



Students at Educational Risk (SAER) Policy and Procedures

Updated April 2023

School Vision

An inclusive environment where every child is given the opportunity to thrive.

Belong Engage Excel

STUDENTS AT EDUCATIONAL RISK POLICY

RATIONALE

To provide a framework for staff to ensure students at educational risk are formally identified and provided with support to address their needs. This policy is created in accordance with the Department of Education *Students at Educational Risk Policy* and *Students at Educational Risk Procedures*.

PURPOSE

To ensure students at educational risk are identified, with their diversity of needs considered, assessed, and responded to, and their progress evaluated and reviewed. This ensures that students access differentiated learning opportunities to ensure equitable access to the Western Australian Curriculum.

LINKS TO THE BINDOON PRIMARY SCHOOL BUSINESS PLAN

The following strategies are relevant to our Business Plan 2024-2026.

1. Relationships and partnerships

- Continue to promote collaborative partnerships between staff, other schools, community and external agencies

2. Teaching quality

- Interrogate data regularly through the Elastik platform, to identify students' needs and inform targeted teaching plans

3. Student achievement and progress

- Engage staff in regular data analysis using the Elastik platform and standardised assessment tools
- Analyse assessment results to identify learning gaps and plan targeted teaching
- Provide students with effective feedback to progress learning
- Use the Multi-Tiered System of Support Model for intervention

4. Use of resources

- Align workforce planning and management practices with school context, student needs' and strategic direction of the school
- Prioritise resource allocation based on student performance

LINKS TO FOCUS 2024 and STRATEGIC DIRECTIONS OF THE DEPT. OF EDUCATION

The following strategic directions are relevant to this document.

5. Provide every student with a pathway to a successful future

Ensure all students are achieving year on year progress through evidence-based approaches.

6. Build the capability of our principals, our teachers, and our allied professionals

Understand what effective case management in schools is and enable all staff with student services responsibilities to meet this expectation.

7. Use evidence to drive decision-making at all levels of the system

Use available data and evidence to identify targeted support for students.

DEFINITION – 'STUDENTS AT EDUCATIONAL RISK'

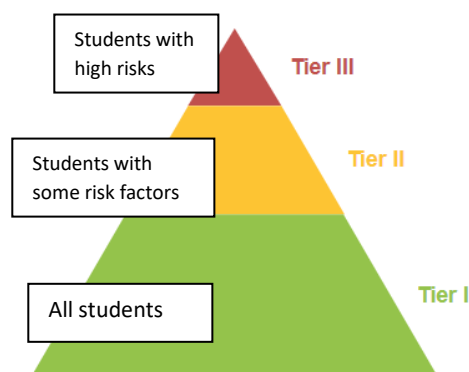
A 'Student at Educational Risk' is any student whose academic, social and/or emotional attributes are a barrier to engagement with the content and standards defined in the Western Australian Curriculum. Categories that assist in classifying Students at Educational Risk include, but are not limited to:

- Physical or medical needs (e.g. Diabetes, Cerebral Palsy)
- Cognitive needs (e.g. Intellectual Development Disorder, Specific Learning Disorder, Developmental Language Disorder)
- Sensory needs (e.g. hearing and vision impairments, sensory sensitivities)
- Social-emotional needs (e.g. Complex/Simple Childhood Trauma, those considered to be struggling or unwell on the Mental Health Continuum).

Students with or without a diagnosis may experience difficulties accessing the curriculum and therefore require additional support and personalised strategies to reach their individual academic potential.

MULTI-TIERED SYSTEMS OF SUPPORT MODEL (MTSS)

The MTSS model is used to describe different levels of support or intervention within our school. MTSS is characterised by three Tiers: Tier one, two and three. As students move through the framework's specific levels of prevention and intervention, their instructional programs become more intensive and more individualised to target their specific areas of learning or behavioural need.



TIER 1 – UNIVERSAL SUPPORT

Universal support includes the approaches implemented at the whole-school level that are provided to all students. This may include whole-school frameworks/practices/programs, culturally responsive approaches, and/or school policy and procedures. **Tier two and three interventions are only effective when Tier one universal interventions are strong.**

Here at Bindoon PS we:

- Employ a combination of approaches to increase protective factors and reduce risk factors influencing the educational, social and/or emotional development of students at risk. These include:
 - Quality Teaching Strategy
 - PATHS Social and Emotional Learning Program
 - Promoting Literacy Development (PLD)
 - Positive Behaviour Support (PBS)
- Monitor progress to ensure those who are not making the expected gains are provided with more targeted interventions to address their needs
- Have teaching and relevant support staff engage in professional learning so that they are able to identify and address the specific needs of their students
- Allocate available resources and engage appropriate agencies flexibly to support individuals and groups of students at risk.
- At Bindoon Primary School, we use a comprehensive range of assessment methods to collect quality data and information that can be used by teachers to monitor the progress of all their students, as well as report a child's progress to their parents. These may include:
 - Case management meetings with relevant stakeholders
 - School Psychologist reports
 - School and System assessment practices (*Assessment Schedule – Appendix A*)
 - Academic achievement data
 - Attendance data
 - Behaviour data
 - Work samples
 - Teacher assessment tasks
 - Health and Welfare assessments completed by interagency or department support services
 - Student self-assessment
 - Anecdotal data and reports from families
 - Anecdotal data and reports including observations by teachers and education assistants
 - Integris entries including activity notes, behaviour management etc.
 - Reporting to Parents Student Reports, which may include RTP SEN component
 - Parent meetings to share and review IEP targets and progress
 - Three-way conferences

TIER 2 – TARGETED SUPPORT

Focused or targeted interventions that support students who are at risk or have specific needs that were not being met by Tier 1 approaches, and require further academic, social, emotional, or behavioural support. This may be at the classroom level or group programs. This may include programs to support Aboriginal students, targeted social skills group lessons, group tutoring, and so on.

Here at Bindoon PS we:

- Have teaching staff provide the necessary teaching and learning adjustments and manage allocated resources to address the diverse needs of students at risk.
- Encourage teachers to consult with relevant school-based (Student Services Team) and external stakeholders when planning for students at risk.
- Ensure students achieving a D grade at their year level curriculum are having their needs met through quality differentiated practices (as defined by *NCCD adjustment descriptors – Appendix B*) within the classroom planning (e.g. PLD Stages, Cars and Stars Reading Groups). Examples of differentiating the curriculum can be seen in Appendix H.

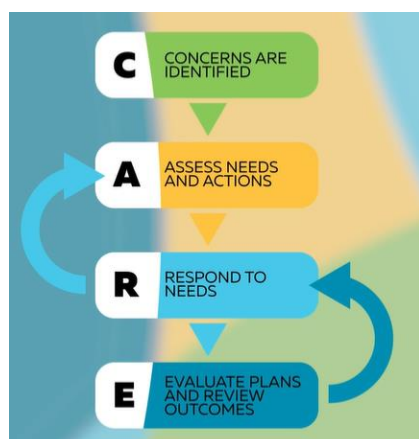
TIER 3 – INDIVIDUAL INTERVENTIONS

Intensive or Individual Interventions support students who have not had their needs met with Tier one or two supports and/or who have complex needs and require 'wrap-around' support. This involves case management and tailored support plans to meet student needs. This may include group or individual lessons.

Here at Bindoon PS we:

- Develop documented plans for all students who are receiving an Individual Disability Allocation.
- Ensure all students who are in care of Child Protection and Family Services (CPFS) either have a documented plan or a Children in Care Documented Coversheet (*Appendix C*).
- Develop documented plans for students identified as requiring substantial or extensive adjustments through NCCD (as defined by *NCCD adjustment descriptors – Appendix B*).
- Develop plans with ongoing absences.
- Develop behaviour plans for students with complex or challenging behaviours.

THE 'CARE' CASE MANAGEMENT MODEL



At Bindoon Primary School, we use a range of evidence-based procedures that enable the early identification of students who may be at educational risk. Monitoring student progress on a regular basis will identify students whose engagement, educational outcomes and rate of progress differ significantly from past performance or similar aged peers. We also value communication and collaboration with parents, caregivers, and external agencies to ensure that we are supporting all students to meet their personal capacity.

STUDENTS AT EDUCATIONAL RISK PROCEDURES

1. CONCERNS ARE IDENTIFIED

When concerns are identified, communication with the parents should be established to ensure information is shared between parties. A range of tools will be used to identify Students at Educational Risk and provide quality data. These may include:

- Enrolment/transfer information
- Attendance and behaviour data
- Classroom teacher observations and checklists
- Anecdotal information from families
- Educational, health or welfare assessments (e.g., school health nurse vision and hearing screen)
- Academic achievement data, such as On Entry, NAPLAN, Special Education Needs (SEN) Planning, Assessment and Reporting
- National Consistent Collection of Data (NCCD) and SAER profile
- Whole School Data Collection, including PAT assessments, Brightpath, PAT Maths, PLD
- PEAC testing – Year 4
- Kindergarten SOCS
- External agency/ Interagency referrals and reports
- Student History Form and information from parents
- Previous records – including Integrus activity notes, OSI (online student information)

2. ASSESS NEEDS AND ACTIONS

Data is collected and analysed from a range of sources to gain a deeper understanding of the student's needs. The assessment forms the basis upon which the plan of action is developed, and progress is monitored.

3. RESPOND TO NEEDS

Plans are developed in response to the students' identified needs. A student support plan may combine several plans into one concise document. Documented Plans may include but are not limited to:

- Individual/Group Education Plans (IEP/GEP)
- Individual Behaviour Support Plans (IBP)
- Individual Attendance Plan (IAP)
- Risk Management Plan (RMP)
- Medical Plans

At Bindoon Primary School, we develop plans each semester, or more often if appropriate. Plans are solution focused and utilise a strengths-based approach. Plans should include short term, measurable, achievable, realistic, and timely goals (SMART Goals – *Appendix D*). The plan and actions are clearly documented and signed by the teacher and parent. IEP/GEP should be developed using the SEN planning tool (*Appendix E*).

4. EVALUATE PLANS AND REVIEW OUTCOMES

Teacher's actions include:

- Ensure efficacy of the plan.
- Ensure agreed actions are completed.
- Monitor the student's progress and needs, using data.
- Meet with parents when new outcomes are selected.

Depending on progress, the case manager may decide:

- Further assessment and response planning is required.
- A longer timeframe is needed to meet the outcomes.
- To close the case in consultation with key stakeholders.

ROLES AND RESPONSIBILITIES

STUDENT SERVICES TEAM

The Student Services Team is responsible for managing and overseeing SAER processes and procedures. Not all students on the SAER profile require case management. Case management is the preferred approach for student requiring a higher level of coordination and care. Consideration may include:

- Need for support from additional services
- Complexity of presenting issues
- Risk of harm
- Interagency involvement

The Student Services Team includes:

- Principal (Student Services Coordinator)
- Deputy
- School Psychologist
- Learning Support Coordinator
- Chaplain
- Health Nurse

THE PRINCIPAL IS RESPONSIBLE FOR:

- Ensuring the implementation of the Students at Educational Risk Policy and Procedures.
- Establishing processes for the identification of students at educational risk.
- Ensuring that teaching staff provide the necessary teaching and learning adjustments and manage allocated resources to address the diverse needs of all students at risk.
- Confirm that teaching and relevant support staff engage in professional learning so that they can identify and address the specific needs of their students.

CASE MANAGERS ARE RESPONSIBLE FOR:

Case management requires quality assurance by a senior school staff member. At Bindoon PS, the Principal case manages our students considered to be at educational risk. The role of the case manager may include but is not limited to:

- Meeting with the student services team for the purpose of triage.
- Keeping an updated SAER profile (also used for NCCD purposes).
- Convening a case conference.
- Coordinating the development of documented plans.
- Referring the student to community support organisations.
- Coordinating the supports, services and resources needed to achieve the outcomes.
- Monitoring the quality of the services provided and progress towards achieving the outcomes.
- Overseeing any review or adjustments needed.
- Ensuring communication with stakeholders on a regular basis.
- Ensuring that duty of care and good recordkeeping processes are applied during all phases of the process.

TEACHERS ARE RESPONSIBLE FOR:

- Developing and delivering a quality curriculum, which is responsive to the individual needs of students at educational risk.
- Using performance data to identify students at educational risk.
- Utilising assessment and monitoring tools consistent with whole school procedures.
- Engaging in collaborative discussions with EAs involved in implementing and evaluating plans.
- Implementing negotiated teaching and learning adjustments.
- Liaising with the case manager on progress or difficulties.
- Attending case conferences to discuss progress with parents/caregivers and relevant professionals.
- Supporting with referral to therapy services.
- Supporting the completion of assessments requested by specialists.
- Maintaining recordkeeping (e.g. documented plans, meeting notes).
- Reporting the educational progress of students to parents.
- Communicating their own professional development requirements to assist in meeting the needs of students at educational risk.

EDUCATION ASSISTANTS ARE RESPONSIBLE FOR:

- Implementing documented plans as directed by teacher/case manager.
- Providing additional information and observations for teacher/case manager.
- Supporting students to work independently.

ADDITIONAL SERVICES

SCHOOL CHAPLAIN

The school accesses the services of a School Chaplain to support students with emotional/social or behavioural issues. Teachers and Student Services can refer students to the School Chaplain. The School Chaplain Service Agreement outlines the roles and support offered to the school.

SCHOOL PSYCHOLOGIST

The School Psychologist plays a key role in supporting our school and staff to achieve improved educational outcomes for our students. School Psychologists may work across all tiers of the Multi-Tiered Systems of Support (MTSS). Areas of work may include mental health, complex behaviour, learning difficulties, disability, and emergency and critical incident management. The School Psychologists Service Agreement outlines the roles and support offered to the school.

Requests for Assistance may be made by following the referral process (*Appendix F*) and completing the Student Services Request for Assistance Form (*Appendix G*). School Psychologists must also gain informed consent from the parent/guardian before engaging in any formal observations, consultations, and assessments. The School Psychologist may support the school in the following ways:

TIER 1 –

- Consultation and support for whole school Social Emotional Learning programs
- Psychoeducation/PL to staff/large groups of students
- Consultation and support to facilitate an inclusive education environment for all students
- Advise staff on policy and procedures
- Whole school program support (e.g., Positive Behaviour Support)
- Delivering parenting interventions to groups of parents (e.g., Positive Parenting Program)
- Postvention planning and support
- Responding to school needs during critical incidents
- Support schools in delivering professional learning on evidence based programs or approaches

TIER 2 –

- Consultation and support in classroom planning (e.g. adjustments to instruction, environment)
- Group counselling
- Classroom or small group psychoeducation programs
- Supporting school with child protection concerns
- Consultation regarding evidence-based learning support programs
- Assist in the identification of SAER students
- Upskill staff to collect data and complete FBA's and escalation profiles
- Consultation to identify and support students at risk of non-attendance
- Participate in case-conferences where appropriate

TIER 3 –

- Individual counselling support
- Standardised assessment
- Referral and liaison with external services/care providers
- Conduct Suicide Risk Assessments
- Support and/or development of Risk Management Plans and Safety Plans
- Consultation for Gatekeeper trained staff
- Conduct assessments for the purpose of supporting educational planning
- Assist in the development of documented plans in collaboration with relevant staff, parents, and students
- Consultation on Disability Resourcing Applications
- Assist with Functional behaviour Assessment and escalation profile planning

WHAT TO INCLUDE IN THE REFERRAL TO THE SCHOOL PSYCHOLOGIST

When referring to the school psychologist, please include information that may be relevant to the referral reason, and documentation which shows strategies implemented and the students response to strategies/intervention. This information is crucial and supports a school psychologist to work in a timely and effective manner and also provides useful information that may support diagnostic processes. Please consider including the below information in your referral:

REFERRAL REASON (Supporting Evidence)	ACTIONS/STRATEGIES IMPLEMENTED TO DATE:	RESPONSE TO INTERVENTION
<p>Frequency/Intensity of behaviour data</p> <p>Functional Behaviour Assessment (information on setting, triggers, consequences)</p> <p>Academic data – NAPLAN results, observational information, diagnostic test results</p> <p>OSI data (attendance, behaviour records, ABE records)</p> <p>Most recent reports</p>	<p>Documented plans</p> <p>Evidence-based whole class and small group interventions</p> <p>SEL program information</p> <p>Escalation profiles</p>	<p>Tracking data indicating frequency/intensity of behaviours following implementation of strategies</p> <p>Tracking data showing progress in academic intervention.</p> <p>Reviewed copy of IEP</p>

CASE CONFERENCES

Case conferences are an important part of the process for students who are being case managed. In a case conference:

- The case manager, teacher, school psychologist (if involved) and parent/carers attend.
- Teachers are to share current successes and concerns. Data and documented plans provide evidence.
- Engage the family in discussion about their successes and needs.
- Discuss what is working well, what could be improved.
- Attain an update about external supports and/or organisations involved.
- Document the student's needs and planned actions moving forward using the Case Conference Proforma (*Appendix I*).
- All parties are to receive a signed copy of the case conference notes and a copy is to be placed on the student's file.

Appendices

Appendix A- Assessment Schedule

Appendix B- NCCD Adjustment Descriptors

Appendix C- Children in Care Documented Coversheet

Appendix D- SMART Goals

Appendix E- SEN Planning Tool

Appendix F- SAER Referral Process

Appendix G- Student Services Request for Assistance Form

Appendix H- Differentiating the Curriculum

Appendix I – Case Conference proforma

Appendix A



Bindoon Primary School - Assessment Schedule 2024

	Term 1								Term 2								Term 3								Term 4							
	Assessment completed by end of week:								Assessment completed by end of week:								Assessment completed by end of week:								Assessment completed by end of week:							
Assessment	K	PP	1	2	3	4	5	6	K	PP	1	2	3	4	5	6	K	PP	1	2	3	4	5	6	K	PP	1	2	3	4	5	6
ENGLISH																																
Phonics Initiative Assessment (DOE)										6																						
CARS & STARS Placement Tests / Final Assessments		3	3	3	3	3	3	3																		5	5	5	5	5	5	5
Screen of Communication Skill (SOCS)	6															6																
PLD Early Years Pre-Literacy Screen (Wk 10 only if <80% in Wk 6)	6+ 10								6+ 10							6+ 10									6+ 10							
PLD Foundation Pre-Reading and Pre-Spelling Screen		6+ 10																														
PLD Foundation Early Reading Screen									6+ 10								6+ 10								6+ 10							
PLD Foundation Spelling Screen									6+ 10								6+ 10								6+ 10							
PLD Spelling Placement Screen			1+ 10	1+ 10	1+ 10	1+ 10	1+ 10	1+ 10			10	10	10	10	10	10			10	10	10	10	10	10			7	7	7	7	7	7
PLD Early Reading Screen (Yr 3 to 6 - students in Stage 1or2 Spelling)			2	2	2+ 10	2+ 10	2+ 10	2+ 10			2	2	10	10	10	10			2	2	10	10	10	10			2	2	7	7	7	7
Burt Reading Vocab					7	7	7	7																				7	7	7	7	
Little Learners Love Literacy (LLLL)									6	6	6														6	6	6					

Assessment	K	PP	1	2	3	4	5	6	K	PP	1	2	3	4	5	6	K	PP	1	2	3	4	5	6
Fluency Assessment													6	6	6	6								
Brightpath Writing (PP-6 Narrative Sem 1 and Sem 2)									8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
PAT Early Years Reading																				3				
PAT Reading																					3	3	3	3
PAT Grammar & Punctuation																						3	3	3
LITERACY/NUMERACY																								
On Entry Assessment		6																						
NAPLAN				7/8		7/8																		
MATHEMATICS																								
PAT Early Years Maths																				3	3			
PAT Maths																						3	3	3
Basic Facts			3	3	3	3	3	3												5	5	5	5	5
SOCIAL/EMOTIONAL																								
National Opinion Survey																								
PRIMARY EXTENSION																								
PEAC Testing												4												

^ Odd years

Appendix B



NCCCD
NATIONALLY CONSISTENT COLLECTION OF DATA
ON SCHOOL STUDENTS WITH DISABILITY

Selecting the level of adjustment

The collection of data for the Nationally Consistent Collection of Data on School Students with Disability (NCCCD) is based on the professional judgement of teachers and school teams about the adjustments provided for students as part of day to day practice. Adjustments are actions taken to enable a student with disability to access and participate in education on the same basis as other students. When schools are determining the inclusion of a student in the data collection, teachers consider:

- the level of adjustment provided to a student to address a disability as defined under the *Disability Discrimination Act 1992 (DDA)*
- the broad disability category and
- the available evidence of the adjustment that has been made on the basis of a disability.

The evidence will reflect a wide range of practices of teachers and schools in meeting the educational needs of their students consistent with obligations under the DDA, the Disability Standards for Education 2005 and best teaching practice.

For a student to be included in the NCCCD, the school must have evidence that adjustments have been provided for a minimum period of 10 weeks of school education (excluding school holiday periods), in the 12 months preceding the census day. The minimum 10-week period does not need to be consecutive. It can be cumulative and split across school terms in the 12 months preceding the census day.

School principals are responsible for verifying or confirming that there is evidence at the school to support the inclusion of a student in the data collection and reporting levels of adjustment and category of disability. In keeping with best practice, schools should retain relevant evidence of their provisions for students at the school.

Schools are encouraged to consider and discuss the types of evidence available in their setting to support their judgements about the inclusion of students in the data collection.

Schools and teachers make adjustments and provide support for a range of students. Not all adjustments are included in the NCCCD.

Educational adjustments made solely for reasons other than disability, for example disadvantage (due to disrupted schooling and/or poverty), are not included in the NCCCD.

Students with a disability that has no functional impact on a student's education should not be included in the NCCCD (for example, students who wear corrective lenses due to mild vision impairment).


Level of adjustment descriptors	Support provided within quality differentiated teaching practice	Supplementary adjustments	Substantial adjustments	Extensive adjustments
	<p>Students with disability are supported through active monitoring and adjustments that are not greater than those used to meet the needs of diverse learners. These adjustments are provided through usual school processes, without drawing on additional resources, and by meeting proficient-level Teaching Standards (ATS).</p> <p>Adjustments are made infrequently as occasional action, or frequently as low level action such as monitoring. These adjustments may include:</p> <ul style="list-style-type: none">• explicit, minor adjustments, including targeted or differentiated teaching, assessments or activities• specific and relevant teaching strategies to support targeted areas of communication• active monitoring and supervision, meeting health, personal care and safety requirements through usual school processes• enabling access to learning through usual school processes (e.g. through a differentiated approach to teaching and learning) and existing facilities (e.g. existing modifications to buildings and learning environments). <p>Students with a medical condition whose learning and support needs are met through usual processes (e.g. whole-school professional learning) and active monitoring by school staff are included in this category. These students may have a plan in place to support monitoring of their condition. Their identified needs would be subject to close monitoring and review.</p>	<p>Students with disability are provided with adjustments that are supplementary to the strategies and resources already available for all students within the school.</p> <p>Adjustments occur for particular activities at specific times throughout the week and may include:</p> <ul style="list-style-type: none">• adapted and additional instruction in some or many learning areas or specific activities• personalised and explicit instruction to support one or more areas of communication• planned health, personal care and/or safety support, in addition to active monitoring and supervision• adjustments to enable access to learning may include:<ul style="list-style-type: none">- specialised technology- support or close supervision to enable participation in activities or the playground.- modifications or support to ensure full access to buildings and facilities.	<p>Students with disability who have more substantial support needs are provided with essential adjustments and considerable adult assistance.</p> <p>Adjustments to the usual educational program occur at most times on most days and may include:</p> <ul style="list-style-type: none">• additional support or individualised instruction in a highly structured manner, including adjustments to most courses, curriculum areas, activities and assessments• personalised and explicit instruction to support one or more areas of communication• planned health, personal care and/or safety support or intervention, in addition to active monitoring and supervision• adjustments to enable access to learning may include:<ul style="list-style-type: none">- specialised equipment- specific planning for access to activities or facilities- closely monitored playground supervision- modification to school environments, such as buildings and facilities- environmental adjustments to support participation in learning- provision of specialist advice on a regular basis- support from specialist staff.	<p>Students with disability and very high support needs are provided with extensive targeted measures and sustained levels of intensive support. These adjustments are highly individualised, comprehensive and ongoing.</p> <p>Adjustments to the regular educational program occur at all times and may include:</p> <ul style="list-style-type: none">• intensive, individualised instruction or support in a highly structured or specialised manner for all courses and curricula, activities and assessments• intensive, individualised instruction to support multiple areas of communication• planned, highly specialised and/or intensive health, personal care and/or safety support or intervention• enabling access to learning through:<ul style="list-style-type: none">- specialised equipment- highly modified classroom and/or school environments- extensive support from specialist staff.

Information to support levels of adjustment descriptors				
Support provided within quality differentiated teaching practice	Supplementary adjustments	Substantial adjustments	Extensive adjustments	
<p>Quality differentiated teaching practice caters to the needs of a diverse student population. Students at this level do not require the adjustments that are captured in the other three levels.</p> <p>Adjustments at this level generally:</p> <ul style="list-style-type: none"> • are explicit, albeit minor, adjustments to teaching and school practice that enable students with disability to access learning on the same basis as their peers • have been made in a school as part of developing or maintaining a culture of inclusion. <p>Specific examples of adjustments at this level could include:</p> <ul style="list-style-type: none"> • adjustments to teaching and learning, such as: <ul style="list-style-type: none"> - a differentiated approach to curriculum delivery and assessment that anticipates and responds to students' learning differences - personalised learning that is implemented without drawing on additional resources • adjustments to enable access to learning, such as: <ul style="list-style-type: none"> - whole-school professional learning for the management of medical conditions such as asthma, diabetes or anaphylaxis that require active monitoring. This forms part of a school's general, ongoing practice to equip teachers and education staff with the skills and knowledge to support students' health need - building modifications that already exist in the school and cater for a student's physical disability where no additional action is required to support the student's learning. 	<p>Specific examples of adjustments at this level could include:</p> <ul style="list-style-type: none"> • adjustments to teaching and learning, such as: <ul style="list-style-type: none"> - modified or tailored programs in some or many learning areas - modified instruction using a structured task-analysis approach - separate supervision or extra time to complete assessment tasks • the provision of course materials in accessible forms • programs or interventions to address the student's social/emotional needs • adjustments to enable access to learning, such as: <ul style="list-style-type: none"> - the provision of intermittent specialist teacher support - specialised technology - modifications to ensure full access to buildings and facilities - support or close supervision to participate in out-of-school activities or the playground - provision of a support service that is provided by the education authority or sector, or that the school has sourced from an external agency. 	<p>Adjustments at this level generally:</p> <ul style="list-style-type: none"> • are considerable in extent • occur within highly structured situations. <p>Specific examples of adjustments at this level could include:</p> <ul style="list-style-type: none"> • frequent (teacher directed) individual instruction • access to bridging programs • adapted assessment procedures (e.g. assessment tasks that significantly adjust content and/or the outcomes being assessed) • regular direct support • adjustments to support communication, such as: <ul style="list-style-type: none"> - adjustments to delivery modes - significantly modified study materials • adapted assessment procedures (e.g. assessment tasks that significantly adjust mode of presentation and format) • adjustments to support health, personal care or safety, such as: <ul style="list-style-type: none"> - frequent assistance with mobility and personal hygiene - close supervision in highly structured situations - the provision of additional supervision on a regular basis • adjustments to enable access to learning, such as: <ul style="list-style-type: none"> - close playground supervision may be required at all times - regular visiting teacher or external agency support - access to a specialised support setting - essential specialised support services for use of technical aids. 	<p>Specific examples of adjustments at this level could include:</p> <ul style="list-style-type: none"> • adjustments to teaching and learning, such as: <ul style="list-style-type: none"> - personalised modifications to all courses and programs, school activities and assessment procedures - intensive individual instruction - highly individualised learning programs and courses using selected curriculum content tailored to their needs - learning activities specifically designed for the student - the provision of highly structured approaches • adjustments to support communication, such as: <ul style="list-style-type: none"> - provision of much more accessible and relevant curriculum options • the use of alternative communication modes • adjustments to enable access to learning, such as: <ul style="list-style-type: none"> - constant and vigilant supervision - extensive support from specialist staff; the use of highly specialised assistive technology - the use of technical aids. <p>Some students may receive their education in highly specialised facilities.</p>	
<p>Through support provided within quality differentiated teaching practice, a student is able to participate in courses and programs at the school and use the facilities and services available to all students, on the same basis as students without a disability.</p> <p>Examples might include:</p> <ul style="list-style-type: none"> • students with medical conditions, such as asthma, diabetes and anaphylaxis, that have a functional impact on their schooling, but whose disability-related needs are being addressed through quality differentiated teaching practice and active monitoring • a student with a mental health condition who has strategies in place to manage the condition in consultation with medical professionals, that can be provided within quality differentiated teaching practice • a student with a medical condition or a mental health condition that has a functional impact on their schooling and requires ongoing monitoring but who does not require a higher level of support or adjustment during the period they are being considered for the data collection • a student who has been provided with a higher level of adjustment in the past or may require a higher level of adjustment in their future schooling. 	<p>Students at this level often require support in accessing the curriculum at the appropriate year level (i.e. the outcomes and content of usual learning programs or courses).</p> <p>Examples might include:</p> <ul style="list-style-type: none"> • students who have particular difficulty acquiring new concepts and skills outside a highly structured environment. <p>The needs of some students at this level may be related to their personal care, communication, safety, social interaction or mobility, or to physical access issues, any of which may limit their capacity to participate effectively in the full life of their school.</p>	<p>Examples might include:</p> <ul style="list-style-type: none"> • students who require curriculum content at a different year level to their same-age peers • students who will only acquire new concepts and skills, or access some of the outcomes and content of the usual learning program, courses or subjects, when significant curriculum adjustments are made to address their learning needs • students who have limited capacity to communicate effectively • students who need regular support with personal hygiene and movement around the school. <p>These students may also have considerable, often associated support needs, relating to their personal care, safety, self-regulation or social interaction, which also impact significantly on their participation and learning.</p>	<p>Students at this level may be dependent on adult support to participate effectively in most aspects of their school program.</p> <p>Without highly intensive intervention, these students may otherwise not access or participate effectively in schooling.</p> <p>Many students at this level will have been identified at a very young age and may also:</p> <ul style="list-style-type: none"> • have complex, associated support needs with regard to their personal care and hygiene, medical conditions and mobility • use an augmentative communication system • have particular support needs when presented with new concepts and skills. 	



Appendix C

Documented education plan for children in care coversheet

 <p>Department of Education</p>	<p>Date of document: <input type="text"/></p> <p>Student name: <input type="text"/></p> <p>DOB: <input type="text"/></p> <p>Year level: <input type="text"/></p> <p>School: <input type="text"/></p> <p>Diagnosed disability: <input type="checkbox"/></p>	<p>Principal/deputy: <input type="checkbox"/></p> <p>Teacher: <input type="checkbox"/></p> <p>Child protection worker: <input type="checkbox"/></p> <p>Carer(s): <input type="checkbox"/></p> <p>Other: <input type="checkbox"/></p> <p>(Please indicate who was consulted)</p>
Planning		
<p>Academic</p> <p><input type="checkbox"/> There are no current concerns relating to the student's learning needs. Individual teaching and learning adjustments are not required at this time.</p> <p><input type="checkbox"/> The student requires curriculum adjustments and an individual plan is necessary (see attached)**.</p> <p>Scheduled review date: <input type="text"/></p>	<p>Wellbeing (For example: attendance; social skills/relationships; behaviour)</p> <p><input type="checkbox"/> There are no current concerns relating to the student's wellbeing. Individualised strategies are not required at this time.</p> <p><input type="checkbox"/> The student requires adjustments to meet their personal and/or social needs. An individual plan is necessary (see attached)**.</p>	<p>Signed by principal/principal's nominee <input type="text"/> Date: <input type="text"/></p>

* This document is to be forwarded to the Department of Communities, Child Protection and Family Support (CPFS) as required under the *Memorandum of Understanding between the Department for Child Protection and Family Support and the Department of Education 2013*

** An individual documented education plan must be attached and forwarded to the child protection worker.

For further information see: kon.education.wa.edu.au/-/support-education-planning-for-children-in-care

Appendix D

Establishing SMART goals

When developing individual and group intervention plans, we need to use short term (e.g. 5 week) SMART goals.



1. Get Specific

Being specific with goals drives achievement because what you or your student want to achieve is spelled out exactly. The more precisely you state the goal, the more likely the student will end up where you and they want to be.

2. Measure

Use commencement point, dates, times of day, and other tangible mark points to identify your end goal and track your progress along the way. That way when you meet your goal, you will know exactly what you have achieved.

3. Focus on the Achievable

When setting SMART goals, or any other kind of goal, be sure you are making demands of the student within a real framework. Your goals need to be realistically achievable in order to truly attainable. Do not set low benchmarks, but be aware of limitations when you set the goals.

4. Stay Relevant

To be relevant, goals need to correspond with the direction you want the student to move. Identify what is the most important to you and the student, and ensure that your goals align to those priorities.

5. Use Time Boundaries

Like the measurement aspect, having time bound goals is another way to mark off progress and realise success. Without a timeframe, you have no real way of measuring progress, but the deadlines do need to be flexible and take into account student variables over which you may have little or no control.

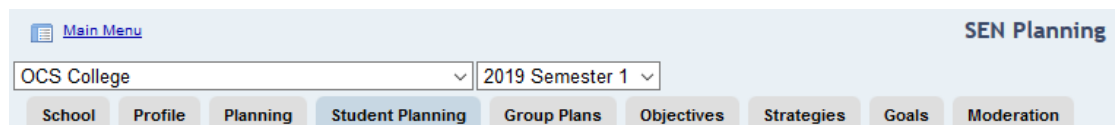
Appendix E

SEN Planning

The SEN Planning function allows teachers and school administrators to create education plans for students with special education needs.

- Individual Education Plans
- Group Education Plans

Select SEN Planning from the Reporting to Parents Main Menu



Tab Descriptions

School tab: School level aggregated data of students with NCCD levels of adjustment that allow comparison with state and like school data.

Profile tab: The level of NCCD adjustment for students at the school. Includes NAPLAN data and attendance.

Planning tab: A curriculum planning screen linked to the Western Australian Curriculum content descriptors, including ABLEWA content. SEN plans can be developed in this window.

Students Planning tab: Management of student individual learning plans. SEN plans can also be developed in this window.

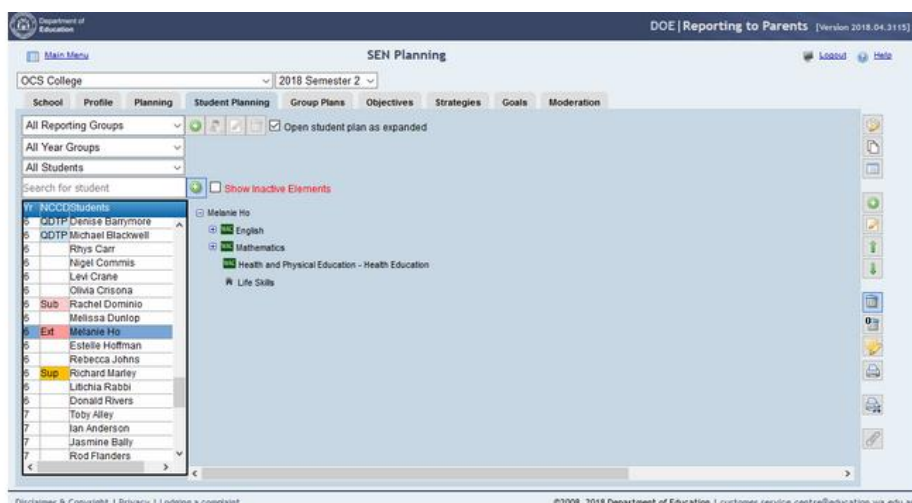
Group Plans tab: Create Education Plans that can be applied to groups of students and saved for future use.

Objectives tab: Manage a bank of common objectives/goals that can be organised and linked to specific Learning Areas, Outcomes/Strands and Aspects of your SEN curriculum.

Strategies tab: Manage a bank of common strategies that can be organised and linked to specific Learning Areas, Outcomes/Strands and Aspects of your SEN curriculum. System strategies based on ABLEWA strategies.

Goals tab: A tool to manage teacher and school goals linked to Western Australian Curriculum content descriptors.

Moderation tab: A tool to assist with the annual moderation of the NCCD level of adjustment assigned to students.



Example of Plan created in SEN Planning



BINDOON PRIMARY SCHOOL

Documented Plan
Semester 1 2023

Student: Leyton Ervine-Faulkner	D.O.B: 23 October 2013	Gender: Male
Teacher(s): Miss A. Evans	Year Group: Year 4	Start Date: 1 February 2023

Profile/Background		
ENGLISH	STRATEGIES	REVIEW / COMMENTS
Reading and Viewing		
<p>Understand how to use knowledge of digraphs, long vowels, blends and silent letters to spell one and two syllable words including some compound words</p> <p>Goals</p> <ul style="list-style-type: none"> By the end of Term 2, Leyton will be able to recognise, with 80% accuracy, Stage 1 Phase 2 and 3 sounds. 	<p>Student to work with teacher or EA 3 days a week to go through flash cards based on PLD phase 2 and 3 sounds. Student to be placed in intervention group focusing on PLD Stage 1 words.</p> <p>EA/ Teacher support to explicitly sound out phonemes when writing down a word.</p> <p>Students to work through reading Year 1 PLD high frequency word lists.</p>	
<p>Use comprehension strategies to build literal and inferred meaning and begin to evaluate texts by drawing on a growing knowledge of context, text structures and language features</p> <p>Goals</p> <ul style="list-style-type: none"> By the end of Semester One, Leyton will answer literal and inferential questions using a range of comprehension strategies with 80% accuracy. 	<p>Provide Leyton with Decodable texts with comprehension questions to take home and read on a daily basis, aligning closely with PLD focus sounds.</p> <p>Teacher to allow time in the morning literacy block, 3 times a week, for Leyton to engage in daily reading.</p> <p>During the daily reading activity, teacher is to check for student comprehension by getting Leyton to read the book and re-tell the information he has just heard.</p> <p>Leyton is to be provided with the opportunity to read him texts and answer simple literal and inferential questions.</p> <p>Students reading level to be differentiated in CARS and STARS and EA/ Teacher are to check in with Leyton when independent learning is being completed on the program to ensure he fully understands the task.</p> <p>Student progress to be monitored on CARS and STARS.</p>	

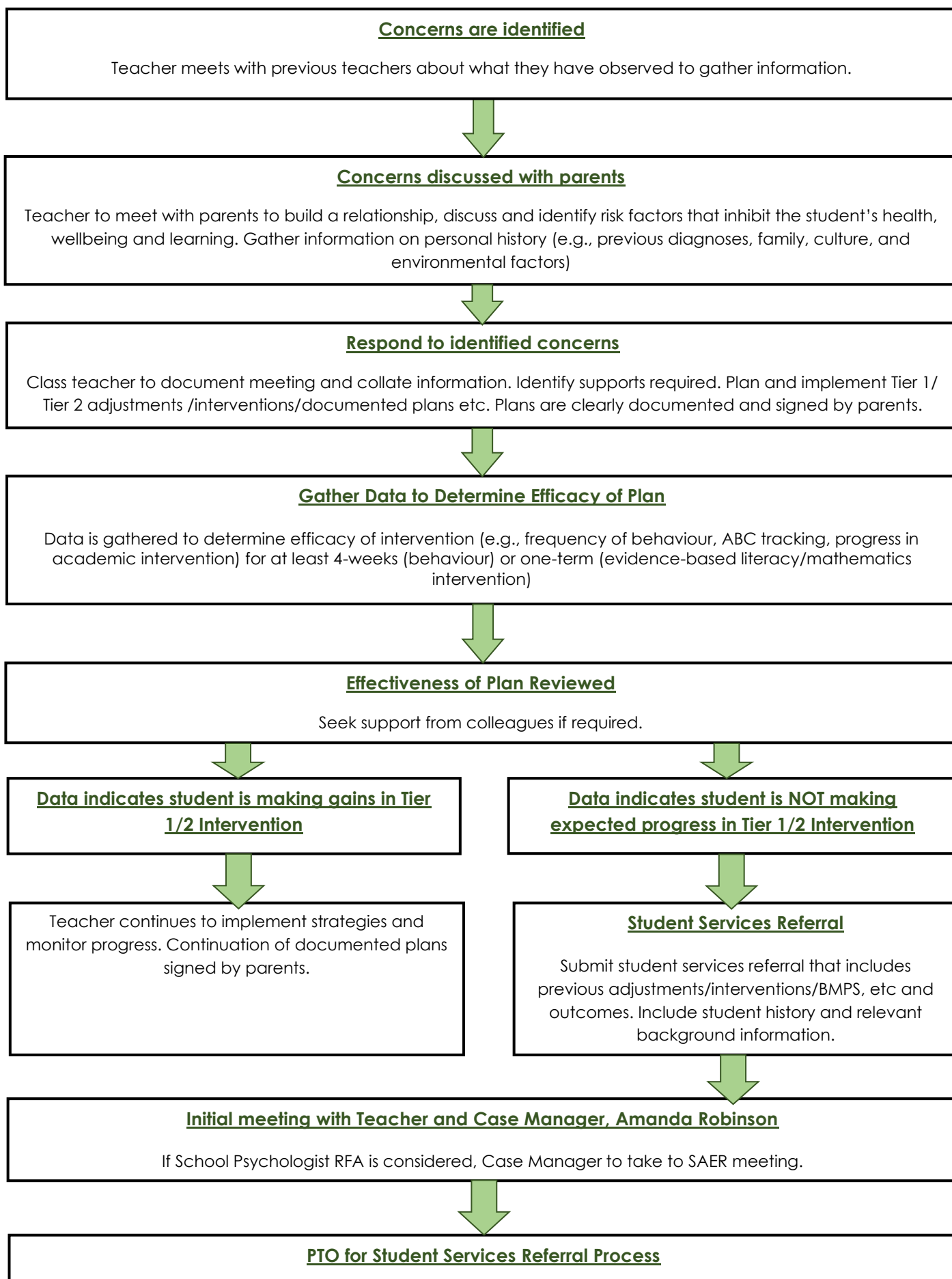
Example of a SEN Report

Plans can be used to create SEN reports for students, which provide additional information to parents about student progress

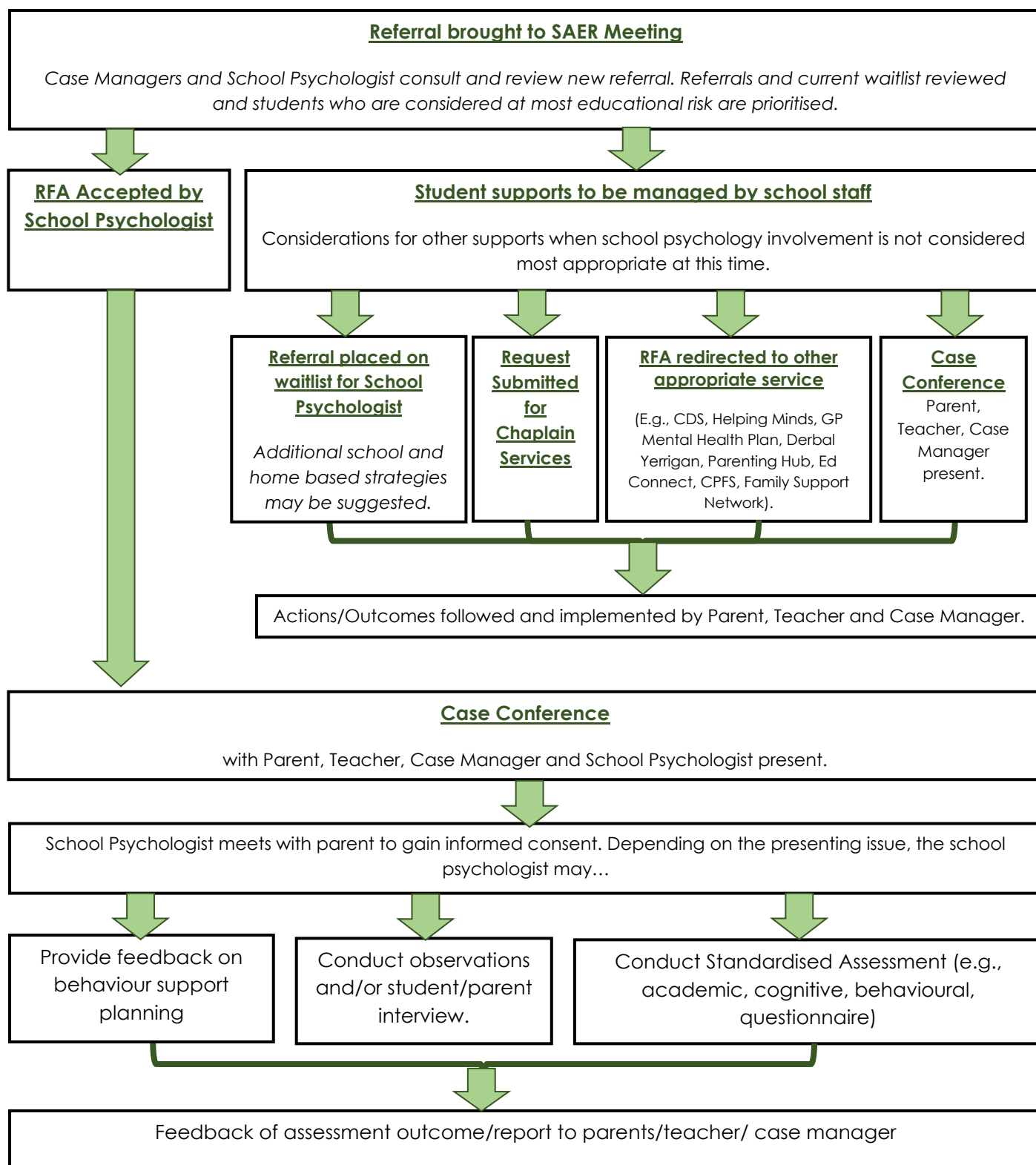
English		Developing
Reading and Viewing		
Dev	Ella will instantly recognise the lower case letters "s, a, t, p, i, n, m, r, h e" by saying their sounds with 85% accuracy when assessed using the PLD Foundation Literacy Screen at the end of term 4.	
Dev	Ella will accurately blend onset & rime (2 sound units) and three phonemes (3 sound units) with 85% accuracy when assessed using the PLD Foundation Literacy Screen at the end of term 4.	
Writing		
NAch	Ella will segment CVC words into their beginning, medial and final sounds with 85% accuracy when assessed using the PLD Foundation Literacy Screen at the end of term 4.	
Dev	Ella will correctly write the letters s,a,t, p, i, n, m, r, h, e, c and the numbers 1,2,3, 4, 5, 6,7, 8, 9, 10 correctly 85% of the time when assessed at the end of term 4	
Comment		
Ella has been learning the sounds for the letters of the alphabet. She can identify all the sounds along with the associated word-picture cue. Ella's phonics goal next year will be to continue this, so she is able to remember the letter sounds without picture cues. Ella can now blend and segment some words at the onset-rime level. She will require continued focus on this next year along with 3-sounded words. Ella is able to correctly form the letters c, i, a, t, and s independently and can write some others with oral and visual prompts.		

Appendix F

Classroom Teacher SAER Process



Student Services Referral Process





STUDENT SERVICES REQUEST FOR ASSISTANCE FORM

Student Name:			Year Level:		Teacher:			Date:	
Please indicate area/s of concern:									
Academic/ Cognitive		Behaviour		Social/Emotional Mental Health		Physical/Sensory		Attendance	
Has student been referred to:									
Speech		OT		Vision/Hearing		Other		Paediatrician	
Date of Parent Contact: __/__/__					If referred to Paediatrician please indicate date of upcoming appointment __/__/__				
Parent has been informed that the school psychologist may be consulted on this referral, and has agreed for this request of assistance to be made. Yes <input type="checkbox"/> If "NO", please indicate reason:									
Reason for Referral: State observable behaviours and detail how concerns effect the students learning. Attach all relevant information (see page 10 of this document for information that should be included).									
Actions/Strategies Implemented to Date: (e.g., documented plans, evidence based whole class & small group intervention, SEL program, escalation profiles, Functional Behaviour Assessment).									
Response to Intervention: Outline what the student has and has not responded to. Attach all relevant information (see page 8)									

<i>To be completed by Student Services Team –</i>			
Date referral received:			
Student Name:	Year Level:	Teacher:	
Data tabled at Student Services Meeting:			
Meeting scheduled with teacher on		at	Outlook invite sent
Outcome/s of meeting:			
Follow up meeting scheduled with teacher on		at	Outlook invite sent
Outcome/s of follow up meeting:			
COMPLETED BY SCHOOL PSYCHOLOGIST (ONLY COMPLETED IF OUTCOME OF MEETING INDICATED THAT REFERRAL WILL BE PROVIDED TO THE SCHOOL PSYCHOLOGIST).			
Name:		Signed:	
Date request received __ / __ / __		RFA Accepted <input type="checkbox"/> RFA Not Accepted <input type="checkbox"/>	
A WRITTEN EXPLANATION WAS PROVIDED TO THE SCHOOL, ALONG WITH THIS FORM DETAILING WHY THE RFA WAS NOT ACCEPTED. DATE RETURNED TO SCHOOL: __ / __ / __			

Appendix H

Differentiating the Curriculum: a framework for planning

C	Curriculum Content: the curriculum to be studied may be increased in terms of depth and complexity. Aspects of the curriculum may be sequenced in smaller chunks and presented in smaller steps to the outcomes.	
A	Activities: varied difficulty level of the tasks and activities in the lesson.	
R	Resources: selection and/or creation of variety of different texts and support materials for students.	
P	Products from the Lesson: teachers may plan for students to produce different outputs from a lesson, according to the individual's abilities, interests and aptitudes.	
E	Environment: classroom might be set up to support more group or individualized work (work centres, computer assisted, resource-based, peer tutoring).	
T	Teaching Strategies: adopt particular ways of teaching designed to address the needs of the students (explicit, direct form or instruction, differentiated questioning, revising, practicing, prompting, cueing, individual contracts etc).	
P	Pace: vary the rate at which the teaching takes place, or the rate at which the students are required to work and produce outputs.	
A	Amount of Assistance: vary the amount of assistance or help given to individuals during a lesson. May encourage peer assistance and collaboration.	
T	Testing & Grading: vary the ways of assessing students learning and modify grading to reflect effort and originality as well as standard achieved.	
C	Classroom Grouping: various ways of grouping students within the class to allow for different activities to take place with different amounts of teacher direction.	
H	Homework Assignment: some students may have homework that involves additional practice at the same level of difficulty, while others may require application of knowledge and extension.	

Sign: _____