of development, learning abilities, and needs upon entering the TDSB
- support successful transitions to school
- enable teachers to use the information to plan appropriate programs for all students
- provide the starting point for ongoing identification and tracking of students at risk
- provide the starting point for development of a GSN Personalized Equipment Claim (formerly known as ISA 1 Claim)
- provide relevant data related to student development and needs which can be used to track students over time
- provide schools with information to identify trends and patterns in the school community

The TDSB Early and Ongoing Identification Procedure requires the completion of a Developmental History form for ALL students new to the TDSB in JK to Grade 2. It is suggested that the Developmental History Form [Appendix C (5)] be completed as part of a school's registration process. The form should be completed by the parent, either at the time of registration or taken away and returned to the school by a given date. Some parent(s) may need support with completing the form.

These processes and procedures are part of continuous assessment and program planning for our students. It is intended that these procedures be initiated when a child is first enrolled in school or no later than the beginning of a program of studies immediately following Kindergarten, and should continue throughout the child's school life, pursuant to *Ministry of Education Policy and Procedures Memorandum, No. 11*.

Early Interventions Kindergarten Diagnostic Classes

Kindergarten students are admitted to diagnostic programs as the result of a Formal Case Conference. Committee members are identical to those at an Identification, Placement, and Review Committee (IPRC). An IPRC request is completed by the school and submitted in the usual manner. Required documentation must be included.

Required documents are as follows:

- Developmental History Form
- If child has attended school
 - School Support Team Form
 - Report Card

- At least one of the following reports, which must include observation data or age ranges, clearly indicating the student will not manage in a regular Kindergarten class:
 - an assessment indicating medical diagnosis
 - a developmental assessment
 - a psychological assessment
 - a comprehensive speech/language assessment
- At least one of the following:
 - preschool/daycare report
 - observational assessment

Kindergarten Intervention Program (KIP)

The Kindergarten Intervention Program serves age-appropriate students enrolled in a Junior Kindergarten or Senior Kindergarten program and who are not managing in the regular Kindergarten program. Students must show ability to participate in the Kindergarten program, but have needs in the area of following classroom rules and routines and/or developing social skills and socially appropriate skills.

Parental agreement is required before a student is placed in the KIP. Students remain in the programs for up to one year. Before students return to the regular Kindergarten class, an IPRC/Case Conference is convened to discuss future steps.

Kindergarten Intervention Programs have six students per class, with one teacher and one child and youth worker.

Kindergarten Early Language Intervention (KELI) Program

The KELI Program is an innovative program implemented in September 2001 and is offered in ten host schools in the TDSB. The KELI Program provides an intensive oral language and early literacy program to groups of students in Senior Kindergarten, who have delayed oral language development. The mission of this early intervention program is to enhance young students' understanding and use of oral language as the basis for learning to read, write, and get along socially.

KELI Program students attend their regular home school Kindergarten program either five mornings or five afternoons a week. In addition, they attend the KELI Program two half-days in the opposite half of the day. The KELI Program is provided by a teacher and speech-language pathologist as an instructional team.

Eligibility for the Program

Eligible students will attend the regular Senior Kindergarten program at one of the selected high-needs schools and should:

- be age-appropriate for Senior Kindergarten (i.e., five years of age)
- demonstrate significant delays/difficulties in oral language comprehension and/or expression

- demonstrate ability to learn from group instruction
- demonstrate language difficulties in their first and second languages, if English is their second language
- have attended school regularly during the previous academic year
- not demonstrate serious behavioural or attentional problems or have a diagnosis (e.g., Autism Spectrum Disorder)
- have parents provide written permission for screening by a KELI speech-language pathologist

Admission to the Program

Kindergarten teachers of the selected high-needs schools use a specific checklist to nominate students at the end of the Junior Kindergarten year. With parental permission, speech-language pathologists screen the students, using a standardized test. Students who best meet the criteria of the program are admitted.

Parents must attend an initial meeting to receive complete information about program and parental expectations, and to give written permission for assessments by speech-language pathologists, program evaluation, and videotaping for professional development purposes.

KELI Program Locations

The KELI Program is offered at ten host schools across the TDSB. Each program accepts eligible students from several referring schools with a total Junior Kindergarten population of about 1000 students and high needs according to the 2004–2005 TDSB Learning Opportunities Index of socio-economic factors.

Host schools are located within a short travel distance from a cluster of selected schools. Students are transported by bus, except for those students registered at host schools.

Expected Outcomes

Significant gains in oral language development and early literacy skills are expected for KELI Program students. Students eligible for the KELI Program comprise the lowest achieving Senior Kindergarten children. Although the exact percentage of KELI students at risk for school failure and placement in special education programs is impossible to determine, it is estimated that it is the majority in view of the combination of the following factors:

- Significant speech and language delay at age 4–5 years
- Children from inner city schools
- High number of families speaking English as their second language

Without the early intervention of the KELI Program focus on oral language, literacy, and social communication, almost all of those at-risk students would likely require school-based resource programs, professional support services, and/or special education programs during their school years.

