

STUDENT NEEDS PROFILE

A GUIDE FOR SCHOOLS, PARENTS AND CARERS

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A Guide for Schools, Parents and Carers

The Student Needs Profile

The Student Needs Profile (SNP) assists the process of identifying the specific needs of students who require adjustments to their learning program and helps school staff meet their responsibilities under the Department of Education Students with Disability Policy.

The Student Needs Profile describes individual need in four educational domains.

- Participation
 - The Participation profile describes the engagement of a student in school activities/programs and the adjustments needed to assist access to their learning.
- Communication
 - The Communication profile describes the needs of the student and the educational adjustments required for a student to understand others and express themselves.
- Personal Care
 - The Personal Care profile determines the student's ability to manage their personal health and care needs, and the level of adjustments and/or assistance required.
- Movement . The Movement profile refers to the student's physical capacity to access their learning environment and programs.

Each educational domain incorporates a number of focus areas enabling student needs to be described so that effective access and participation in the curriculum can be achieved. Table 1 provides an overview of the domains and the associated focus areas.

Table 1 Student Needs Profile Overview

Domain	Focus Areas
Participation	Curriculum Access
	Behaviour
	Social Competence
	Safety
Communication	Communication Access – Perceptive Language
	Communication Participation – Expressive Language
Personal Care	Hygiene
	Eating and Diet
	Health Care
Movement	Gross Motor and Mobility
	Fine Motor

To assist in the development of a profile, each focus area uses descriptors or indicators that include observable behaviours, competencies or adjustments. These descriptors are levelled enabling each focus area to be scored as part of the profile process. The indicators have also been aligned with the Nationally Consistent Collection of Data for Students with Disability Levels of Adjustment (http://ed.ntschools.net/studserv/team/dm/General/level-of-adjustment-provided-to- the-student%20matrix.pdf).

Developing a Student Needs Profile

A collaborative process with members of the School Support Team, parent/caregivers and other professionals as appropriate is the best approach to developing a profile. Education Advisors may assist school staff and parents in the process of profiling student's needs and identifying adjustments required in school programs.

Special Needs Profiling is an opportunity for parents and carers to contribute to their child's educational program in collaboration with school staff. This supports compliance with the <u>Disability Standards for Education (2005)</u> and the Northern Territory <u>Students with Disability Policy</u>.

When developing a Student Needs Profile all stakeholders should:

- be familiar with the contents of this booklet
- consider the child's/student's needs in each of the focus areas
- choose relevant focus areas
- record level of need and indicators chosen to correlate with current evidence/baseline data.

When selecting indicators from a focus area that best describe the required adjustment, the whole sentence must be considered, not selected phrases and not every indicator in each level is required to identify the level of need.

Using the Student Needs Profile

The Student Needs Profile can be used to evaluate the specific needs of all students who require adjustments to their learning program. Schools can use this tool to identify the adjustments that are occurring in the classroom to:

- initially identify students that may need extra support in their learning
- identify specific baseline information about how the student is accessing programs
- inform and develop Education Adjustment Plan and Student Support Plan goals
- inform intervention planning and the purchase or allocation of resources within the school
- through monitoring and review processes identify an increase or decrease in adjustments needed over time
- prepare an application for the Special Education Support Program (SESP)
- identify students and collect evidence of needs for the <u>Nationally Consistent Collection of</u>
- Data on School Students with Disability.

Moderation of the Student Needs Profile

Moderation is the process in which stakeholders identify adjustments occurring and agree on the level of adjustments in the SNP through collaborative discussion and analysis of evidence. Moderation of the SNP can occur at various levels of intervention for students.

Table 2 identifies ways in which moderation of the SNP might occur in a School setting to identify student needs and evaluate the effectiveness of programs and interventions.

Table 2 Moderation examples in a School setting

Table 2 Moderation	examples in a School setting
Level of Intervention	Moderation Examples
Level 1 - Whole School/ Whole Class Programs	 School Support Team in collaboration with the class teacher can use the SNP to identity adjustments required for students. School Support Team can guide class teacher in whole school programming, planning, differentiation and collection of evidence to address areas of adjustments identified in SNP.
Level 2 - Specific Support Programs	 School Support Team and class teacher use SNP to analyse evidence and identify adjustments to inform the student profile and develop a Student Support Plan and program interventions. Monitor and evaluate effectiveness of goals and interventions every 10 weeks. Identify groups of students with similar needs to identify programs interventions and information resourcing needs. School Support Team uses SNP to identify students that will be included in the Nationally Consistent Collection of Data on School Students with Disability.
Level 3 - Intensive Programs	 School Support Team use SNP to evaluate the progress of goals and individual program interventions with key stakeholders. SNP used with all stakeholders at an EAP meeting for a student with a disability that is identified by the school to meet eligibility criteria to access Special Education Support Program. An Education Advisor must be included in discussion to provide a Northern Territory wide moderation of needs to support SESP application. Identify groups of students with similar needs to identify programs interventions and information resourcing needs. School Support Team uses SNP to identify students that will be included in the Nationally Consistent Collection of Data on School Students with Disability.

Adjustments

It is acknowledged that adjustments to the teaching and learning environment can vary depending on the student's individual needs and their identified disability. Table 3 identifies some of the typical adjustments or supports needed to access and participate in school programs.

Table 3 Levels of adjustments and Student Needs Profile

Degree of support or adjustment to environment	Support Scale – Key words	Profile Level	Typical Adjustments
QDTP (Supported within quality differentiated teaching practice)	age appropriate skill level; no adjustment at this time as student is supported within quality differentiated teaching practice	0	The learner requires no personalised adjustment beyond regular classroom differentiation practices and resources.
Supplementary	may require mild occasional infrequent additional		The learner is accessing the curriculum at the appropriate year level with reminders and particular learning support. The learner is capable of operating safely in most learning environments but may require minor additional supervision in certain activities. The learner requires a Health Care Plan due to a medical condition. The learner requires separate supervision or more time to complete assessment tasks.
	regular often sometimes medium	2	The learner requires supervision and/or use of assistive technologies. The learner requires structured program intervention by specialist/s. The learner requires regular supervision in a range of activities. The learner requires some modification to the learning environment. The learner requires some alternative assessment practices.
Substantial	severe significant frequent substantial support considerable in extent	3	The learner requires curriculum content at a different year level to their same aged peers or significant adjustments/modifications to delivery modes. The learner requires adult assistance/supervision to enable access and participation in school activities. The learner needs specialised or frequent support for ongoing personal care, safety, self-regulation, social interaction and medical procedures at school. The learner requires access to essential specialised support services. The learner requires alternative formats for assessment tasks.
Extensive	constant monitoring highly intensive extreme highly individualised ongoing highly specialised vigilant supervision	4	The learner requires highly individualised learning program tailored to the needs of the student with comprehensive and ongoing adjustments. The learner requires constant supervision to prevent injury to self or others in almost all school activities. The learner requires complex assistive technologies and communication devices that are provided by the school. The learner requires constant monitoring due to a medical condition. The learner requires extensive support from specialist staff.

The Student Needs Profile

Participation	Curriculum Access
	Behaviour
	Social Competence
	Safety

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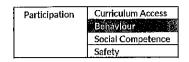
Participation

Curriculum Access

Curriculum Access details the adjustments required in curriculum and teaching practices for the student to participate in a meaningful learning program. It specifies the adjustments/additional support that must be provided in order for maximum learning to occur.

The student's needs are best described by the following level

Level	Indicator
☐ Level 0	Age appropriate learning development.
☐ Level 1 Supplementary (Minimal)	 a. Attempts structured tasks in all curriculum areas, but has mild difficulty with concentration and/or completion of activities. Requires some supervision to remain on task. b. Requires additional assistance to master some skills and concepts. e.g. individual instruction, support with vocabulary development. c. Specific areas of the curriculum may need to be adapted/modified e.g. extra time, breaks, repetition of concepts. d. Is working to same learning outcomes as peers, but has specific curriculum access needs e.g. large print, use of a brailler to produce assessment items, hearing aids/device, sound field system, cochlear implant.
☐ Level 2 Supplementary (Moderate)	 a. Can undertake learning activities in all areas if presented in small steps, given extra time and/or presented in different ways. b. Creation of written response is more difficult for the student than for agepeers and reasonable adaptations/adjustments to the curriculum are required. c. Can acquire new skills after repeated individual instruction, with adjustments to teaching and learning in a structured classroom environment. d. Requires some alternate assessment practices to demonstrate learning outcomes.
☐ Level 3 Substantial	 a. Requires significantly modified learning materials and structured tasks with frequent teacher directed individual instruction e.g. difficulty retaining skills, significantly delayed fine motor skills and/or communication skills (receptive, expressive, written) b. Simple instructions, concrete demonstrations and/or initial 'hand over hand' assistance are required to support learning. c. Requires significant curriculum adjustment to address learning needs and program delivery within a highly structured classroom environment. d. Individually tailored assessment practices are needed to demonstrate learning outcomes e.g. use of assistive technology, scribe.
Level 4 Extensive	 a. Intensive individual instruction and/or hands on assistance is required for basic sensory and cognitive stimulation e.g. visual stimuli, touch box. b. Requires high-level adaptations and selected curriculum content to enable participation in class activities. c. Requires highly customised strategies to demonstrate learning outcomes e.g. signing interpreter, highly specialised assistive technology. d. Curriculum participation is impeded due to aspects related to the disability/disorder requiring highly intensive intervention and vigilant supervision e.g. physical constraints, extreme anxiety or disinterest.



Behaviour

Behaviour describes actions/reactions that interfere with student's learning in the school context. It refers to ongoing and/or episodic overt, passive and withdrawn behaviours that may be associated with a specific disability/disorder, including behaviours in response to sensory processing difficulties.

Note: A Behaviour Plan will need to be sighted by the advisor for all students who are described at level 3 and level 4.

The student's ne	eeds are best described by the level indicators listed below
Level	Indicator
☐ Level 0	Age appropriate self-regulation skills within the class/school context.
☐ Level 1 Supplementary (Minimal)	 a. Requires occasional supervision and support for specific behaviour needs. e.g. verbal or visual prompts. b. Requires occasional sensory materials and strategies to assist appropriate behaviours in the school context e.g. using Break Card, move and sit cushion, fiddle tools. c. Requires occasional assistance to deal with conflict/emotions appropriately. d. Requires occasional assistance to transition between classes/school activities e.g. has limited understanding of school routines, poor attention or anxiety.
☐ Level 2 Supplementary (Moderate)	 a. Requires regular intervention and/or replacement behaviour due to behaviour needs e.g. explicit teaching regarding self-regulation strategies, individualised classroom strategies such as separation from other students, regular visual and verbal prompting. b. Requires regular sensory materials and strategies to assist appropriate behaviours in the school context e.g. within most sessions using a Break Card, down time after play breaks, development of a sensory plan. c. Requires a behaviour support plan developed with the support of a specialist teacher or other professional to address regular episodes of over or under responsive behaviour e.g. non- compliance, poor self-regulation, poor attention, sensory seeking/avoidance behaviours. d. Requires regular intervention, supervision and support for specific behaviour associated with a disability/disorder e.g. impulsivity, obsessions, withdrawal behaviour. e. Environmental considerations within class/school to support regulation of student's behaviour e.g. noise interference, lighting, excessive use of visual displays, strategic seating plan.
☐ Level 3 Substantial	 a. Highly individualised strategies are required to manage repetitive or unpredictable behaviours or atypical interests in objects, which impede learning or participation in activities at school. b. Requires a highly structured behaviour support plan (inclusive of sensory considerations) developed by a team of school personnel and other professionals, delivered within a highly structured school environment to develop and maintain appropriate behaviour. A risk assessment plan may be developed to support relevant health and safety concerns. c. Requires significant support to limit behaviours that are extremely disruptive or withdrawn and influence the student's ability to engage in the learning environment and that of others. d. Frequently engages in anti-social behaviour or disruptive behaviour e.g. non-compliance, excessive emotional response, poor attention, sensory seeking behaviours.
☐ Level 4 Extensive	 a. Requires constant and intensive support/intervention due to extreme levels of aggressive/anxious behaviour or withdrawn/disengaged behaviour associated with a disability/disorder. b. Requires a highly structured and intensive behaviour support plan (inclusive of sensory considerations) developed by a team of school personnel and other professionals. In addition, a risk management plan addressing relevant health and safety concerns within the school environment is required. c. Requires ongoing/constant support from external agencies such as juvenile justice, disability support agencies, psychiatrist or medical support.

Participation Curriculum Access
Behaviour
Social Competence
Safety

Social Competence

Social Competence details the ways students interact with those around them and the adjustments they need to manage relationships with others. It includes descriptions of the support needed to effectively participate within the school context (e.g. classroom, school routines and break times).

Level	Indicator
☐ Level 0	Age appropriate social skill development.
☐ Level 1 Supplementary (Minimal)	 a. Needs prompting to cope with daily routines e.g. times for varied school activities, transportation requirements. b. Requires occasional prompting for specific inappropriate social behaviours. c. Requires strategies to ensure appropriate reactions when dealing with other students or teachers.
☐ Level 2 Supplementary (Moderate)	 a. Difficulties organising daily routines, tasks and materials without regular support. b. Some awareness of the demands, expectations and restrictions of the school and wider community but requires regular support. c. Individualised instruction and strategies needed to assist student to develop and maintain appropriate friendships and relationships. d. Requires planning and regular support in unfamiliar situations. e. Requires a small group program targeting social skills run within the school e.g. cooperative gardening/cooking project.
☐ Level 3 Substantial	 a. Needs a specific plan to assist participation in daily routines and tasks e.g. needs one to one prompting and/or visual supports. b. Requires frequent and explicit instruction in order to develop appropriate responses to social situations and interactions. c. Requires frequent monitoring, assistance and facilitation from an adult in less structured situations to encourage participation and appropriate interactions. d. Participates in a small group or one to one program targeting specific social skills.
☐ Level 4 Extensive	 a. Requires intensive and constant supervision in all activities to enable participation and successful interaction with others. b. Requires delivery of an intensive and individualised teaching program, with high levels of support in order to manage social interactions. c. Intensive supervision is required at all times of the day due to unpredictable or socially provocative tendencies. d. Is dependent on an adult to interpret demands, expectations and restrictions of the school environment and the wider community e.g. signing interpreter.

Participation Curriculum Access
Behaviour
Social Competence
Safety

Safety

Safety describes student behaviours that inform management strategies and/or adjustments needed to ensure a student's safety whilst at school. Safety can be an issue due to the difficulties associated with the disability/disorder. This includes cognitive/intellectual, behavioural, health and medical needs.

Note: A Risk Management Plan will need to be sighted by the advisor for all students who are described at level 4.

Level	Indicator
□ Level 0	Age appropriate understanding and skill level.
☐ Level 1 Supplementary (Minimal)	 a. Occasional risk of injuring self or others from hazards in the environment because of difficulties associated with the identified disability/disorder, poor mobility function, or health condition. b. Does not understand boundaries or have safety awareness and may wander into other parts of the school, may require a prompt or reminder to return to appropriate play area. c. Occasionally has difficulty responding/complying with verbal warnings and may require additional assistance to maintain safety. d. Cannot hear or understand verbal warnings and requires some additional supervision to maintain safety.
☐ Level 2 Supplementary (Moderate)	 a. At moderate risk of injuring self or others from hazards within the environment because of difficulties associated with an identified disability/ disorder, poor mobility function, or moderate health issue. b. Does not understand boundaries or have safety awareness and may wander into other parts of the school. Requiring a play program to remain within the safe play area. c. Absconds regularly and requires extra supervision by staff during recess and lunch times. d. Cannot hear or understand verbal warnings and requires regular supervision to maintain safety.
☐ Level 3 Substantial	 a. At significant risk of injuring self or others from hazards in the environment because of difficulties associated with an identified disability/disorder, poor mobility function or significant health condition e.g. may leave classroom due to sensory overload. b. Requires frequent support when moving around the school environment due to limited understanding of school routines and processes and/or severe anxiety. c. Frequently absconds and requires significant supervision by staff throughout the school day. d. Requires specially targeted program to develop appropriate behaviour and/or social interactions that are impacting on safety of self or others. e. Requires significant supervision, as the student is at risk of injuring self or others.
☐ Level 4 Extensive	 a. At extreme risk of injuring self or others from hazards in the environment because of difficulties associated with an identified disability/disorder, poor mobility function or significant health issue. b. Requires highly intensive management plan to cater for all situations impacting on the safety of self or others. c. Requires intensive and constant supervision to prevent injury to self or others.

Communication

Communication Access - Receptive Language

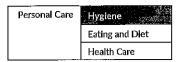
The Receptive Language profile describes student needs and the degree of adjustment that is required to understand communication. This includes non-verbal, verbal and written communication.

Level	Indicator
☐ Level 0	Age appropriate skill level in non-verbal, verbal and written language.
☐ Level 1 Supplementary (Minimal)	 a. Environmental factors (loud noise, background noise, position in class) influence communication skills and the student may require modifications to the environment. b. Processing and understanding language presents some difficulties, with the student requiring additional supports e.g. prompts, gesture, visual supports, large print. c. Requires some support to listen and respond appropriately.
Level 2 Supplementary (Moderate)	 a. Access individualised program developed with input from a Speech Pathologist and/or Education Advisor to develop communication skills. b. Processing and understanding language presents moderate difficulties. The student requires frequent support to understand classroom and/or social language (pragmatics). c. Requires structured support and practice to listen and respond appropriately.
☐ Level 3 Substantial	 a. Requires alternative and augmentative communication systems such as sign language, a picture based communication system or a communication device with input from a Speech Pathologist or other specialist. b. Processing and understanding language presents significant difficulties. The student requires high level support to understand classroom and/or social language (pragmatics). c. Requires significant step by step support and practice to listen and respond appropriately.
□ Level 4 Extensive	 a. Receptive language is extremely limited and augmentative communication is required to promote functional understanding with input from a Speech Pathologist or other specialist e.g. picture symbol system, voice output device or sign language. b. Processing and understanding language presents extreme difficulties. The student requires extensive modification to understand classroom and/or social language (pragmatics) e.g. transcribed to Braille, support of note-taker or signing interpreter. c. Requires stimulation and interpretation of language cues e.g. non-standardised gestures, stimulation through sensory input, signing through transition phases.

Communication Participation – Expressive Language

The Expressive Language profile describes how a student communicates with others through non-verbal, verbal and written language, sign or augmented systems. The disability/disorder will determine the level and type of programs needed to participate in school activities.

Level	Indicator
□ Level 0	Age appropriate skill level in non-verbal, verbal and written language.
☐ Level 1 Supplementary (Minimal)	 a. May have some speech errors which do not impact on intelligibility. b. May also have a speech program being implemented by parents/carers. c. Explicit teaching of vocabulary and language additional to class program is needed to develop appropriate use of language. d. Requires prompts to sustain a conversation.
☐ Level 2 Supplementary (Moderate)	 a. May have moderate speech sound errors which impact on intelligibility. b. May have an individualised program developed with input from a Speech Pathologist and/or Education Advisor to develop communication skills. c. Communicates independently but often requires explicit instruction/modelling and/or augmented supports e.g. picture symbols, key word signing, visual cueing. d. Conveying meaning is difficult and affects the students' ability to communicate/socialise with others.
☐ Level 3 Substantial	 a. Severely impaired speech production impacting on intelligibility. b. Has a frequently implemented individualised program designed with input from a Speech c. Pathologist and/or Education Advisor to promote communication and language. d. Requires ongoing explicit instruction/modelling with augmented supports e.g. sign, picture based and/or assistive technology. e. Severe difficulty conveying meaning which affects the students' ability to communicate/socialise with others.
☐ Level 4 Extensive	 a. Extremely limited expressive language requiring alternative and/or augmentative communication systems such as sign, picture based or assistive device and requires intensive ongoing instruction by trained personnel e.g. PECS b. Intensive individualised program designed with input from a Speech Pathologist and/or Education Advisor to promote communication and language. c. Requires a support person to facilitate and/or interpret students' communication cues to enable participation e.g. signing interpreter, non-standardised gestures, vocalisations, facial expressions, stimulation through sensory input. d. Relies on Braille and requires intensive, ongoing instruction in this communication method.



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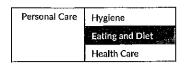
Personal Care

Hygiene

Hygiene focuses on the support students' need to manage personal care requirements whilst at school. It includes toileting and hygiene needs in respect to themselves and others. These essential hygiene routines may range from some modifications to intensive individual management.

Note: A Health Care Plan and/or a Manual Handling Plan will need to be sighted by the advisor for all students who are described at level 3 and level 4.

Level	Indicator
☐ Level 0	Age appropriate self-care abilities.
☐ Level 1 Supplementary (Minimal)	 a. Relatively independent but requires some modifications to the school environment or class activities and routines to allow access with dignity e.g. personal hygiene, being near appropriately equipped toilets, timed toileting, visual reminders, supervision to reach or use changing facilities. b. Input from a Physiotherapist and/or Occupational therapist regarding access to facilities e.g. raised toilet, tap handles modified, support rails.
□ Level 2 Supplementary (Moderate)	 a. Requires some assistance, supervision and/or prompting to learn and master independence with toileting, personal hygiene, dressing, showering or bathing. b. Input from a Physiotherapist and/or Occupational therapist regarding access to personal care independence e.g. modified equipment and toileting programs.
☐ Level 3 Substantial	 a. Supervision and assistance from one to two adults is required for toileting, showering and bathing procedures although the student is still able to carry out aspects of self-care routines e.g. transfer assistance, lifting procedures and use of mechanical aids. b. Training and/or support needed for staff to implement specialist recommendations from Physiotherapist and/or Occupational Therapist e.g. safe lifting procedures.
☐ Level 4 Extensive	 a. Intensive support is required for complex toileting and personal care requirements, including the use of medical appliances e.g. catheters associated with personal hygiene. b. Is completely dependent / unable to participate in self-care routines and requires total assistance e.g. hoisting or full assistance of two adults to transfer, may wear pull-ups that require changing or be unable to inform staff of need to go to toilet. c. Complex training and/or support is needed for staff to implement specialist recommendations/routines from Physiotherapist and/or Occupational Therapist.

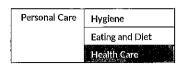


Eating and Diet

This profile details any additional eating, drinking and dietary needs, which require individual management associated with a disability/disorder.

Note: A medical or meal plan may be required at the planning meeting for some students.

Level	Indicator
☐ Level 0	No identified needs related to eating and diet.
☐ Level 1 Supplementary (Minimal)	 a. Able to eat independently at meal times but requires occasional adult supervision/assistance/accommodations for health, safety, sensory or mobility reasons. b. At risk of allergic reactions to food or chemicals, food avoidance or intolerance requiring additional adult supervision and assistance during meal times.
☐ Level 2 Supplementary (Moderate)	 a. Able to eat independently at meal times but requires regular adult assistance. b. A moderate level of support from an adult is required during eating and drinking procedures due to a disability. c. At risk of allergic reactions to food or chemicals, food avoidance or intolerance requiring regular adult supervision and assistance during meal times and potentially at other times during the school day. Consultation with Speech Pathologist and/or Occupational Therapist. A meal plan may be required.
☐ Level 3 Substantial	 a. A significant level of support from an adult is required during eating and drinking procedures due to a disability. b. At risk of allergic reactions to food or chemicals, food avoidance or intolerance requiring constant adult supervision and assistance at all times of the school day. Consultation with a Speech Pathologist and/or Occupational Therapist is required. A meal plan is required.
☐ Level 4 Extensive	 a. Needs assisted feeding e.g. via a PEG or Nasogastric Tube requiring supervision/assistance during feeding times. b. Total support from an adult is required during eating and drinking procedures due to a disability/anaphylaxis. Consultation with a Speech Pathologist and/or Occupational Therapist is required. A meal plan is required. See <u>Anaphylaxis Guidelines</u> for specific procedures and resources.



Health Care

The profile describes specific adjustments to address requirements for a Health Care Plan. This Health Care Plan requires written instructions from a medical professional or a therapist.

Note: A Health Care Plan must be available at the planning meeting for all students allocated **Level 1** and beyond.

Level	Indicator
□ Level 0	No medical or health needs identified.
☐ Level 1 Supplementary (Minimal)	 a. Assistance maybe required for a medical condition or in the use of specialised medical equipment at specific times of the day e.g. blood testing equipment, asthma apparatus, hearing aids/device, cochlear implants, Sound field System. b. Has one or more chronic health conditions or health care needs which are generally stable or controlled but will need some routine health care procedure that needs monitoring and supervision e.g. ear health - contact Hearing Team for generic Hearing Health Care Plan. c. Prescription medication for a disability/disorder is taken during the school time with the supervision and assistance of an adult.
☐ Level 2 Supplementary (Moderate)	 a. Regular assistance is needed to perform required routine health care procedures e.g. hygiene related to catheterisation equipment. b. Requires regular assistance from trained staff for the use or fitting of equipment or appliances. c. Requires regular daily intervention by specifically trained staff to manage a medical condition.
☐ Level 3 Substantial	 a. Requires frequent monitoring of their health status throughout the school day e.g. seizure management, diabetic management. b. The Health Care Plan includes detailed steps for routine performance of health care procedures and specific emergency care procedures to be followed by trained school staff e.g. seizure management.
☐ Level 4 Extensive	 a. Ongoing and intensive monitoring is required to address emergency and life threatening situations. b. Emergency equipment is required to address emergency and life-threatening situations e.g. resuscitator, auto-injector device for anaphylaxis. c. May require emergency administration of prescribed medication as part of emergency plan.

Movement

Movement Gross Motor and Mobility Fine Motor

Gross Motor and Mobility

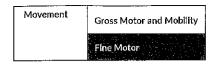
The level of functional independence and the student's physical capacity for movement is the focus of this profile. It refers to movements that require coordination and effective use of limbs, trunk and whole body.

Note: This information would be documented in a physiotherapy and/or occupational therapy report.

	ds are best described by the level indicators listed below
Level	Indicator
☐ Level 0	Age appropriate skill level.
☐ Level 1 Supplementary (Minimal)	 a. Shows poor awareness of personal space boundaries e.g. bumps into people. b. Avoids or appears unsure of movement based play opportunities with peers. c. Can complete age appropriate motor tasks with reduced speed/accuracy of movement. d. Requires specific verbal direction to complete new or complex motor tasks e.g. hopping, skipping, climbing, throwing/catching. e. Minimal assistance for mobility or balance is required, such as handrails, ramp, tactile markings, a lift or staff support is needed. f. Is independently mobile using specialised mobility equipment and requires minimal supervision.
□ Level 2 Supplementary (Moderate)	 a. Requires verbal and some physical prompting to complete gross motor tasks e.g. start a task and allow student to complete. b. Has difficulties performing gross motor tasks due to decreased awareness, strength, motor planning coordination and/or tactile defensiveness. c. Requires some modification of the task to complete successfully. Occupational Therapy and/or Physiotherapy advice may be needed e.g. allow student to jump over stationary rope during skipping. d. May demonstrate resistance or opposition in response to challenging motor tasks. e. Has some independence and requires adult support or training in the use of specialised equipment e.g. walking frame, callipers, and wheelchair. f. A student with vision impairment may require ongoing support for orientation and mobility program.
☐ Level 3 Substantial	 a. Performs parts of gross motor activities with effort and limited success Occupational Therapy and/or Physiotherapy input required e.g. partial completion of obstacle course/activities. b. Can complete motor components of activities of daily living with physical assistance e.g. managing clothing for toileting, organising own school bag. c. Demonstrates extreme avoidance and/or aggressive behaviours in response to challenging tasks. d. Requires a wheel chair for mobility and needs assistance to transfer to other pieces of equipment or activities e.g. wheelchair to seating, to pool, to toilet, wheelchair to trampoline etc. e. Requires assistance for general movement or transfers e.g. getting up off the floor. f. Is mobile but requires significant support when moving around the school due to balance or coordination issues, vision impairment or supervision whilst using mobility aids or disability/disorder.

Gross Motor and Mobility continued

□ Level 4	a. Has extremely limited gross motor control for simple actions. Full assistance may be required e.g. reach.
Extensive	b. Is unable to perform basic tasks. Occupational Therapy and/or Physiotherapy direction required e.g. walking, sitting, standing.
	c. Requires full physical assistance for gross motor components of activities of daily living including access to play equipment, classroom and toileting areas.
	d. Requires intensive and long term orientation and mobility training e.g. vision impairment, walking frames.
	e. Requires intensive support or constant monitoring to maintain posture e.g. standing frame.
	f. In order to access the school curriculum and environment, the student requires assistance of more than one staff member for mobility and transfers e.g. use of hoist for transfers.
	g. Has limited independent or controlled movement. Constant physical support or instructions from a close range are needed at all times when moving around the classroom and the school.



Fine Motor

Fine Motor movement refers to activities that require coordinated and effective use of arm, finger and hand movements to complete tasks and promotes access to all aspects of the curriculum including daily living activities/functional independence.

Note: This information may be documented in an occupational therapy report.

cator e appropriate skill level. Can manipulate most objects with reduced speed/ accuracy of movement e.g. pencil, managing buttons, zips, scissors, shoelaces.
Can manipulate most objects with reduced speed/ accuracy of movement e.g.
Manipulating small objects may present additional challenges. Requires specific verbal direction to complete two handed tasks e.g. dressing. May require extra prompting to complete motor tasks (handling small, heavy or fragile objects) e.g. unwrapping, taps, lunchboxes.
Requires regular verbal and some physical prompting to complete fine motor tasks.
Has difficulties performing fine motor tasks due to decreased awareness, strength, motor planning dexterity and/or other sensory issues e.g. tactile defensiveness.
Requires some modification of the task or environment to complete successfully e.g. recommendations specified by occupational therapist, slope board, foot stool. May demonstrate resistance or opposition in response to challenging motor tasks.
Performs parts of fine motor activities with significant effort and limited success e.g. hand over hand assistance to draw/paint, use of assistive technology.
Can complete fine motor components of activities of daily living with substantial physical assistance e.g. pulling up pants, brushing hair/teeth, adapted cutlery placed in a student's hand. Avoids fine motor activities due to extreme tactile defensiveness. Occupational Therapy input and program needed to access class programs.
Has extremely limited fine motor and upper limb control for simple actions. Is unable to perform basic tasks e.g. grasp and release. Requires full physical assistance for fine motor components of activities of daily living including mealtimes, toileting, dressing. Occupational Therapy direction and program required to access class programs.

Glossary

Adjustment

According to the <u>Nationally Consistent Collection of Data on School Students with</u>
<u>Disability</u> an adjustment is defined as a planned intervention that is beyond what is typically employed by school staff to facilitate teaching and learning. Best practice teaching involves provision of differentiation (i.e. using a variety of teaching strategies) and adjustments for all students to achieve optimal results.

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Adjustments are provided when there is an assessed need at a specific time to complement the strategies and resources already available for all students within the school. These adjustments are designed to address the nature and impact of the student's disability, and any associated barriers to their learning, physical, communication or participatory needs.

Differentiation

According to Tomlinson (2001) to differentiate instruction is to be responsive to students' needs. This means differentiating the curriculum content, (what students learn), process (how students learn the content) and product (how students demonstrate their learning), based on students' interest, readiness to learn and learning preference. It is important that the learning environment is conducive to differentiated instruction.

Response to Intervention (RtI)

Response to Intervention (Rtl) is defined as the practice of providing high-quality instruction and interventions matched to student need, monitoring progress frequently to make decisions about changes in instruction or goals, and applying child response data to important educational decisions (Batsche et al., 2006).

Focused primarily on addressing academic problems, Rtl has emerged as the new way to think about both disability identification and early intervention assistance for the most vulnerable, academically unresponsive children in schools (Fuchs & Deshler, 2007).

Universal Design for Learning

<u>Universal Design for Learning</u> (UDL) is a set of principles for curriculum development that give all individuals equal opportunities to learn.

UDL provides a blueprint for creating instructional goals, methods, materials, and assessments that work for everyone--not a single, one-size-fits-all solution but rather flexible approaches that can be customized and adjusted for individual needs.

Web Links

Accountability and Performance Improvement Framework

Students with Disability - Australian Curriculum

Disability Discrimination Act (1992)

Disability Standards for Education (2005)

Nationally Consistent Collection of Data on School Students with Disability

NT Department of Education, Student Support iSupport

NT Department of Education Philosophy of Inclusion for Students with a Disability

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NT Department of Education Quality Teaching Practices

NT Department of Education Strategic Plan - Growing Success Together 2016-2018

NT Department of Education, Students with DisabilityPolicy (2016)

Guidelines Eligibility for the Special Education Support Program (SESP): See <u>Student Support SharePoint Site</u>, Level 3

Further Reading

Rigour and Universal Design for Learning (UDL)

Students with disability must be challenged to excel within the general curriculum and be prepared for success in their school and post-school lives.

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ACARA is committed to the development of high-quality curriculum for all Australian students which promotes excellence and equity in education. It acknowledges the <u>Disability Discrimination Act 1992</u> and the <u>Disability Standards for Education 2005</u>, and its obligation to support the rights of students with disability to participate in educational courses and programs on the same basis as students without disability (<u>ACARA 2013</u>).

All students with disability are entitled to **rigorous** and engaging learning programs drawn from a challenging curriculum that addresses their individual learning needs. The three-dimensional design of the Australian Curriculum (comprised of Learning Areas, General capabilities and Cross-curriculum priorities) provides teachers with the flexibility to cater for the diverse needs of students with disability across Australia and to personalise their learning (ACARA 2013).

Promotion of a culture based on high expectations for all students is fundamental to quality outcomes. In order for students with disability to meet high academic standards and to fully demonstrate their knowledge and skills pertaining to their learning, their instruction must incorporate adjustments and accommodations appropriate to their needs. Three tools that support teaching and learning for students with disability are listed below.

Principles of <u>Universal Design for Learning (UDL)</u> allows students the opportunities to learn within the framework of their curriculum. This approach fosters flexibility in:

- the ways that information is presented to students
- · how students respond or demonstrate their understanding of knowledge and skills
- types of student engagement which allows for diverse avenues of action and expression.

Incorporation of Hess' <u>Cognitive Rigor Matrix</u> that integrates both <u>Bloom's Taxonomy</u> and <u>Norman Webb's Depth of Knowledge</u> allows for measurement of rigour in both instruction and task performance.

Assistive technology devices and services enabling increased access to the curriculum

Response to Intervention (RtI)

<u>Response to Intervention (Rtl)</u> is the instruction/intervention practice that was originally conceived as an effective way of identifying students with additional learning needs. It primarily encompasses a multi-tiered approach with the provision of increasing levels of support.

An Rtl approach incorporates the following critical features:

- Prevention and intervention model based on the provision of early support at the first signs of not achieving to expected levels
- High quality, research-based instruction and intervention customized to the student's needs (not simply the provision of a program)
- Measurement procedures including:
 - universal screening 3 times per year
 - systematic and frequent progress monitoring to determine student's level and rate of response

- Provision of interventions with increasing intensity:
 - Tier 1 is quality instruction for all students that impacts every moment of the day
 - Tier **2** represents 10-15% of students offering daily instruction (30 minutes) with 3-5 students with progress monitoring administered every 2 weeks
 - Tier 3 represents 5-10% of students offering daily instruction twice per day (30 minutes) with 1-3 students with progress monitoring administered every week
- Evidence based decision-making
- Provision of information regarding special education eligibility.

RtI complements other initiatives that are already operating in schools, including that of UDL and differentiation. The goal of a differentiated classroom is to maximize student growth and individual success (Tomlinson & Allan, 2000, p. 4) by providing many avenues for students to acquire content, process information and ideas, and develop products. Emerging research demonstrates that differentiated instruction, when fully implemented, can significantly improve student achievement (Goddard & Goddard, 2007).

Successful outcomes of Rtl include:

- Use of evidence-based instruction
- · Embracing of prevention before failure
- Consideration of the needs of all children without assigning a label
- Support by research that shows multi-tiered models are effective educational practices for schools.

Education Adjustment Plan (EAP)

An EAP is developed to document appropriate adjustments to the curriculum by taking into consideration the needs of the learner; this includes skills needed to learn and access to the curriculum. Teachers are required to plan for the specific learning needs of all students, including students with disability, and to document educational adjustments for students who are identified as having significant educational support needs.

Reporting

Students who have an EAP will not receive an A-E report unless specifically requested by parents/guardians. For more information on reporting tools visit <u>Learning Links site</u>. http://www.education.nt.gov.au/parents-community/assessment-reporting/a-e-reporting

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