



# education

---

Department:  
Education  
**REPUBLIC OF SOUTH AFRICA**

## DRAFT NATIONAL STRATEGY ON SCREENING, IDENTIFICATION, ASSESSMENT AND SUPPORT

**MAY 2005**

**YOUR CONSTRUCTIVE INPUTS TO THIS DRAFT STRATEGY WILL BE APPRECIATED**

DRAFT NATIONAL STRATEGY ON SCREENING, IDENTIFICATION, ASSESSMENT  
AND SUPPORT

---

**2005**

Directorate Inclusive Education  
Sol Plaatje House  
Schoeman Street, Pretoria  
Contact Person: Mrs Marie Schoeman  
(012) 312 5197  
Fax (012) 312 5029

# Preamble

## **Purpose of the Strategy**

This document is a response to the mandate given in Education White Paper 6 that one of the key levers for establishing an inclusive education and training system is to overhaul the process of identifying, assessing and enrolling learners in special schools and its replacement by one that acknowledges the central role played by educators and parents (Education White Paper 6, p.7).

It should be seen as a guidelines and protocol document for the implementation of the new policy.

The strategy targets all learners in urban or rural settings who need support and not only learners with disabilities. Specifically learners from the poorest communities, whether they be in townships, informal settlements or rural areas, must benefit from the procedures outlined in the strategy as they have traditionally suffered most from the unavailability of and lack of access to services.

As the Revised National Curriculum Statement fundamentally makes provision for support and the necessary flexibility to accommodate all learners in inclusive settings, the procedures introduced by the strategy are meant to further enhance all teaching and learning practice.

The strategy outlines the roles of teachers, parents, managers and support staff within the framework of a completely new vision of how support should be organised.

Current inequitable and exclusionary practices associated with assessment will be addressed head on so as to ensure that all learners are eligible to support within an integrated education system.

## The current situation

A critical evaluation of how learners are currently being identified and assessed for additional support provision reveals the following challenges that would have to be addressed if we are to improve conditions for all children in the country:

- Legislative discrepancies in terms of how learners should be admitted to special settings – the South African Schools Act outrules testing for admission purposes, but the current organisation of special schools according to category of disability, still leads to contravention of the act.
- Widespread and iniquitous use of norm-referenced psychometric tests that are culturally biased.
- Lack of involvement of parents and learners in the assessment process.
- Lack of transparency in the assessment process.
- Limited access to specialised support staff for learners in poor and rural environments.
- Lack of inter-departmental coordination of early intervention services for children between 0 and 5 years.
- Limited access to special services or facilities (special schools are not always within reach of poor communities) leads to a situation where children who have been assessed and identified to be in need of additional support are being marginalized and excluded rather than supported in current mainstream settings – especially those in deep rural areas.
- Cost-ineffective and inappropriate application of the expertise of specialised support staff such as psychologists and therapists working within the system.
- Disjuncture between practices of support staff appointed within the system and those who are in private practice.
- In spite of the fact that the Revised National Curriculum Statement is flexible enough to accommodate all learners, the current assessment and referral system leads to a situation where learners who experience barriers to learning are excluded from access to this curriculum.
- Entrenchment of the current inequitable funding situation through inappropriate assessment procedures and lack of control of who accesses special schools.
- Assessment practices which prevent learners with severe and multiple disabilities from being admitted to special schools.

- Assessment practices which encourage learners with mild and moderate support needs to be referred to special settings whereas they could quite easily have been accommodated in their local neighbourhood schools.
- Assessment practices which fail to outline the nature and level of support needed so that it can be funded appropriately and in the most cost-effective way.
- Poor screening and identification of basic needs such as the need for assistive devices and psycho-social support and lack of tracking and follow up once needs have been identified.

This strategy is intended to introduce measures which would lead to greater consistency and equity in practice and eventually inform an improved admissions policy and funding norms for an inclusive education system. However, it is acknowledged that much has to be done to move from the current situation to the one that is envisaged by Education White Paper 6. The process to be followed will involve:

- A baseline study of current practice in all provinces
- A field test of the strategy in 30 districts in the Integrated Sustainable Rural Development Strategy (ISRDS) and the Urban Renewal Programme (URP)
- Training of about 1400 educators, managers and provincial and district officials in the use of the strategy
- Extended consultation with other government departments, especially the Departments of Health and Social Development to align services and procedures at all levels
- Revision and refinement of the strategy based on findings of the research conducted in the field test
- Extending the field test to all special schools
- Consolidation of the final strategy in a legislative framework

The process should be concluded by 2009 for system wide implementation. In the interim, the Department of Education will introduce immediate measures to outrule discriminatory practice which prevents vulnerable children from exercising their constitutional right to basic education and services.

# Table Of Contents

<b>Summary Outline of the Strategy .....</b>	<b>11</b>
<b>Part 1: Overview .....</b>	<b>21</b>
<b>1. INTRODUCTION AND CONCEPTUAL FRAMEWORK.....</b>	<b>21</b>
<b>2. THE ELEMENTS OF THE STRATEGY .....</b>	<b>23</b>
2.1 Redefining Support .....	23
2.2 Supporting Curriculum Access .....	23
2.3 Systematically moving away from category of disability to level of intensity of support needed .....	24
2.4 Considering contextual barriers.....	25
2.5 District-Based Support and Programme Support .....	26
2.6 De-linking Support from Site.....	26
<b>3. THE PRINCIPLES AND PURPOSE OF ASSESSMENT OF BARRIERS TO LEARNING IN AN INCLUSIVE EDUCATION AND TRAINING SYSTEM .....</b>	<b>26</b>
3.1 The principles of Assessment:.....	27
3.2 Purpose of this assessment procedure: .....	27
<b>4. THE ROLE PLAYERS IN THE STRATEGY.....</b>	<b>28</b>
<b>Part 2: Guidelines for Early Identification and Early Intervention (0 – 5 years) .....</b>	<b>30</b>
<b>1. INTRODUCTION .....</b>	<b>30</b>
<b>2. PROCEDURES AND PROCESSES:.....</b>	<b>32</b>
2.1 Agencies and Role players involved in facilitating access to early support programmes and in reporting processes: .....	32
2.2 Regulations on Early Intervention.....	32
2.3 Roles and Responsibilities.....	32
<b>3. TOOLKIT .....</b>	<b>35</b>
<b>Part 3: Protocol for Admission to School and Decision Making around Accessing Additional Support .....</b>	<b>39</b>
<b>1. INTRODUCTION .....</b>	<b>39</b>
<b>2. PURPOSE .....</b>	<b>39</b>
<b>3. PROCESS AND PROCEDURES TO BE FOLLOWED WHEN DECISIONS HAVE TO BE MADE AROUND LEARNERS WHO ARE ACCESSING ADDITIONAL SUPPORT FOR THE FIRST TIME.....</b>	<b>40</b>

3.1	Agencies and Role Players involved in facilitating access to Early Childhood Development and /or school based support programmes .....	40
3.2	Roles and Responsibilities.....	40
3.3.	Who applies? .....	46
3.4	Stages Of Process .....	47
3.5	Accessing additional resources .....	53
3.6	Appeal by parents.....	53
<b>4.</b>	<b>TOOL KIT.....</b>	<b>53</b>
<b>Part 4: Screening, Identification and Assessment Processes at School Level .....</b>		<b>56</b>
<b>1.</b>	<b>INTRODUCTION .....</b>	<b>56</b>
<b>2.</b>	<b>PROCEDURES .....</b>	<b>57</b>
<b>3.</b>	<b>ROLES AND RESPONSIBILITIES.....</b>	<b>61</b>
3.1	Educator.....	61
3.2	Institutional-level Support Teams: .....	62
3.3	District-based Support Teams .....	64
3.4	Parents or Care Givers .....	65
3.5	Learners.....	66
<b>4.</b>	<b>TRAINING .....</b>	<b>66</b>
4.1	Teachers.....	66
4.2	Institution-level Support Systems .....	66
4.3	District-based Support Systems .....	67
4.4	Parents.....	67
<b>5.</b>	<b>TOOLKIT .....</b>	<b>67</b>
<b>Part 5: Procedures for Admission of Older Learners to Schools and to Appropriate Support (7 – 15 years).....</b>		<b>68</b>
<b>Part 6: Regulations Pertaining to Screening, Identification, Assessment and Support.....</b>		<b>70</b>
<b>1</b>	<b>RECOMMENDATIONS FOR NEW REGULATIONS OR AMENDMENTS TO EXISTING REGULATIONS:.....</b>	<b>70</b>
1.1	Regulations on early intervention: .....	70
1.2	Amendments to SASA: .....	70
1.3	Amendments to Admissions Policy: .....	75
1.4	Assessment Policy.....	75
1.5	Policy on group and individual psychometric assessment: .....	77
1.6	Norms and Standards for Districts:.....	78
1.7	Children’s Bill, Child Care Act and Child Justice Bill .....	78
<b>2.</b>	<b>INFORMATION MANAGEMENT SYSTEMS.....</b>	<b>78</b>
<b>Part 7: The implementation plan of the strategy .....</b>		<b>80</b>
<b>Part 8: Field testing the strategy.....</b>		<b>83</b>
<b>1.</b>	<b>CHALLENGES FOR THE FIELD TEST .....</b>	<b>83</b>
<b>2.</b>	<b>PRACTICAL EXAMPLES OF HOW THE PROFILE DOCUMENTS SHOULD BE APPLIED.....</b>	<b>84</b>
2.1	Learners who might fall within the Low to Moderate Range (Levels 1 – 3).....	86
2.2	Learners who might fall in the High Range (Level 4) .....	86

2.3	Learners who might fall the Very High Range (Level 5).....	87
<b>Part 9:</b>	<b>Assessment Tools and Forms .....</b>	<b>89</b>
	<b>FORM 1: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS .....</b>	<b>90</b>
	SECTION A: GENERAL INFORMATION ABOUT THE LEARNER .....	90
	SECTION B: DEVELOPMENTAL HISTORY OF LEARNER .....	91
	<b>FORM 2: ASSESSMENT FOR ADDITIONAL SUPPORT NEEDS AND PROVISION.....</b>	<b>96</b>
	SECTION A: GENERAL INFORMATION ABOUT THE LEARNER .....	96
	SECTION B: SCREENING OF CURRENT LEARNER NEEDS.....	97
	SECTION C: SURVEY ON SCHOOL'S CAPACITY TO PROVIDE ADDITIONAL SUPPORT .....	98
	SECTION D: MOTIVATION FOR ADITIONAL SUPPORT .....	101
	<b>FORM 3: ONGOING ASSESSMENT AND REVIEW OF SUPPORT NEEDS AND PROVISIONING</b>	<b>102</b>
	SECTION A: GENERAL INFORMATION ABOUT THE LEARNER .....	102
	SECTION B: SURVEY ON SCHOOL'S CAPACITY TO PROVIDE ADDITIONAL SUPPORT .....	103
	SECTION C: INDICATORS TO DETERMINE THE INTENSITY OF SUPPORT NEEDED.....	108
	<b>FORM 4: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS FOR RESOURCING AND MONITORING PURPOSES.....</b>	<b>122</b>
	SECTION A: GENERAL INFORMATION ABOUT THE LEARNER AND SCHOOL .....	122
	SECTION B: Parent / caregiver / learner input:.....	123
	<b>Sources and References .....</b>	<b>127</b>



# Terminology

<b>Barriers to learning</b>	The notion refers to difficulties that arise within the education system as a whole, the learning site and/or within the learner him/herself which prevent both the system and the learner needs from being met. When, based on objective evaluation made by an educational authority, it is ascertained that teaching and learning are hampered where such needs are not met, educationally sound measures must be applied.
<b>District Based Support Teams (DBST)</b>	Groups of departmental employees whose job it is to promote inclusive education through training, curriculum delivery, distribution of resources, identifying and addressing barriers to learning, leadership and general management.
<b>Ordinary local schools</b>	In terms of the South African Schools Act (1996) a public school may be an ordinary public school or a public school for learners with special education needs (Section 12(3)). The local ordinary school would be the school closest to where the learner lives.
<b>Full-Service Schools (FSS)</b>	Ordinary schools which are specially equipped to address a full range of barriers to learning in an inclusive education setting. In addition to their ordinary learner population they will become accessible to most learners in an area who experience barriers to learning and provide the necessary support. In the initial implementation stages these full service schools will be models of institutional change which reflect effective inclusive cultures, policies and practices.
<b>Special Schools (SSs)</b>	Schools equipped to deliver education to learners requiring high-intensive educational and other support either on a full-time or a part-time basis.
<b>Special Schools/Resource Centres (SpS/RCs)</b>	These would be special schools which are transformed to fulfil a wider function of accommodating learners who have high intensity support needs, as well as providing a range of support services to ordinary schools, full-service schools as part of the District-based Support System.
<b>Support programmes</b>	Support programmes refer to structured interventions delivered at schools and in classrooms within specific time frames. The support programmes would mainly consist of curriculum support but could also be support for educators and managers. Support programmes could provide for staff time and expertise (consultation, training, mentoring, therapeutic intervention) as well as physical and material resources (transport, assistive devices, teaching and learning materials, ramps and accessibility features)
<b>Category of disability</b>	The main organiser for schools, funding and post provisioning in the current special education system. The weighted categories are: Multiply disabled, deaf, hard of hearing, blind, partially sighted, deaf/blind, cerebral palsy, specific learning disability, behavioural disorder, mild or moderate intellectual disability, severe intellectual disability, physical disability, autistic spectrum disorders, epilepsy, attention deficit disorder, with/without hyperactivity.
<b>Level of support needs</b>	A range of factors will be taken into account to determine the level of intensity of support needed by individual learners. These factors could be intrinsic to the learner him/herself or factors within the learning and living environment of the learner.
<b>Institution Level Support Teams (ILSTs)</b>	Teams established by institutions in general, further and higher education, as institution-level support mechanism whose primary function is to put in place co-ordinated learner and educator support services. The teams have different names in different provinces such as Site Based Support Teams, Teacher Support Teams, etc.

# Acronyms

ABET	Adult Basic Education and Training
DBST	District-based Support Teams
DPO	Disabled People Organisation
ECD	Early Childhood Development
EMIS	Education Management Information Systems
FET	Further Education and Training
FSS	Full-Service School
GET	General Education and Training
ILST	Institution-level Support Team
NCS	National Curriculum Statement (Schools Grade 10 –12)
NGO	Non-governmental Organisation
NPO	Non-profit organisation
OSDP	Office on the Status of Disabled People
RNCS	Revised National Curriculum Statement(Grade R – 9)
SAPS	South African Police Service
SASA	South African Schools Act (Act 79 of 1996)
SBST	Site/school-based Support Team
SGB	School Governing Body
SMT	School Management Team
Soc. Dev.	Department of Social Development
SpS/RC	Special School/Resource Centre

# Summary Outline Of The Strategy

## **EARLY CHILDHOOD DEVELOPMENT: (0 – 5 YEARS)**

- Outlining procedures for alignment of services and collaboration between departments.
- Advocacy to parents and communities on rights within an inclusive system.
- Structuring support services for learners who have additional support needs within the broader framework of the Integrated National ECD Strategy (Tshwaragano Le Bana).
- Joining forces also with NGOs and DPOs to make early intervention more accessible.
- District Based Support Teams play key facilitation role to access early intervention programmes that are available in area, including those in special schools/resource centers.
- Development of policy guidelines on affordable and accessible inter-sectoral Early Intervention services
- Setting mechanisms in place to make identification and application for services obligatory as a measure of protection of rights of vulnerable children

## [FORM 1: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS](#)

### **5 - 6 YEARS:**

- Identification, assessment and access to additional support
- Obligation to apply rests on parents
- Assisted in application by Early Intervention Providers
- Application submitted to local ordinary school
- Further screening done by Institution level support team
  - Assessing own capacity to support learner

- Requesting additional support from outside school
- Motivating for access to additional support in alternative setting

## FORM 2: ASSESSMENT FOR ADDITIONAL SUPPORT NEEDS AND PROVISION

### **5 YEARS AND ONWARDS**

- Guidelines for screening and identification as part of teaching and learning process
- Consolidating ongoing screening through a more in depth assessment of level and nature of support needed
- Planning approaches to individualised learning programme design
- Motivating for access to additional support programmes
- Validation of support planning and provisioning by DBST
- Ongoing review of effectiveness of support

## FORM 3: ONGOING ASSESSMENT AND REVIEW OF SUPPORT NEEDS AND PROVISIONING

### **OLDER LEARNERS:**

This section deals with learners who have never entered school, who enter school late or who are considered to be over-age learners and are stuck in the GET band with no support and little scope for progressing to FET or to the world of work. Learners who fall within this category could be children or youth living on streets, with disabilities, in child labour, with chronic diseases, in conflict with law, addicted to substances, orphans, late beginners, etc.

### **Nature of Support: (One size doesn't fit all)**

- Facilitation of admission to schools/resource centres
- Programme Development – fast tracking guidelines, etc.
- Psycho-social support
- Assessing level of education
- Preparing the teacher of the relevant grade
- Suggesting alternative placement within schools
- Developing certification opportunities
- Investigating ABET opportunities

- Curriculum adaptation
- Taking all steps to prevent drop-out from the system
- Inter-sectoral collaboration between Education, Social Development, Labour, Justice, SAPS

**Admission and exit strategies:**

Apart from outlining admission strategies, a review of the effectiveness of support should be ongoing and repeated at least once annually. All stakeholders should be involved in reviews. Guidelines should be developed for the parent/caregiver consultation sessions to ensure appropriate power relations.

Exit strategies should be part and parcel of the reviewable assessment and support system. Exit strategies do not only refer to particular sites but also to specialized programmes. No programme should be seen as a permanent placement.

[FORM 4: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS FOR RESOURCING AND MONITORING PURPOSES](#)

**WHAT IS RADICALLY DIFFERENT IN THE APPROACH?**

- To move away from assessing the intrinsic barriers of the learner without making a thorough investigation of contextual factors which impact on teaching and learning – this includes the pedagogy of the teacher
- Central role of the learner, parent and teacher in the planning and decision making around support
- To develop an eligibility rather than a placement model
- Screening, identification and assessment are ongoing and integral to teaching and learning
- Assessment for classification is limited and only done when additional resources in the form of training, consultation, specialised services and material resources are required from outside the school
- There will be an emphasis on monitoring and quality assuring the support delivery – looking at how the context is changing

- To emphasise a transversal approach in all decision making around learner support – first at ILST level and then at DBST level
- Inter-sectoral collaboration of all departments and agencies are key to the strategy
- Reviewing role of professionals to provide individual learner support or even necessarily being part of decision making process
- First exhaust all support mechanisms available at school and community level before looking beyond the school
- Nature of support will be more in the form of programmes with set time frames which will be regularly reviewed to determine their effectiveness and appropriateness
- Support programmes would mainly be curriculum adaptation
- Procedures will always involve three motivational sections: what does the school have, what do they need in addition and only then a strong motivation has to be provided why the support needed should be in an alternative setting
- Withdrawal into special settings will be reduced to a minimum
- No child will be allowed to apply directly to a special school for admission
- Assessment for support will be teacher-driven and curriculum-based as far as possible moving away from an over-reliance on professionals
- The role functions of ILST and DBST in the whole system have to be clearly outlined – this will also involve training

## **DEVELOPING INTRINSIC AND EXTRINSIC INDICATORS**

### [SECTION C: INDICATORS TO DETERMINE THE INTENSITY OF SUPPORT NEEDED](#)

#### **Rubrics for levels:**

#### **Learner Indicators:**

##### **Level 1:**

- Full participation
- No requirement for additional learning and teaching support
- No additional adaptation required

##### **Level 2:**

- Modified full participation
- Requires some additional support to maximise learning outcomes

- Adaptation planned and managed at the grade or phase level

**Level 3:**

- Participation in all aspects with occasional assistance
- Requires additional support in a number of areas to maximise learning outcomes
- Adaptation planned and managed with intervention of the ILST

**Level 4:**

- Participation in only some activities
- Requires additional specialised support in many areas including ongoing monitoring to facilitate participation to maximise learning outcomes
- Adaptation planned and managed with assistance by DBST

**Level 5:**

- Participation extremely limited in certain areas
- Requires specialised learning programme planning and/or high level support
- Adaptation and continuous monitoring needed in all areas

**DEVELOPING INTRINSIC AND EXTRINSIC INDICATORS:**

**1. Learning Factors:**

**Communication:**

- Language proficiency
- Expressive language
- Receptive language

**Cognitive factors:**

- Task behaviour
- Processing skills: General
- Language Processing
- Number skills

**2. Behaviour Factors**

- Social conventions
- Socio-emotional

### **3. Physical Factors:**

- Motor Mobility
- Sensory
- Self care:
  - Activities for daily living
  - Safety
  - Transport
- Medical conditions

### **Extrinsic factors**

#### **Review of extrinsic barriers that affect individual learners:**

- Family dynamics
- Transport needs
- Socio-economic factors

#### **Extrinsic factors in schools:**

- Readiness for inclusion – human rights and school ethos
- Policies
- Staffing and staff development
- Physical factors

### **FORMS**

- The forms that have been developed create the framework within which we will be working
- The forms will in the end not be independent from the general learner profile system which is being developed in the RNCS but will be integrated into these
- There is a regulatory aspect to this process which needs to be captured in a range of acts and policies

Form 1: Early Intervention Information – Parents/Early Intervention Providers

Form 2: First Application for additional support at local school - ILST

Form 3: School assessment and review - ILST



## **POSITION ON PSYCHOMETRIC ASSESSMENT**

- As the RNCS provides the framework for designing support programmes, the need for group and individual diagnostic assessment is minimised. Especially in view of the negative and discriminatory effects and limited benefits of norm-referenced psychometric assessment as conducted in the previous system, schools are no longer allowed to organise for or request such an assessment to be undergone by a learner/learners who needs/need additional support.
- Decision making around the support programme centrally involves the learner, parents and the teacher – the need to involve any professional from the outside to diagnose the intrinsic barriers of a learner is reduced, especially if such a person does not have insight into the teaching and learning environment of the child.
- Role of psychologists and therapists working within the system will be revised to be in line with Education White Paper 6 – emphasis on mentoring, consultation, monitoring and programme development.
- Training and upgrading of qualifications of psychologists are key – at Initial Professional Development Level as well as Continued Professional Development Level - to work within the new framework.

### **Purpose:**

- How to access additional resources and support
- Provide indicators for Programme design

## **THE FLOW CHART FOR REVIEWABLE ADDITIONAL SUPPORT PROVISION (Key to Diagram 1, p. 18):**

### **1. Identifying learner needs and aspirations**

The starting point in all support provision is the learner. Before making assumptions about the 'special needs' of a learner, teachers have to see each learner as an individual, coming with his own strengths, aspirations, experiences and possible specific barriers. No evaluation of learner needs can be done before actual teaching and learning has taken place and the teacher has got to know the learner.

### **2. Identifying and assessing contextual barriers**

Once the teacher has observed a learner in the teaching and learning situation, he/she can start identifying the barriers that the learner might be experiencing through a classroom-based and teacher driven process of teacher self reflection, parent consultation and involvement, identifying contextual barriers, planning learning and teaching adjustments, identifying whether an improvement in school effectiveness, provisioning, planning and collaboration will not improve teaching and learning to the benefit of all learners and identifying community resources. If this support is done effectively, there will be no need for any form of support from an agency outside the classroom.

### **3. Gaining more comprehensive knowledge of support needs and addressing barriers with the support of the Institution-Level Support Team**

In cases where learners have gone through the first stage of screening, observation and baseline assessment and a closer understanding has been gained of the specific nature of his/her needs, the assessment is taken to the next level which involves the Institution level support team with teacher, **reviewing the impact on the school's and teacher's work, analysing the school's capacity within existing resources to meet needs and achieve school improvement**, in depth assessment of learner support needs by the ILST and educator in consultation with the parents, application for additional resources in the form of training, assistive devices and motivation for access to alternative specialised programmes at any site which is accessible to the learner, whether it be the special school, full-service school as a last resort.

### **4. Review of support provision**

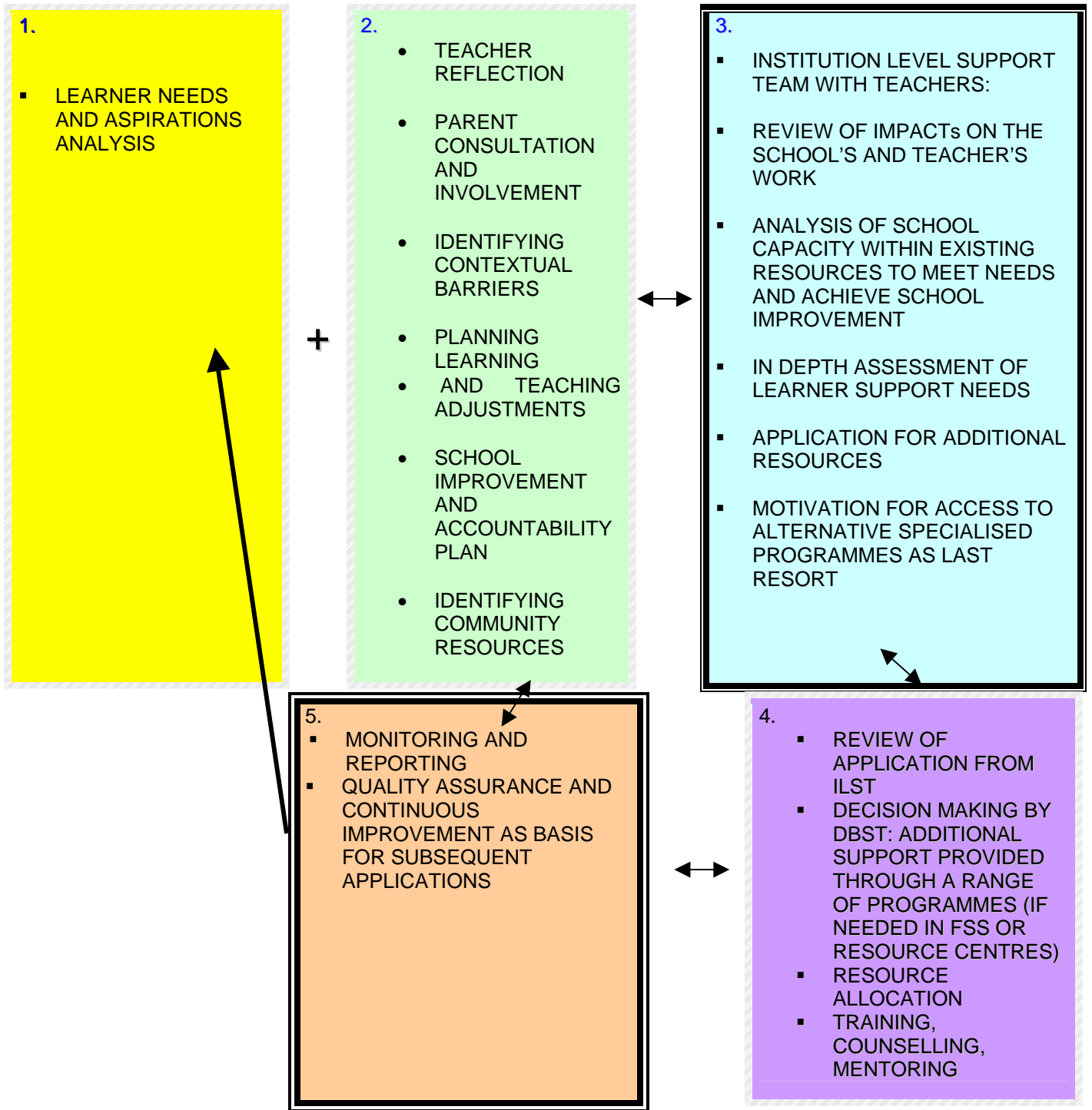
As soon as external support provision is recommended by the ILST, where additional resourcing is required, there is a need for a legal framework of verification by the district-based support team whether all avenues have been exhausted and in what way the support can be provided in the most cost-effective and appropriate way with the least possible disruption for the learner. This process will have little in common with the old referral system and will be mainly to access additional support provisioning at the school where the learner currently is. If learners have to access support at a site other than the local

school, the support programme must first be motivated by outlining the format and the duration. The intention is that the district will stringently control and monitor this process which will affect only a small percentage of learners within its boundaries. No learner may be directly referred to a special school. The district must respond within three weeks after the request has been submitted.

#### **5. Monitoring and reporting**

The final leg of the assessment and review process, is the component of quality assurance and continuous improvement. No renewal of the support allocation may be done if the outcomes of the previous intervention has not been reported and recorded as basis for subsequent applications. Learners must return to the local school as soon as they have achieved maximum benefit from the external programme and the support programme must be adjusted to focus on support within the classroom, mainly in the form of curriculum differentiation.

**DIAGRAM 1: THE FLOW CHART FOR REVIEWABLE ADDITIONAL SUPPORT PROVISION**



# Part 1: Overview

## **1. INTRODUCTION AND CONCEPTUAL FRAMEWORK**

The release of Education White Paper 6 on Special Needs Education: Building an Inclusive Education and Training System has heralded a new approach towards organizing support within a single, integrated education system.

Our Constitution (Act 108 of 1996) founded our democratic state and common citizenship on the values of human dignity, the achievement of equality and the advancement of human rights and freedoms (Section 1a). These values summon all of us to take up the responsibility and challenge of building a humane and caring society, not for the few, but for all South Africans. In establishing an education and training system for the 21<sup>st</sup> century, we carry a special responsibility to implement these values and to ensure that all learners, with and without disabilities, pursue their learning potential to the fullest. (Education White Paper 6, Section 1.1.1)

The policy framework outlines the commitment of the Department of Education to the provision of educational opportunities, in particular for those learners who experience or have experienced barriers to learning and development or who have dropped out of learning because of the inability of the education and training system to accommodate diversity of learning needs, and those learners who continue to be excluded from it. (Education White Paper 6, Section 1.1.5)

To effectively build a unified education and training system based on the principles of equity, redressing past imbalances, quality for all and access, the vigorous participation of all social

partners and communities are required so that social exclusion and negative stereotyping can be eliminated.

The approach advocated in Education White Paper 6 is fundamentally different from traditional ones that assume that barriers to learning reside primarily within the learner and accordingly, learner support should take the form of specialist, typically medical interventions. (Education White Paper 6, Section 2.1.2)

Support should be redefined to move its focus away from supporting individual learners who are assumed to have 'special needs' towards addressing barriers which prevent the system from responding to their learning and other needs. An overemphasis on the notion of 'special needs' had the tendency of labelling and inadvertently marginalizing certain children. It also discouraged ordinary schools to organize support in such a way that it became responsive to the needs of all learners from various cultural, socio-economic and language backgrounds. Ordinary class teachers did not deem it part of their day-to-day classroom practice to develop an understanding for the diverse ways in which learners learn and need to be supported.

Furthermore, the White Paper sets out the principle of systematically moving away from segregation according to categories of disability as an organizing principle for schools and support services. This is based on the realisation that there are also other factors that create barriers to learning such as language, poverty, class, health, race, etc. This implies that a completely new approach is to be followed to determine the intensity and nature of support needed to overcome the barriers in teaching and learning.

Both the above-mentioned conceptual shifts have a major impact on assessment procedures, the organisation of support services and the sites in which support is made available. It will also influence the roles, responsibilities and utilisation of the staff providing support and ultimately the way in which teachers teach and schools are managed.

Past practices in assessment have tended towards exclusionary practices, often favouring learners from urban advantaged contexts. They have also not been conducive to making scarce specialized services and resources available to all in a cost effective way. It also created an unnatural division between curriculum delivery and assessment.

Therefore, the White Paper sets as an “urgent priority the overhauling and transformation of practices related to the identification and assessment in general with a view to achieving enabling mechanisms to support learners who experience barriers to learning in the most appropriate way.” (Education White Paper 6, p. 7)

## **2. THE ELEMENTS OF THE STRATEGY**

### **2.1 Redefining Support**

Support must no longer be seen as focusing on ‘deficits’ that have been ‘diagnosed’ in individual learners who are assumed to be in need of ‘remediation’ through individual attention by specialist staff.

Support could be defined as all activities which increase the capacity of a school to respond to diversity. Providing support to individuals is only one way of attempting to make learning contexts and lessons accessible to all learners. Support is also provided, for example, when schools review their cultures, policies and practices to determine how supportive these are of individual educator, parent and learner needs. Support is provided when educators plan lessons in such a way that they accommodate all learners. Support then, must focus on the learning and teaching process by identifying and addressing learner, educator and institutional needs. Though the major responsibility for the coordination of support may rest with a limited number of people, all staff are involved in support activities.

### **2.2. Supporting Curriculum Access**

All officials and educators clearly need to understand that Inclusion is centrally a curriculum issue since curricula create the most significant barrier to learning and exclusion for many learners, whether they are in ‘special’ schools and settings or in ‘ordinary’ schools and settings. These barriers to learning arise from various interlocking parts of the curriculum such as:

- the content of learning programmes;
- the language and medium of teaching and learning;
- the management and organization of classrooms;
- learning style and pace;
- time frames for completion of curricula;
- materials and equipment which have to be available and

- assessment methods and techniques.

Support must therefore be organised in such a way that a range of barriers to accessing the curriculum is uncovered and addressed. (Education White Paper 6, p.20)

### **2.3 Systematically moving away from category of disability to level of intensity of support needed**

All assessment procedures and instruments should ensure that no learner is assessed simply on the basis of his/her category of disability. It needs to become clear to all who are involved in the education of specifically learners with disabilities that the range of support needs for each learner differs drastically in terms of his/her specific intrinsic needs as well as his/her context. For instance, learners who are blind and who have mastered Braille will have less intense support needs than those who still have to undergo Braille training. Within any classroom there is a wide range of cognitive abilities that will require a variety of responses from educators. Contextual barriers such as poverty and socio-economic home conditions will furthermore play a role in determining the level of support that the system has to provide.

When compiling the assessment profiles of learners and determining their support needs the following three areas need to be closely observed:

- Learning Factors (including communication issues and cognitive factors, etc.)
- Behaviour Factors (social conventions, socio-emotional factors, etc.)
- Physical Factors (motor, mobility, sensory, self care, medical conditions, etc.)

Environmental and contextual factors must also be considered such as:

- nutritional needs
- transport considerations,
- family dynamics and support and
- socio-economic factors.

The above clearly shows that category of disability plays but a minimal role in how the learner will be assessed in terms of support needs.



The tools and procedures need to be applied by ordinary teachers and everyone who is involved with the learner and must be based on knowledge of the teaching and learning situation and the background of the learner. The procedure should serve the dual purpose of:

- encouraging teachers to continually reflect on and record the support needs of the learners in their class
- assisting the Institutional-level and District-based Support Teams to structure, organize and fund support programmes in any given site.

## **2.4 Considering contextual barriers**

A parallel process of assessing the learning context/school should be developed to broadly determine what systemic barriers need to be addressed in order for a school to make the curriculum accessible for all its learners. It must still be remembered that the main focus of support is to make the system more supportive of individual learner needs so that all learners can effectively access the curriculum. However, the assessment of schools within a framework of inclusive education should never be seen separately from other departmental processes of school development planning, whole school evaluation, school effectiveness, etc. School profiles should inform District planning around the delivery of support programmes.

Some of the indicators for determining the level of support needed by a school are:

- Socio-economic conditions of the majority of learners
- Attitudes to difference
- Culture of school regarding certain stereotypes
- Flexibility of curriculum/learning programmes
- Appropriateness of communication
- Accessibility and safety of the built environment
- Availability of support from school / district
- Recognition/involvement of parents
- Capacity amongst educators
- Capacity amongst senior management
- General functionality of school
- Availability of assistive devices
- Availability of learning support materials / resources
- Violence / abuse

## **2.5 District-Based Support and Programme Support**

The assessment procedures aim at determining the intensity and the nature of the support. The task of the District-Based Support Team would be to analyse and verify the content and procedures followed at the institutional level in order to plan and advise on the most appropriate support programme to be provided to the school and the respective learner.

The role functions of all staff in the District-based Support Team should be to support, monitor and evaluate the impact of the whole protocol. This will entail new linkages and networks as well as new fields of operation and will have implications for training of educators, managers and specialised staff.

## **2.6 De-linking Support from Site**

Once the nature and the level of intensity of support needs have been determined, the main objective is to design an appropriate support programme with time frames and expected outcomes. Decision-making will be around determining what kind of support the learner is eligible to receive and where this support programme can be best provided. In view of the broader definition of support, the local ordinary school should always remain the first option. There must be a critical shift in terms of the assumptions made regarding how learners with various levels of support needs can be supported in new ways, given the availability of more support staff at the district level. Therefore it will be the responsibility of the DBST to control admissions of learners to special schools/resource centres to ensure that no learner who could receive the necessary support programme at the local school be moved from his/her current setting.

In terms of this principle as well as the principle that special schools/resource centres will no longer be organized on the basis of category of disability, it is likely that the character of most existing special schools/resource centres will radically change. This will happen in an incremental way through the rigorous new admissions procedures followed for first time enrolments which will be controlled by the District-based Support Team.

## **3. THE PRINCIPLES AND PURPOSE OF ASSESSMENT OF BARRIERS TO LEARNING IN AN INCLUSIVE EDUCATION AND TRAINING SYSTEM**

### **3.1 The principles of Assessment:**

Effective assessment needs to be guided by the following principles:

- Educators, parents and learners need to be centrally involved in the process
- Assessment procedures need to be guided by the principle of respect for all concerned
- The purpose should be clear and open
- It needs to be appropriate and relevant to the realities and context of the person or institution concerned
- It must be fair, bias-free, and sensitive to gender, race, cultural background and abilities
- It needs to identify barriers to learning, with the purpose of improving the teaching and learning process
- It needs to be a continuous process, that is built into the teaching and learning process
- It needs to be multi-dimensional or systemic in nature, located within the framework of barriers at the individual (learner and educator), curriculum, institution, and family, community and social contextual levels
- The different levels of the system that are involved in the assessment process (e.g. education-level support teams and district support teams) need to work closely together, ensuring that assessment processes are smoothly pursued
- It must be manageable and time-efficient
- It needs to be varied, including various forms and drawing from various perspectives
- Assessment results must be clearly, accurately and timeously documented and communicated to those affected

### **3.2 Purpose of this assessment procedure:**

The core purpose of all assessment within education is to promote effective teaching and learning. Within this context, however, assessment can be used for different purposes, including

- contributing towards the development of profiles of learners, educators and institutions, which can then be used for the following purposes
- determining learning needs and whether learning is successfully occurring
- identifying barriers to learning, and pointing to where and how these barriers could be addressed. This could include various interventions at any level of the 'system': an intervention with the learner or educator; transformation of some aspect of the

curriculum; development of the institutional environment; or addressing particular family, community or social factors

- contributing to strategic management planning and decision-making within the Department of Education, including identifying support needs for the purposes of post-provisioning and general resourcing; and informing where and how learners can obtain the most appropriate learning programmes

#### **4. THE ROLE PLAYERS IN THE STRATEGY**

The strategy above clearly outlines how the process of identifying, assessing and enrolling learners in special schools or specialised sites is being overhauled and replaced by structures that acknowledge the central role played by teachers, Institutional level support teams and parents. (Education White Paper 6, p. 7)

What is needed is a change in attitudes, behaviour, teaching methods, curricula and environments to meet the needs of all learners.

Maximising the participation of all learners in the culture and the curriculum of educational institutions and uncovering and minimising barriers to learning is the central objective of screening, identification and assessment.

The teacher and all who are directly involved with the learner on a day-to-day basis are expected to apply the process outlined above. The use of the results of standardised tests that have been obtained from brief assessments done by professionals who do not know the learner well, will no longer be necessary for the decision making around support. The knowledge and wishes of the parents/caregivers must carry the ultimate weight in any decision making process.

The final ratification, monitoring and quality assurance of the support programmes will be the responsibility of the District-based Support Team.

The role of the provincial office will be to translate the policy guidelines of the national Department of Education into practice by:

- Translating national policy into provincial policy
- Making provision in provincial organograms for the structure of District-based Support Teams

- Planning and budgeting for the utilization and provisioning of personnel and non-personnel resources
- Making available a basket of posts to ensure an effective District Support System
- Providing clear guidelines for functions and roles of support staff in province
- Issue procedural manuals for District Support Teams which ensure that principles of assessment and enrolment are in line with the principles of Education White Paper 6.
- Organising training for support staff at all levels to ensure a reorientation and transformation of existing practices
- Ultimately controlling enrolment of learners into high needs facilities/special schools/resource centres
- Monitoring and quality assuring delivery of support programmes

# Part 2: Guidelines For Early Identification and Early Intervention (0 - 5 Years)

## 1. INTRODUCTION

The process of transforming all existing systems of early identification and early intervention should acknowledge that learning occurs in the home, community, and within formal and informal settings and structures. **Parents** are the central role players in this phase, as they need to be empowered to take informed decisions about accessing programmes and support for their children and to become the primary providers of this support. All service providers must become sensitive to the fact that parents are the natural experts on the needs of their children and should accordingly ensure that they do not disempower them through their professionalism. The collaboration of service providers amongst themselves but also with parents is the cornerstone of establishing an integrated and caring society.

There must also be a reaffirmation and acknowledgement of the role of communities to support families and children. Such a 'community vision' would like to see a society where those who were once labelled, exiled, treated, counselled, advised and protected are, instead, incorporated into community where their contributions, capacities, gifts and fallibilities will allow a network of relationships involving work, recreation, friendship, support and the political power of being a citizen.

First and foremost, there must be the assurance that children with disabilities will not be excluded from the services available to all other children in the community. This includes access to ECD centres. It would be wrong to assume that learners should stay at home because no specialised services or specially trained staff are available.

While acknowledging that normalisation and community integration is a first level of support, the Department of Education also fully appreciates the importance of assessment and interventions during the early phases of life. It is during the pre-schooling years that a variety of screening and testing programmes can reveal early organic impairments that may pose barriers to learning. Community-based clinics are in the best position to conduct an initial assessment and plan a suitable course of action in conjunction with parents and personnel from various social services such as education, various Non-Governmental Organisations and Disabled People Organisations who run parent support and parent guidance programmes.

In order to ensure the continuity of such services throughout learning, the Department of Education recognises that it is essential that links be established between community-based clinics and other service providers and the education and training system. (Education White Paper 6, section 2.2.6.5)

The provision of appropriate early support programmes must be coordinated and aligned so as to prevent unnecessary duplication of assessment procedures and to ensure common understandings around creating access to inclusive services in the local context.

A process of identification of children with disabilities is also conducted by the Department of Social Development for the purpose of allocating social grants.

The provision of early support programmes is not only the responsibility of the Department of Health and other agencies but can also be provided by the special schools/resource centres. Access to these programmes must be coordinated and monitored by District-Based Support Teams. To achieve this important objective, the Department of Education shall work closely with the Ministries of Social Development and Health, and the provincial departments of education.

It is very important that some form of tracking of these learners be built into the system so as to ensure that they are in fact making progress and will eventually be able to access formal schooling and receive the necessary support. For this purpose the setting up of a database should be negotiated between the three key departments. Effective information management systems will ensure that these learners are tracked so as to ensure continuity of service delivery. This will prevent the current situation where children are re-assessed numerous times and by various agencies to access government services.

## **2. PROCEDURES AND PROCESSES:**

Procedures and processes need to be set in place for the screening, identification, assessment and support of children who are eligible for support in the 0-5 years range.

### **2.1 Agencies and Role players involved in facilitating access to early support programmes and in reporting processes:**

- Department of Health/Health Care Practitioners
- Department of Social Development
- ECD Providers
- NGO's, DPO Programmes
- Parents/Caregivers

### **2.2 Regulations on Early Intervention**

- Health Care Act
- Child Care Act
- SASA (amended re: age 3)
- ECD Policy
- Admission Policies (re: age 3)

### **2.3 Roles and Responsibilities**

#### **2.3.1 Department of Health Services and Health Care Practitioners\***

*Departmental Health Services include all primary health care units attached to hospitals, clinics, community centres, as well as all other services involved in maternal and child health, rehabilitation and school health.*

*Health care practitioners could range from private medical and para-medical practitioners (e.g. psychologists, therapists) to primary health care workers employed by NGOs or Disabled Peoples Organisations*



All Health Services and Health Care practitioners involved with the screening of children from ages 0-18 months shall develop a portfolio detailing findings, nature and level of support programmes as well as assisting the parent in accessing support programmes. The portfolios should also include the nature and level of support received. When the child reaches school going age, at a minimum of 3 years of age, the health care practitioner must assist the parent/care giver to complete an application form for additional educational support (**Form 1**). The parent must ensure that the application form for additional support is forwarded to the local school. The health care practitioner must ensure that the name of the child requiring additional educational support is placed on the register of the local ordinary school.

*Scenario: An 18 month old child from a rural area arrives at the local community health care centre for routine immunisation. The child is identified with low muscle tone and delayed milestones. He is unable to sit, and has not developed any speech. The child and the care giver are referred for therapy with the local community based rehabilitation worker and the mother returns to the local community health centre for regular checks. The mother receives ongoing guidance on how to stimulate and help the child develop physically, socially and emotionally. Emphasis is placed by everyone who interacts with the mother that the child should be included in all family and community activities with the eventual aim of entering an ordinary day care centre or ECD facility if any.*

### **Parents/Care Givers**

*This refers to any person or persons primarily responsible for the care and development of a child.*

Parents/caregivers who suspect that their child has additional support needs but has not accessed early intervention programmes prior to the child turning 3 years old, and seeks admission to education, must report to the local ordinary school.

They must ensure that an application form for additional educational support (**Form 1**) is completed in respect of the child's needs. Documentation to be included in the application of the child can consist of any appropriate reports. The local school must assist the parent/caregiver in the completion of the form. The parent is responsible for submitting this form to the local school. This form will be submitted to the ILST for processing.

## **Non Governmental Organisations (NGOs)**

*\*Community based organizations and interest groups that deal with networking, accessibility to community facilities, disability awareness, development and implementation of disability policies, service/support provision.*

## **Disabled Peoples Organisations (DPOs)**

*Organisations of people with disabilities*

NGOs and DPOs who are providing an early intervention programme must ensure that, when the child turns 3 years old, an application form for additional educational support (**Form 1**) is completed in respect of the child's needs. Documentation to be included in the application of the child can consist of any appropriate reports. The service provider must assist the parent/caregiver in the completion of the form. The parent is responsible for submitting this form to the local school. This form will be submitted to the ILST for processing. The service provider must ensure that the name of the child requiring additional educational support is placed on the register of the local ordinary school.

## **Department of Social Development**

*This refers to the governmental department that ensures the implementation of the Child Care Act (Act 74 of 1983) and the Domestic Violence Act (Act 116 of 1998)*

The Department of Social Development needs to contribute towards the development of a portfolio for all children receiving services who require additional educational support. The portfolios should include the nature and level of support received prior to the time of referral to education. When the child reaches school going age, at a minimum of 3 years of age, the officer must assist the parent/care giver to complete an application form for additional educational support (**Form 1**). The parent must ensure that the application form for additional support is forwarded to the local school. The Social Development officer must ensure that the name of the child requiring additional educational support is placed on the register of the local ordinary school.

## **ECD services**

*This includes early child development programmes, programmes offered at hospitals and at special schools, home-based services, early educare services, interventions provided by NGOs.*

The ECD practitioner will contribute towards the development of a portfolio for all children who receive services who require additional educational support. The portfolios should include the nature and level of support received prior to the time of referral to education. When the child reaches school going age, at a minimum of 3 years of age, the ECD practitioner must assist the parent/care giver to complete an application form for additional educational support **(Form 1)**. The parent/care giver must ensure that the application form for additional support is forwarded to the local school. The ECD practitioner must ensure that the name of the child requiring additional educational support is placed on the register of the local ordinary school.

### **3. TOOLKIT**

#### **Road to Health Card**

The Road to Health Card should be used to record the medical history of a learner from birth to 5 years. All interventions must be recorded on this card. The card must be refined in consultation with the Department of Health.

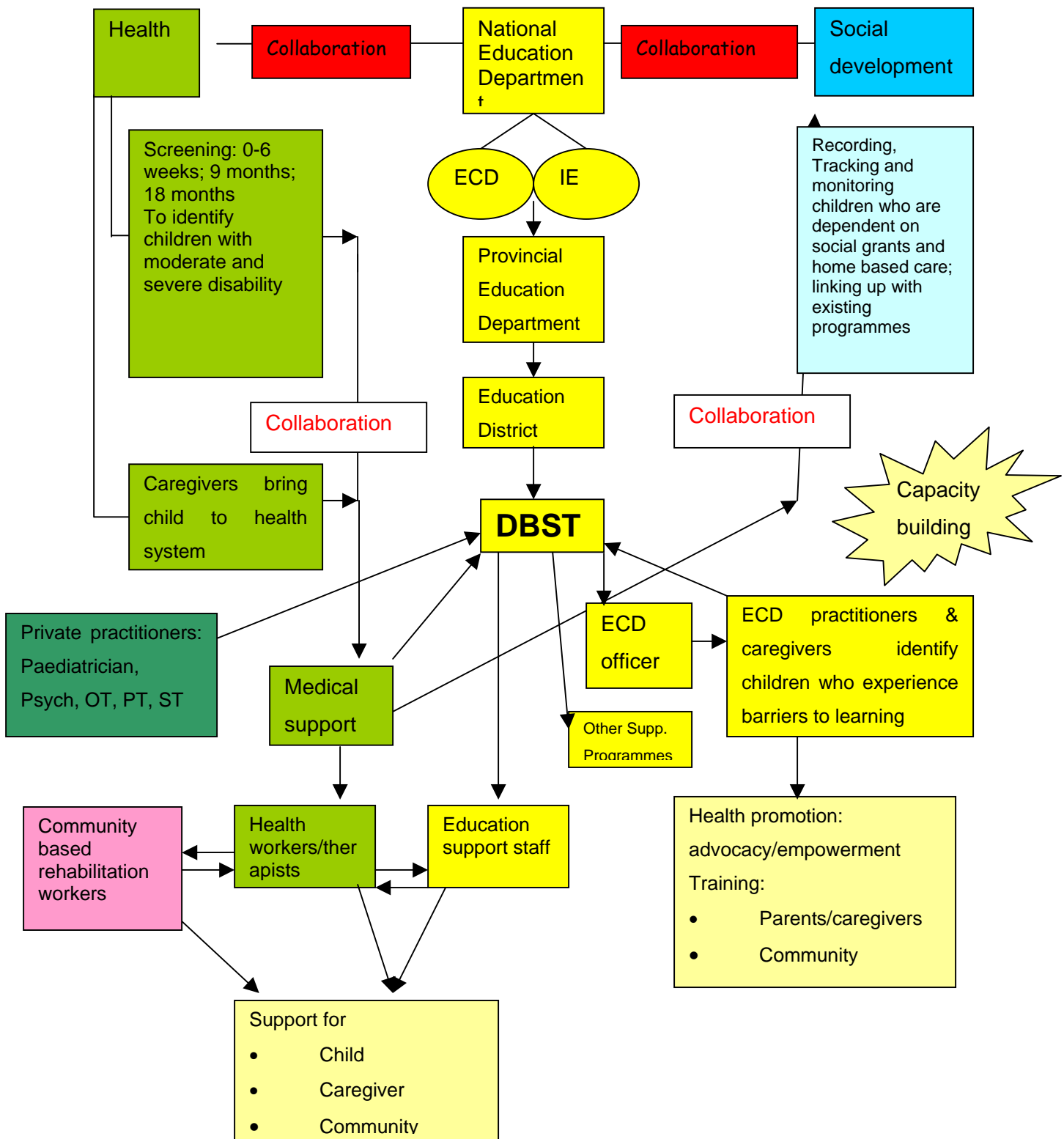
#### **Learner portfolio**

There needs to be a standardised learner portfolio which will include contributions from any early intervention provider. The information in the form will serve to assist the teachers of the learner to structure support for him/her from the outset. The form is structured in such a way that it provides a comprehensive picture of the learner's developmental history, the support (if any) which he has received up to date, his strengths as well as his limitations. The form should not serve to label the learner. It also includes a section where the early intervention provider indicates what further support it can provide to facilitate the inclusion of the learner in the new learning environment. The intention is to strengthen inter-agency collaboration

## **FORM 1: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS**

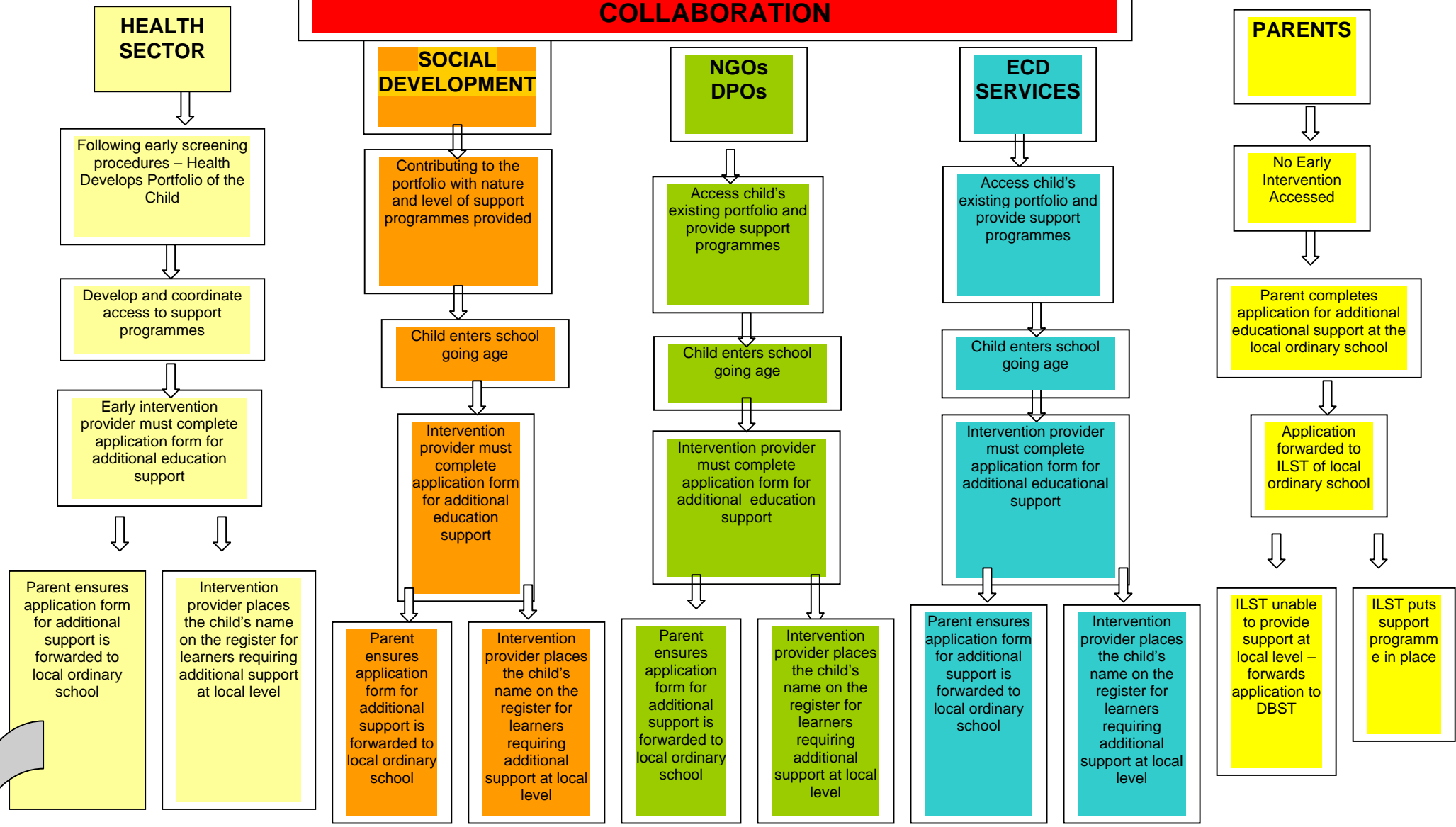
1. The form must be filled in for a learner who is applying for additional support for the first time at school level.
2. The form must be filled in by:  
the parent/caregiver  
Or  
the early intervention provider in consultation with the parent/care giver.
3. The completed form must be submitted to the local ordinary school in the year before the learner becomes eligible for formal schooling/Gr.R.

## Early identification – Early intervention (0-4/5) Inter-sectoral collaboration



# PROCESS BY WHICH CHILDREN ACCESS EARLY INTERVENTION (0-5)

## COLLABORATION



## ILST → DBST co-ordinates access to support programmes

# Part 3: Protocol for Admission to School and Decision Making Around Accessing Additional Support

## 1. INTRODUCTION

The Department of Education recognises that many learners who experience serious barriers to learning and who would require support to be able to learn optimally in their local ordinary school, have been most vulnerable to exclusion and have very often not been able to access either a school or any form of support.

Amongst these learners are learners with disability who have experienced great difficulty in gaining access to education. The special schools that do exist are few and often not accessible, especially to children in poor and rural communities and they have also been limited to admitting learners according to rigidly applied categories. Learners who experienced learning difficulties because of severe poverty did not qualify for educational support. The categorisation system allowed only those learners with organic, medical disabilities access to support programmes (Education White Paper 6, p. 9).

## 2. PURPOSE

- 2.1. To outline the **process and procedures** for the screening, identification, assessment and enrolment of learners who are eligible for substantial additional support in the General Education and Training (GET) band.
  - 2.2. To outline **roles and responsibilities** of various role players and stakeholders at all levels in the process of:
-

- Identification
- Admitting
- Determining nature of support programmes
- Monitoring whether learner is accessing additional support
- Monitoring progress of learner and appropriateness of programme and developing exit strategies from specialised programmes (in the case of learners in specialised programmes)

2.3. To characterise the learners who need to be screened/ identified for accessing additional support:

### **3. PROCESS AND PROCEDURES TO BE FOLLOWED WHEN DECISIONS HAVE TO BE MADE AROUND LEARNERS WHO ARE ACCESSING ADDITIONAL SUPPORT FOR THE FIRST TIME**

#### **School Entry Stage (5 – 9 years)**

##### **3.1 Agencies and Role Players involved in facilitating access to Early Childhood Development and /or school based support programmes**

The following agencies or role players would have been the first to have identified developmental delays and other barriers experienced by young children up to the age of 5 and must be held responsible for ensuring access to support programmes:

- Parents/Care Givers
- Health Department/health care practitioners
- Social Development
- NGO / DPO programmes
- ECD Service Providers
- District-Based Support Team
- Special School/Resource Centre Programmes
- Other Early Intervention Providers
- Community rehabilitation workers

##### **3.2 Roles and Responsibilities**

###### **3.2.1. Parents/Care Givers\***



*\*This refers to any person or persons primarily responsible for the care and development of a child.*

Parents need to take responsibility for the support of their children in the most inclusive setting possible.

Parents must become empowered to understand how the potential of their children can be optimally developed. They must obtain information on the kind of support needed by their child. They must know their rights in terms of accessing available support.

Parents who suspect that their child has additional support needs must report to the local ordinary school and/or early intervention providers as early as possible but at least by the age of 5 years.

They must ensure that an application form for additional support (**Form 1**) is completed in respect of the child's needs. Documentation to be included in the application of the child can consist of reports from any of the above-mentioned intervention providers.

Parents must make every effort to ensure that their child must have access to an appropriate early intervention programme which is available in their area. (**Child Care Act, Children's Bill**)

### **3.2.2 Health Department Services/Health Care Practitioners\***

*\*Health Department Services.*

*This includes all primary health care units attached to hospitals, clinics, community centres, etc. as well as all other services involved in maternal and child health, rehabilitation and school health.*

*\*Health Care Practitioners*

*These could range from private medical and para-medical practitioners (e.g. psychologists, therapists) to primary health care workers employed by NGOs or Disabled Peoples Organisations.*

All intervention providers should follow the guiding principles that every effort would be made to accommodate the application for additional support within inclusive education settings.

All departments should participate in advocacy programmes to ensure that the principles of social rights and inclusivity become general practice in all sectors.

All health care practitioners involved with the child in an early intervention programme must assist parents/caregivers in completing an application for additional educational support (**FORM 1**) as early as possible or at least by five years. The service providers are compelled to ensure that the child is placed on the register for application for additional support of the local ordinary school. All agencies must compel parents to approach the local ordinary school with the completed forms. Where there are no parents, early intervention providers should ensure that the completed application forms reach the local ordinary school and that children access services.

A central **database** and tracking system must be developed to ensure access to and monitoring of support programmes and to avoid duplication and unnecessary assessments. The database can be centrally updated for use in decision-making processes at the local/district level.

Intervention providers should network with the District Based Support Team to ensure that services are coordinated and aligned and to become involved in the development of additional support programmes where possible.

No health care practitioner may refer a child directly to a special school without going through the local primary school and the District-based Support Team.

The above procedure also applies to private practitioners.

See also below how alignment of the provision of assistive devices must be organised between the Departments of Education and Health

### **3.2.4 Social Development**

All learners who have already been assessed for the purposes of obtaining social grants, should have the necessary profile documents and should not be re-assessed when admitted to school.

Especially in the case of Care Dependency Grants which are available to learners with severe disabilities, allocations are made after a medical examination to determine the level of intensity of the support needed as well as the financial status of the family.

It must however be understood that the medical nature of this assessment gives little guidance about the kind of curriculum support which is needed and may in fact rather hinder access to school than promote it. All levels of the system need to inform and empower

parents/caregivers to understand the importance of enrolling their children, irrespective of the severity of their disability, into educational programmes.

Regarding other vulnerable children who receive social grants, but who are not disabled, the same procedure for facilitating admission to school and access to additional support outlined above must be driven by service providers of the Department of Social Development.

This protocol must be aligned to those of the department of Social Development so that processes do not undermine one another to the detriment of learners as is sometimes the case where parents are afraid of losing the care dependency grant when they enrol their children at school.

### **3.2.5 \*NGO / DPO / HEI programmes**

*\* Non-governmental/non-profit organisations (NGOs/NPOs) refer to national or local organisations that provide services or support to children and/or families. They can either operate on a voluntary basis or run services on a contract basis for certain government departments. A significant part of the services of the Department of Social Development are outsourced to such organisations.*

*\* Disabled People's Organisations (DPOs) refer to organisations that represent the rights of people with disabilities. They may be organised as rights-based organisations or they may also be service providers. There are also a number of Parents Organisations which fall within this sector and are organised to provide support to parents and represent the rights of parents and families of children with disabilities who cannot yet speak for themselves. Most DPOs in South Africa are affiliated to the South African Federal Council on Disability.*

*\* Certain Higher Education Institutions provide services in rural and disadvantaged contexts as part of their community outreach and student training programmes. Many of these HEI programmes are run in close collaboration with NGOs/DPOs.*

Because of the limited availability of early intervention programmes in the country, the key role played by NGOs, DPOs and HEIs must be recognised in the admissions process of learners with additional support needs who enter education for the first time. These service providers are very often the only agencies that have interacted with parents, families and children and that can provide information that would assist in admission and programme planning.

### **3.2.6 ECD Service Providers**

Early Childhood Development Service providers consist of a range of service providers such as public centres, community centres, or even home-based services in some cases. In most cases these services concentrate on addressing the immediate basic development needs of children and there is very little attention given to intervention programmes to address developmental delays or barriers to learning in a systematic and concentrated manner. However, most of these service providers know the children well and can provide a lot of information to the receiving school, regarding the strategies to be used to support him /her in an educational setting.

An extension of early childhood development services, as envisaged in the Integrated National ECD Strategy to training care-givers and educating parents to improve their knowledge and skills in interacting with young children, will be able to enhance competencies to recognize and address barriers to learning.

The further recommended strategy of empowering women to set up childcare facilities in their immediate communities, can incorporate basic skills to recognize and address barriers to learning. There are many such community-based centres that have been established by DPOs such as the Disabled Children's Action Group. It is crucial that such centres become included in the network of other centres in an area and that all measures are taken to ensure that learners progress from there into formal compulsory education once they reach school going age.

The strategy of strengthening institutional resources, capacity and the skills of those who are involved in public ECD centres, must also incrementally ensure inclusive education content.

Each of the role players mentioned above, will have the responsibility of ensuring that learners who need additional support when entering Gr R or Gr 1, will be recorded and reported to the education authorities outlined in the strategy, namely the local ordinary school and / or the District-based Support Team. The whole sector can raise community awareness about the strategy of accessing support through the processes outlined in this strategy.

### **3.2.7 District-Based Support Team**

The District-based Support Team holds the central coordinating authority within this process. The DBST will be responsible to ensure that all learners are admitted to school and that they receive the necessary support. No learner should be out of school because an arrangement for providing support could not be made. The DBST will be accountable for tracking all learners who have applied for admission and control the waiting lists kept by schools. The DBST will also be responsible for responding to appeals by parents or learners.

### **3.2.8 Special School/Resource Centre Programmes**

Some special schools, especially those for learners with hearing loss provide early intervention programmes on a full-time or part time basis. Many are also equipped to conduct certain assessments that require technical equipment such as apparatus to assess hearing loss. Within their emerging role as resource centres, these roles can be enhanced and extended to provide services to communities consisting of:

- early intervention and home programmes
- assisting to facilitate access to formal schooling and support programmes
- obtaining initial training in skills that would facilitate their inclusion into the local ordinary school such as Braille literacy, orientation and mobility, progress in sensory integration, etc.
- parent guidance and empowerment
- information sharing with community organisations and local schools on early intervention programmes

It will be the responsibility of the District-based Support team to coordinate and integrate the services of the special schools into the comprehensive community based support system.

NB. No learner who has been involved in any of the early childhood programmes of a special school, will be permitted to enter Gr R/Gr 1 at the special school, without going through the route outlined in the strategy and obtaining a final endorsement from the DBST. As outlined in Form 2, the motivation must outline:

- The content of the programme which will be followed at the special school
- The reason why this programme cannot be sustained at the local ordinary school
- Whether the learner should attend the programme on a full-time basis
- What the duration of the programme will be and at what intervals it will be reviewed to ensure whether the learner is still benefiting from them

### **3.2.9 Other Service Providers**

The DBST must establish and constantly update a database of all services that are available in an area. Monitoring mechanisms must be put in place to ensure that all learners who reach school going age are admitted to the most appropriate educational site with the necessary support. Shelters and support centres for street children and orphans are a case in point.

### **3.2.10 Local Schools**

- Must fulfil the role of a community centre by becoming a first point of call for parents who need advice on services available.
- All schools should have an admissions committee that work closely in collaboration with the Institution Level Support Team
- The ILST will conduct a first level of screening before referring it to the DBST
- They will refer families to the DBST who will be responsible to arrange access to early intervention programmes

### **3.3. Who applies?**

This part of the protocol refers mainly to those learners who have already been identified by either their parents, or ECD providers, the health system and other role players, as learners who will find it difficult to progress in the ordinary local school without additional support. They are the learners who to date would not have been considered for admission to ordinary schools due to the nature of their disability and or particular life circumstances, but who can actually be accommodated if the necessary preparatory steps are taken to organise support even before they enter school for the first time. This process is aimed at ensuring that learners are welcomed together with their peers on the first day of term and that there is a desk with their name on it. It further provides guidelines for determining appropriate grade placement for older learners

- First time entries to formal schooling/Gr R
- Older learners of compulsory school going age who enter school for the first time
- Learners who have been enrolled in specialised programmes and want to be admitted to an ordinary school.

## Scenarios:

1. Learner who can be accommodated in local school through capacitating class teacher and ensuring availability of assistive devices (see range of scenarios in Section 8)
2. Learner who can be accommodated in local school with additional support from outside the school (See Section 8)
3. Learner who has to access support programmes in alternative settings e.g. learners who experience severe and complex barriers (See Section 8)

### 3.4 Stages Of Process

#### 3.4.1. Advocacy/Information Day in July

- Targeted and small scale programme informing communities, parents and service providers of application procedures to be followed to access support
- Raising awareness about the strategy as part of the general admission campaign which is run by Provincial Departments of Education from June to September of each year
- Targeted mobilisation, identification and registration of **out of school youth** who experience barriers to learning and development ensuring the following:
  - Registration on Database – Handover of Health/Social Development Database to EMIS – tracking learners and whether they are accessing sustained support
  - Information sharing on the kinds of support programmes that can be made available in the short, medium and long term.
  - Supplying personal assistive devices – coordinated between education, social development and health (regulating funding of assistive devices)
  - Information sharing on the role of parents in the process
  - Organising parent guidance
  - Providing correct information
  - Providing assistance with completion of **Form 1**

### **3.4.2 April to December of the year preceding first admission to Gr R**

All public, private, formal and informal ECD centres/sites must take responsibility for initiating the admission process in consultation with parents/caregivers. See role of ECD providers outlined in 3.2.6.

It is important to recognise that all learners must have access to sites, irrespective of the fact that they may experience barriers to learning of an intrinsic or extrinsic nature. In most cases, exposure to a stimulating and inclusive environment is vital for:

- preparing such learners to progress at school.
- ensuring that learners who experience undetected delays, will be screened and registered to access the relevant support and intervention.
- developing socialisation and participation skills which are crucial prerequisites for learners to succeed in inclusive settings.

#### **Procedures to be followed:**

- Inter-sectoral collaboration
- Advocacy to increase enrolment into centres/services
- Capacity Building of Parents and Practitioners
- Early identification and intervention
- Programme delivery
- Supply of Assistive Devices

All applications will be in line with the provisions of the South African Schools Act and the Admission Policy which are to be revised to incorporate the provisions of this Strategy and Protocol.

The purpose of the application will be to determine the level and nature of support that will be needed as the child enters Grade R for the first time and to ensure that support is available from the outset.

### **3.4.3 April – December of the year preceding first admission to Gr 1**

#### **3.4.3.1 Where do families/learners apply?**



Families or learners (in the case of orphans and children in child-headed households) apply to the local school where an Admission Committee is established and trained to manage the protocol.

**NB. NO LEARNER IS ALLOWED TO APPLY DIRECTLY TO A SPECIAL SCHOOL/RESOURCE CENTRE**

### **3.4.3.2 Who should be involved in the procedure?**

#### **a. Admissions Committee**

An admissions committee must be established at each school to manage admissions procedures in line with a school admission policy which is in line with the South African Schools Act and has been approved by the District Office.

The role of the committee will be to:

- Put in place procedures which are welcoming for all applicants
- Ensure accessibility – the school secretary who receives the first call, should not have decision making powers and should not become a barrier to access
- Record all applications
- Identify learners who have additional support needs and will have to be interviewed with their parents by reviewing Form 1 (if available).
- Ensure that Form 1 is filled in for learners who need additional support
- If necessary conduct an interview with the learner and the parents to determine the most important needs of the learner
- Ensure that these support needs are recorded for the attention of the receiving class teacher
- Determine whether further assessment procedures need to be followed by the ILST (see scenarios under section 8)
- Refer the learner to the Institution Level Support Team for more extensive screening

It must be kept in mind that a very small percentage of applicants will need to go through this procedure. Therefore, it should not be unduly time consuming.

#### **b. Institution level support team (ILST)**

In the case of learners with complex support needs that cannot be readily determined by the Admissions Committee, it will be the responsibility of the Institution Level Support Team at the school to conduct a more extensive interview with the parents and learner during which the Assessment for Additional Support Needs Form (Form 2) is completed.

The role of the team will be to:

- Conduct a full screening of the learner's strengths and support needs in the spirit of inclusivity
- Respect the parents' knowledge of and aspirations for the child and refrain from overpowering or intimidating parents
- Conduct the assessment according to guidelines outlined in a School Admissions and Inclusion Policy which have been approved by the SGB
- Determine class in which the learner will be admitted and outline support measures to be introduced
- Orientate teacher/phase coordinator in developing an individualised learning programme
- List needs in terms of provisioning of additional support in the form of training, materials, equipment and or assistive devices which need to be forwarded to DBST

**c. The School Management Team (SMT)**

Once the ILST has completed the assessment procedure with the parents, their recommendations will be made to the School Management Team.

The responsibility of the SMT will be to:

- Investigate how the school can make resources available to support the inclusion of the learner/s.
- Validate the recommendation by the ILST taking all factors into account from an inclusivity perspective.
- Submit documentation to the DBST and follow up on their response to ensure swift action.
- Implement all interventions recommended by the DBST and communicate these to the parents/caregivers.
- Take measures to ensure the smooth admission of the learner in Grade 1.

- Put in place measures to access additional equipment, training, consultative support, part time therapist intervention, facilities or materials.

**d. The School Governing Body (SGB)**

The SGB is primarily responsible for developing inclusive policies, cultures and practices at schools. As representative of the interests of all parents within the school community, they should never take the position of wanting to exclude learners for whatever reason. They are also not in a position to veto or approve a decision on admissions as this role belongs exclusively with the DBST.

The responsibility of the SMT will be to:

- Ensure that the admission policy and procedures of the school are in line with the stipulations of this Strategy
- Establish and maintain a sub-committee on Inclusive Education
- Inform parents about their rights in terms of accessing support
- Investigate and address any barriers within the school context, ethos and practices.
- Act as advocates for all learners who may be experiencing barriers to learning

**e. District-Based Support Team (DBST)**

The DBST will play a facilitating role to ensure smooth access to school for all learners who experience barriers to learning.

The responsibility of the DBST will be to:

- Prioritise the placement of learners who fall within the range of high and very high needs
- Verify the initial screening done by the ILST of a school.
- Respond to applications within three weeks.
- Set in motion the provision of the necessary support provision whether in the form of equipment, training or staff time on a consultative basis.

**3.4.4 School Entry Stage (8 – 15 years)**

Learners of compulsory school going age who enter school for the first time after the age of 8, will also have to be assessed to plan for the support which they will have to receive at the school in order for them to progress in the curriculum.

They will basically go through the same procedure as outlined in the previous section. However, a range of additional issues need to be addressed in their case. These are outlined in Section 4 of this Strategy.

#### **3.4.5 Admission to special programmes including special classes, aid classes, full service and special schools/resource centres:**

As outlined above, a decision about permanent or part time access to programmes in specialised sites rests solely with the DBST which has a delegated authority to make the decision, monitor implementation and review placement on an annual basis.

The following will be taken into consideration when such a decision is made:

- Recommendation comes with time frames
- Review of progress within programme and of placement at school going age
- What support has been provided
- Efficacy of support
- What further support is needed and can it be provided in ordinary school on an outreach basis
- Time needed to complete programmes
- Exit strategies

It is vital that the District will go out to outlying and rural areas and disadvantaged communities where problems in accessing services are most critical.

Currently there are still some special classes within special schools. These need to be phased out as part of the process of transforming Special Schools to become resource centres. Within the framework of looking at support from a programme perspective rather than a placement option, all specialised sites need to be transformed into specialised services/programmes which will be delivered to learners in mainstream or ordinary settings on a full time or part time basis.

### 3.5 Accessing additional resources

A physical and material resources manual will form part of this strategy with procurement guidelines for Districts and Schools. Human resources will eventually become available once a new post provisioning system is in place.

### 3.6 Appeal by parents

Parents must be informed both by the process as well as the school that they have a right to appeal the decision by the ILST. The appeal can be made to the District Based Support Team and must be responded to within three weeks. A procedure for an accessible and user friendly appeals process need to be developed as part of this Strategy.

## 4. TOOL KIT

### 3.7.1 [FORM 1: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS](#)

Learners who approach a school/Gr R site for the first time should be in possession of **Form 1** which has been completed for the child by the Early Intervention Provider or the parent/caregiver.

If the Admissions Committee feels that it is necessary, the learner must be referred to the ILST which will conduct a more comprehensive screening by completing **Form 2**.

The tools will eventually be available in all official languages and must be made accessible for all parents/caregivers, especially those who are illiterate in a supportive way. It must be remembered that parents who approach an ordinary local school to request admission for a learner who is experiencing barriers to learning will need reassurance and encouragement as they may have experienced frequent exclusion and marginalisation.

### 3.7.2 [FORM 2: ASSESSMENT FOR ADDITIONAL SUPPORT NEEDS AND PROVISION](#)

The Purpose of Form is to:

- Screen the nature and extent of support needed by the prospective learner
- Outline the support needed by the learner
- Review school context and identifying all available resources:
  - Within School

- Within Community
- To be obtained from Full Service School
- To be obtained from Special School/Resource Centre Application for additional resources required from district
- Compile profile of learner's strengths and support needs to be given to the receiving teacher and or the ILST
- Motivate for additional support from the district
- Motivation for access to support at or from an alternative site on a permanent or part time basis.

### **3.7.3 Appeals Process**

Detailed guidelines to be followed by applicants, districts and provincial head offices to track appeals and ensure resolution and eventual admission.

### **3.7.4 Tools for Advocacy Programme**

- Advocacy Booklet/pamphlet -
- Posters in Primary Health Care Clinics and in all schools
- Door to door campaigns involving Govt. Departments
- Radio messages in all official languages differentiated and targeted (in long term)
- Making use of role models and representatives from NGOs and DPOs
- Information to schools – feeder, full-service and special schools/resource centre
- Defining boundaries of exemption
- This list is not exhaustive

### **3.7.5 Data Base**

#### **Main purpose is for tracking and planning purposes**

- Components of additional needs to be captured moving away from category of disability as organising principle
- Should focus on recording of actual support programmes
- Numbers of learners referred and the nature of the referrals – including children in conflict with the law, reports on corporal punishment, expulsions
- Individual Progress

- Providers involved
- Case managers/mentors/advocates
- Review labour intensity of the system
- Street Children

### **3.7.6 Register for additional support**

By the end of the field test Criteria for Screening for high and very high support have to be in place.

### **3.7.7 Policy on minimum standards for outside assistance**

Every effort will be taken to first make a support programme available in the local setting

# Part 4: Screening, Identification and Assessment Processes at School Level

## 1. INTRODUCTION

At the core of the revised strategy for support is the ordinary class teacher. Within the redefined notion of what constitutes support, there are a range of actions which could be considered central to effective support. Individual support will generally aim to increase the inclusiveness of the curriculum and becomes an integral part of all teaching. Though the major responsibility for the coordination of what is considered to be additional support may rest with a limited number of people, all staff are involved in support activities.

Once learners have to enter the formal education system, institution-level support teams should be involved centrally in identifying 'at risk' learners and addressing barriers to learning. To achieve this important objective, the Department of Education shall work closely with the Ministries of Social Development and Health, and the provincial departments of education. With respect to the school system, early identification of barriers to learning will focus on learners in the Foundation Phase (Grades R-3) who may require support for example through the tailoring of the curriculum, assessment and instruction. (Education White Paper 6, section 2.2.6.5)

The Department of Education recognises the importance of continuous screening, identification and assessment. The ultimate goal is the development of learners. Their development is dependent on effective teaching, which, in turn, is dependent on the development of effective curricula and supportive teaching and learning environments. Educators and schools need to be constantly learning and growing, and need ongoing support to achieve this.



The core principle of making use of existing scarce resources in a more cost effective way is also applicable in relation to special/remedial/aid classes. All special/remedial/aid classes will be converted into learning support services. This means that the teacher will not be attached to a permanent class but that s/he will provide a learning support service for all in the school. As the classes will be phased out, mal-practices such as testing learners for admission will stop immediately.

This section focuses on learners who are entering the first year of their formal schooling. It outlines the role and responsibilities of the educator, parents/caregivers, Institution Level Support Teams (ILSTs) and District Based Support Teams (DBSTs).

## **2. PROCEDURES**

Screening, Identification and Assessment Process at school is an ongoing process, which starts with the educator's contact with the learner and the information obtained from this process should provide feedback on the learning process and by identifying strength and barrier to learning. By the end of the first six months it is expected that the educator, in consultation with relevant stakeholders (e.g. parents, HOD) should have an initial impression on what to report to parents, colleagues etc. At this point the educator must complete the screening with a view to have a deeper understanding of the barrier and the support needed in other words he must perform detailed a assessment.

### **• OBSERVATION**

This is the most accessible and widely used technique for educators. The educator records the significant findings/ notes for future reference. Observations can be formal or informal, planned or unplanned. It can be used to best advantage when it is planned to be ongoing, systematic and a regular part of the teaching process. Educators also observe learners as a 'spectator' not involved in the learning situation or as 'participant' involved in the learning situation. The accumulation of observations, through the process of keeping records, leads to the development of a learner profile.

Observation as a tool is not only useful for one's own class but can also be applied between teachers. Inviting a colleague to do observation in your class can often uncover hidden factors within the classroom environment or between learners and the teacher

which could be a barrier to learning. Developing an approach of constructive peer observation can promote team work and critical reflective practice.

- **CLASSROOM BASED DIAGNOSTIC ASSESSMENTS**

These teacher-made assessments are designed to give a clearer picture of learner performance and the areas of need for intervention.

- **PROFILES**

A comprehensive, up-to-date profile should give the educator a holistic picture of the strengths, weaknesses, opportunities and threats, which have a major impact on the learner's performance. The profile should also reflect the knowledge, skills, attitudes and values and the socio-economic environment of the learner. Information from school records, parents, and other adults, and the educator's own records of personal observations and interpretations, all form part of the learner profile.

- **PORTFOLIOS**

Portfolio assessment is an ongoing means of obtaining information from the learner's work samples.

- **INTERVIEWS**

Educators arrange one-on-one interviews with parents, learners and other adults to gather information, which could assist her/him in uncovering and minimising the barriers to learning as experienced by the learner.

- **EARLY IDENTIFICATION OF BARRIERS EXPERIENCED BY SOME LEARNERS**

It is crucial that barriers that some learners may be experiencing to learning should be identified as early as possible within the Foundation Phase.

In order for the educator to plan effectively to accommodate different learning styles and pace and give the necessary support, it is vital that he/she knows each learner. A child who has additional support needs, should be identified early enough so that something can be

done from the outset. Intervention must begin as early as possible (especially when a medical intervention is needed such as supplying hearing aids).

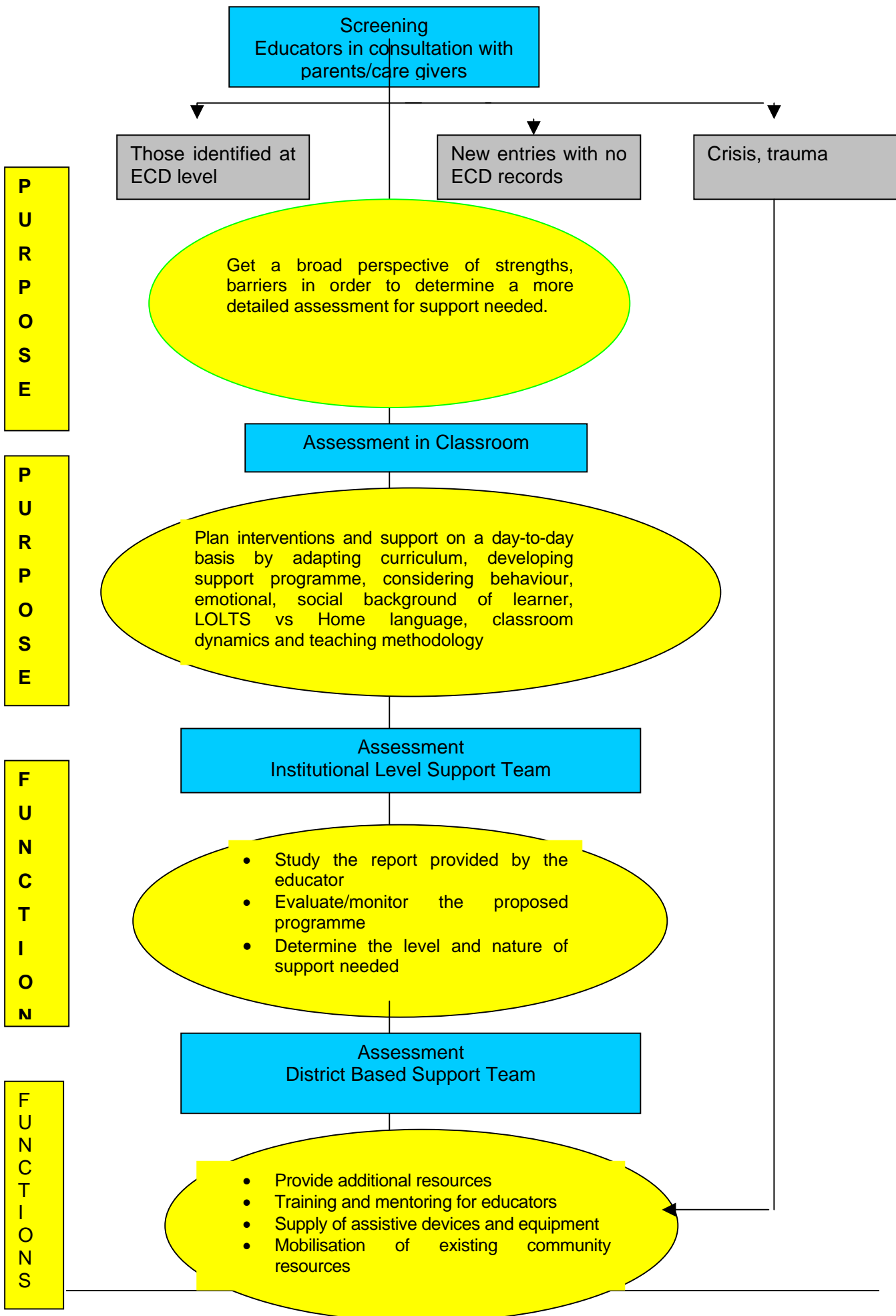
Educators should have a planned and coherent early intervention procedure. All learners should experience learning, which is supported all the time. Observe learners carefully from day one in order to identify general areas of concern in Literacy, Numeracy and Life Skills. These needs/barriers/gaps in learning need to be supported or scaffolded by the educator.

Educators should record findings in the learners' profiles. The next step will then be to plan on how teaching will be adapted to meet the needs of these learners in the classroom. To assist teachers in extending the range of strategies to be used to support learners with additional support needs, other role-players such as the Institution-level Support Team and members of the District-based Support Team (See Education White Paper 6) can be brought in. Their role will be to assist with an appropriate intervention programme for the learners through a process of training, consultation, mentoring and monitoring.

Parents/guardians should be notified timeously about these decisions and a realistic support/enriched programme should be set up. Parents are key partners in the learning process and need to know about and understand this role.

Educators should identify learners who

- ⌚ are in need of an enriched programme
- ⌚ are in need of a support programme
- ⌚ need diagnostic help in specific aspects of a Learning Programme
- ⌚ have a learning barrier
- ⌚ are over-aged
- ⌚ have problems because there is a mismatch between home language and the language of teaching, learning and assessment
- ⌚ have physical disabilities, e.g. vision, speech, etc
- ⌚ have health problems, e.g. illnesses, hunger, etc
- ⌚ have problems with emotional stability due to harassment, violence, etc.
- ⌚ do not attend school regularly
- ⌚ show signs of abuse or neglect



### **3. ROLES AND RESPONSIBILITIES**

#### **3.1 Educator**

The Educators' role in an inclusive assessment is crucial: what is really required is a conceptual understanding of inclusion and the diverse needs of learners including those with disabilities. Learning programmes and materials as well as assessment procedures would need to be made accessible to all learners and accommodate the diversity of learning needs in order to facilitate learners' achievement to the fullest. The learner profile document will serve primarily as a tool for educators to plan interventions and support on a day-to-day basis as part of the teaching and learning process. Educators must take care not to label learners who are identified for additional support and so doing promote exclusionary practices.

The uncovering of barriers to learning must be based on sound observation, interviews and consultation, reflection, formative, previous records and also be grounded in curriculum.

Barriers to learning could be intrinsic, extrinsic, curriculum-based, systemic and social. In exploring all these avenues the teacher must do this in partnership/caregivers and must also involve the learner.

When planning activities the following steps can be taken to effectively address diversity in the classroom:

- Consider individual past experiences, learning styles, and preferences;
- Develop questions and activities that are aimed at different levels of ability;
- Modify expectations for some learners including adapted objectives or outcomes;
- Provide opportunities for a variety of participation levels such as individual, pairs and small group activities;
- Give learners choices in determining what methods they use for gathering, synthesizing information and in demonstrating their understanding of a concept or performance of a skill or task;
- Accept that the individual methods are of equal value;
- Evaluate learners based on individual objectives and progress.

Once the educator has exhausted all strategies he/she will consult with the ILST. This can be a short verbal report that can be done in an informal way where educators involved with the

learner can make their inputs and advice each other on how to support the learner. The educator will go back to try and support the learner as advised. Once again if after having consulted with other educators and provided the learner with the necessary support the learner is still experiencing difficulties, the matter will be referred back to the ILST

### **3.2 Institutional-level Support Teams:**

*“Institutional-level support teams should be involved centrally in identifying ‘at risk’ learners and addressing barriers to learning. With respect to the school system, early identification of barriers to learning will focus on learners in the Foundation Phase (Grades R-3) who may require support, for example through the tailoring of the curriculum, assessment and instruction.”* (Education White Paper 6: Building and Inclusive Education and Training System, p. 33)

If there are no Institutional-level Support Teams (ILST) exist District-based Support Teams (DBST) must assist to set it up. Institutional-level Support Teams need to support educators and care givers in this process by providing an opportunity for regular, collaborative problem-solving around areas of concern, and facilitating the provision of support where needed. To ensure the effective intervention by the ILST their role must be accommodated in timetabling. In each case a cycle of intervention and support by the educator/s facilitated by the Institutional-level Support Team needs to be implemented before additional support from outside the site of learning is requested. Only where high-level support cannot be organised in any practical and cost-effective way, and it is the preferred option of the learner and/or his parents/care givers, enrolment in a facility where higher levels of support are available, can be considered. This option must however be validated by the District Support Team and will have to be based on a thorough evaluation of the learner and school profiles. No decision may be based solely on the category of disability of the learner. No psychometric tests may be applied in the admissions process. No learner whose support needs can be answered in an ordinary or full-service school close to his/her home may be admitted to a special/resource school.

An institutional-level support team (ILST) is an ‘internal’ support team within institutions. In each institution, this team will ultimately be responsible for liaising with the district-based support team and other relevant support providers about identifying and meeting their own institution’s needs. For this reason, institutional-level support teams should be made up mainly of educators and staff from each individual institution

The ILST will:

- Study the report provided by the educator on barriers identified and support provided /implemented up to that point and the impact of the support.
- Assess support needed and develop programme for educator and parents,
- Provide training/support to be implemented in the classroom if necessary
- Evaluate/monitor after proposed programme is in place for a period agreed upon by ILST, Educator and parents. The kind of support to be provided will determine length of a formal report which should be compiled by ILST.
- Identify further Institutional Base Support assets and mobilise
- Encourage collegial support/peer support.
- Determine the level support needed

The core purpose of these teams is to support the teaching and learning process. Key functions that relate to this include:

- Co-ordinating all learner, educator, curriculum and institution development support in the institution. This includes linking this support team to other school-based management structures and processes, or even integrating them so as to facilitate the co-ordination of activities and avoid duplication.
- Collectively identifying institutional needs and, in particular, barriers to learning at learner, educator, curriculum and institutional-levels.
- Collectively developing strategies to address these needs and barriers to learning. This should include a major focus on educator development and parent consultation and support.
- Drawing in the resources needed, from within and outside of the institution, to address these challenges.
- Monitoring and evaluating the work of the team within an 'action-reflection' framework.

### **3.2.1 COMPOSITION**

It is suggested, that the following people make up the core members of this team:

- educators with specialised skills and knowledge in areas such as learning support, life skills/guidance, or counselling;
- educators from the school/institution: these could be educators who volunteer because of their interest, or who represent various levels of the programme e.g.

Foundation Phase, etc., or who represent various learning areas, e.g. language and communication.

- educators who are involved directly in the management of the school/institution: this could be the principal, a deputy-principal or another member of the management team;
- educators on the staff who have particular expertise to offer around a specific need or challenge.
- non-educators from the institution: this includes administrative and care-taking staff;
- learner representatives at senior, further education or higher education levels: this is an important addition to the team if one wishes to support 'peer-support'.

In addition to the above core team who would meet on a regular basis to 'problem-solve' particular concerns and challenges in the institution, the following additional people could be brought into some of the team's meetings and processes to assist with particular challenges:

- parents/caregivers at early childhood centre or school-levels: the inclusion of interested and specifically skilled parents would strengthen the team;
- specific members of the district-based support team, including special/resource schools;
- members of the local community who have a particular contribution to make to specific challenges;
- educators from other education institutions, particularly from full-service schools and those that may be in a 'cluster' relationship with the school/institution concerned.

Where high-level support cannot be organised in any practical and cost-effective way at institutional level the DBST is the next level to provide the additional support. The ILST should provide the DBST with evidence of support provided to the learner at institutional level. ILST should always involve and inform the parent about decisions taken to support the learner. The DBST should establish the what kind of support is needed by ILST in order to support the learner, what the strength of ILST is and consult around where additional support can be obtained and also assist ILST to recognise further community based support and facilitate collaboration. Provide expertise available in DBST with the view of enabling/strengthening/empowering ILST

### **3.3 District-based Support Teams**



The District-based Support Teams will provide additional resources if the barriers that a learner might encounter are difficult to identify and act upon by ordinary or full-service schools. They will also play an important role in capturing data from schools, monitoring and making available support needed. District support teams will have a range of resource staff to support ordinary and full-service schools. Support can consist of a range of interventions such as training and mentoring for educators in curriculum delivery, the mobilisation of existing community resources such as NGOs and DPOs and the supply of assistive devices and equipment. No decisions about the enrolment of a learner to a full-service or special/resource school may be based on any form of psycho-metric testing.

This report will firstly inform classroom practices

Parents should be part of the process. Parents should be invited to all meetings and encouraged to participate in decision-making process.

### **3.4 Parents or Care Givers**

Acknowledging the pivotal role of parents/care givers in the education and training is the key factor in the early identification of emerging barriers. Parents'/care givers' observations and comments can lead the educator to find the exact nature of the barriers that a learner experiences. Parents/care givers should at all times be involved in the identification and assessment processes involving their child and should be regarded as equal partners in this process. Parents/care givers should also be free to initiate contact with the educators regarding their child's progress. When choices have to be made about the learner's enrolment into a site where additional support is available, parents/care givers need to have full information about all options so as to make informed choices. The unwillingness or inability of the system to support the learner in the current site should never be a primary motivation to move a learner, especially where this involves that he/she has to attend school far from home. The financial situation of the family and their capacity to pay (especially in terms of transport) for the choice of school should be taken into account.

Parents should be made aware that the focus is on overcoming barrier to learning and not witch-hunting. They could contribute to this process through formal and informal meeting

They could assist by;

- Making all records for learner profile available when the need arise
- Provide information regarding developmental history, health, home behaviour, emotional state, personality etc.
- Monitor and report on progress of the learner at home.

- Participate actively in process. Be encouraged to provide input, participate in decision-making, making suggestions for their role in supporting.

### **3.5 Learners**

Learners themselves should be involved in assessing their progression. Learners' own perceptions about themselves and their learning are crucial when identifying the need for support. Both learning needs, social relationships and emotional growth of learners need to be taken into account when decisions are made about the site where they are to receive additional support. Such decisions cannot be made without consulting the learners themselves.

## **4. TRAINING**

Training should be level based and cover the following areas:

### **4.1 Teachers**

- Inclusive education and diversity management
- Basic screening procedures
- Identification of barriers to learning
- How to do self-reflection and/or institutional reflection
- How to develop intervention strategies to support the learner
- Mobilisation and utilisation of available resources at institutional level

### **4.2 Institution-level Support Systems**

- How to support the learning and teaching process by identifying and addressing learner, educator and institutional needs.
- Managing Curriculum differentiation to accommodate diversity
- Team problem-solving
- Teacher capacity building through classroom observation, mentoring, consultation and sharing of knowledge and skills
- Community networking
- Conflict resolution
- Prevention of child abuse
- Developing support programmes for orphans and vulnerable children
- Coordinating the Assessment and identification practice within an Inclusive System

### 4.3 District-based Support Systems

- Redefining support
- Changing roles of district support staff
- Assessment and identification practice within an Inclusive System
- Change management and institutional development to develop inclusive schools
- Training, mentoring, monitoring and consultation
- Effective classroom observation
- Programme development
- Effective inter-sectoral collaboration
- Developing institution-level support teams

### 4.4 Parents

Parents are regarded as important role players in support of inclusive education. The intended paradigm shift will have to take place not only amongst teachers, but also amongst parents and the community as a whole. Training of parent should therefore include

- Conscientising parents and other community stakeholders to the messages of inclusive
- Understanding inclusive communities
- Developing community networks
- Parent participation

## 5. TOOLKIT

[FORM 2: ASSESSMENT FOR ADDITIONAL SUPPORT NEEDS AND PROVISION](#)

[FORM 3: ONGOING ASSESSMENT AND REVIEW OF SUPPORT NEEDS AND PROVISIONING](#)

[FORM 4: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS FOR RESOURCING AND MONITORING PURPOSES](#)

# Part 5: Procedures For Admission Of Older Learners To Schools And To Appropriate Support: 7 – 15 Years

This section deals with learners who have never entered school, who enter school late or who are considered to be over-age learners and are stuck in the GET band with no support and little scope for progressing to FET or to the world of work. Learners who fall within this category could be children or youth living on streets, with disabilities, in child labour, with chronic diseases, orphans, in conflict with law, addicted to substances, late beginners, etc.

## **Nature of Support: (One size doesn't fit all)**

- Facilitation of admission to schools/resource centres
- Programme Development – fast tracking guidelines, etc.
- Psycho-social support
- Assessing level of education
- Preparing the teacher of the relevant grade
- Suggesting alternative placement within schools
- Developing certification possibilities
- Investigating ABET possibilities
- Curriculum adaptation
- Taking all steps to prevent them from dropping out of the system
- Inter-sectoral collaboration between Education, Social Development, Labour, Justice, SAPS

## **Key Role Players:**

- Community role players – unpack roles in relation to DBST:
- Street workers
- Home based units
- Home based teachers/trainers/facilitors
- NGOs
- ILST coordinates support at school level
- DBST – monitoring, consultative, quality assurance role

#### **Tools, Procedures and Regulations:**

- Data Base (EMIS) – tracking device, record of interventions – in consultation with Soc. Dev. Or other relevant depts.
- Regulatory framework to prevent illegal practices
- Measures of Confidentiality - computer system design, who should have access to what information to prevent exclusionary practices
- Application forms for home schooling need to be extended (SASA)
- Assessment Tool which adequately captures environmental, social and emotional factors and curriculum needs, assessment of prior learning, assessing grade/level of education to make recommendation for most appropriate placement – adapt ABET placement tools.

#### **Admission and exit strategies:**

Apart from outlining admission strategies, a review of the effectiveness of support should be ongoing and repeated at least once annually. All stakeholders should be involved in reviews. Guidelines should be developed for the parent/caregiver consultation sessions to ensure appropriate power relations.

Exit strategies should be part and parcel of the reviewable assessment and support system. Exit strategies do not only refer to particular sites but also to specialized programmes. No programme should be seen as a permanent placement.

This section of the strategy will be further developed in collaboration with ABET and will also be informed by the studies on Street Children, Children in Child Labour and other Vulnerable Children which are currently underway.

# Part 6: Regulations Pertaining To Screening, Identification, Assessment and Support

## **1 RECOMMENDATIONS FOR NEW REGULATIONS OR AMENDMENTS TO EXISTING REGULATIONS:**

### **1.1 Regulations on early intervention:**

- Health, Soc. Dev. (Child Care Act, Home base care), SASA, ECD Policy, Provincial Acts (in line with National Policy), Admission Policy.
- Broad approach is to place responsibility with Provincial Coordinating Body informing the DBSTs to scan, align, coordinate, access existing local service providers.
- Allocation of budgetary responsibilities (preferably by age groups).
- Responsibility of Education only comes in from age 5.
- Co-responsibility before age of 3 – Funding will be attached to weighting the support programme – could be an incentive for inclusivity
- Early Intervention programmes: Role of Education is to provide educational expertise on programme development rather than provision (e.g. through Spec Schools/Res. Centres/FSSs/ECD) Soc Dev. Must coordinate the identification, funding, monitoring of Early Intervention programmes.
- Health can provide therapy services

### **1.2 Amendments to SASA:**

The South African Schools Act, 1996, does not adequately reflect the principles proposed in White Paper 6, in particular, the principle of equal access to a single inclusive education system. Further, the Act does not clearly reflect a move away from the limited conceptualisation of 'learners with special needs' to a broader view of 'learners who experience barriers to learning' as proposed by White Paper 6. For these and other reasons, a first set of amendments to the Act should be considered as first step of implementing the recommendations of White Paper 6.

Legislation should enhance the right of every learner to attend the site of learning of his/her choice, preferably in his/her neighbourhood. This right to choice could be exercised by the parent and/or learner (where applicable) in consultation with the relevant education department. This should ensure that within the parameters of the Constitution of South Africa and broader education policy and legislation, a range of support and opportunities for education must be available. Some minimum level of support should be available irrespective of where a learner chooses to receive his/her education whether it be in an ordinary school, full service school or resource centre supporting inclusive education.

Once the National Strategy for Screening, Identification, Assessment and Support has been finalised it will determine how and where learners can access additional support.

**The following recommendations for amendments to the South African Schools Act will have to be reviewed and finalised by the end of the field test:**

**Amendment 1:**

The term 'learners with special education needs', used in the act should be substituted by the term 'learners who experience barriers to learning'. The term could be defined to mean all learners who need additional support in order to access the curriculum. (Chapter 1: Definitions and Applications of Act).

**Amendment 2:**

Section 12(3) reflects and entrenches the idea of a dual system of education, that is, ordinary and special. The Act has to be amended to reflect an integrated system as well as making provision for the new concept of a public school as resource centre in support of inclusive education as proposed in White Paper 6. (p. 29) It is recommended therefore, that Section 12(3) be amended to read: an ordinary public school or a resource centre school in support of inclusive education. Further, in all other sections of the Act the category of public schools

referred to as 'a public school for learners with special education needs' be renamed resource centre school in support of inclusive education.

**Amendment 3:**

The Preamble of the SA Schools act should be revised to promote the fact that schools reflect the principle of a single, inclusive education system that ensures access to education in the widest sense for learners with disabilities and other learners who experience barriers to learning.

**Amendment 4:**

Section 3(2) be amended as follows: "the Minister must, by notice in the Government Gazette, determine the ages of compulsory school attendance for "learners experiencing barriers to learning based on the outcomes of and assessment of level and nature of needs."

**Amendment 5:**

There is a need to ensure that learners who experience barriers to learning have access to early education and early intervention programmes. It is recommended therefore that an additional provision be included in Section 3(2)(b) which could read as follows: "The Member of the Executive Council must set in place protocols for identifying learners who have high level support needs which need intervention at an early age and make provision for such learners to access early intervention programmes at relevant sites which could be resource centre schools which make provision for such services or early childhood development sites, capacitated for this purpose."

**Amendment 6:**

With regard to exit age the MEC can give permission for certain learners who experience barriers to learning to be eligible for school attendance until the age of 21. This is provided that it is shown that the learner is likely to benefit from the school programme and that he will receive the necessary functional and vocational training to facilitate his transition to the world of work. Links with the Department of Labour and the private sector in the creation of learnerships and employment services should be considered in the drafting of legislation and regulations pertaining to this matter.

**Amendment 7:**



The following amendment to Section 5(6) is suggested: “In determining access to education for a “learner experiencing barriers to learning ” the Head of Department and the Principal must take into account the rights and wishes of the parent of such a learner.”

**Recommendation 8:**

The following amendment is suggested to Section 11(3): “Learners experiencing barriers to learning may experience difficulty to participate in the democratic processes of a school. The Member of the Executive Council should take measures to ensure their participation.”

**Recommendation 9:**

Despite the fact that the provision “where reasonably practicable” in Section 12(4), is used in the Constitution it may here be construed as undermining the mandatory power of the Act and can be seen as putting it more in the category of permissive or discretionary. Preferred wording would be: “unless it cannot be made practicable”. The exact limitation measure will be determined by the provisions of the Protocol for Assessment. It is recommended that the clause read: “The Member of the Executive Council must, unless this cannot be made practicable, provide education for *all* learners at public schools, and provide relevant support services for learners experiencing barriers to learning as determined through an appropriate and equitable assessment procedure.”

**Recommendation 10:**

The following amendment to Section 12(5) is recommended: “the Member of the Executive Council must take all possible measures to ensure that the physical facilities at public schools are accessible to persons with disabilities.” (White Paper p. 28)

**Recommendation 11:**

The following additional clause is recommended as a complement to Section 12: “The Member of the Executive must ensure that adequate support is provided at public schools, both through school level and district level support structures, for learners experiencing barriers to learning.”

**Recommendation 12:**

An additional clause can also be added to Section 12 to make provision for the designation of certain ordinary public schools as full service schools. (White Paper p. 27)

**Recommendation 13:**

An additional clause can also be added to Section 12:

Support structures at district level, in ordinary and full service schools and resource centres must develop systems for the early identification and support of learners experiencing barriers to learning. (p. 24 of White Paper.)

**Recommendation 14:**

An additional clause can also be added to Section 12:

Support structures at district level, in ordinary and full service schools and resource centres must implement systems for the determining of level of support needed by learners experiencing barriers to learning so that support funding measures can be made available. (p. 41 of White Paper.)

**Recommendation 15:**

It is recommended that the section on “Membership of governing body of a public school for learners with special education needs” be deleted from the Act since it contradicts the principle of a single, inclusive education system.

**Recommendation 16:**

In view of the above, it is suggested that Section 23(2)(e) be added: “the following categories of representatives, if applicable: representatives of sponsoring bodies, representatives of organisations of persons with disabilities, persons with disabilities, individuals with expertise in addressing barriers to learning.”

**Recommendation 17:**

The following amendment to Section 23(5) is recommended: “The governing body of a public school must co-opt the chairperson of the sub-committee (Section 30(2)) that is responsible for addressing barriers to learning”.

**Recommendation 18:**

Section 30(2) should be amended as follows: “A governing body of a public school must establish a sub-committee to address barriers to learning, and to facilitate partnerships with consumer organisations to promote inclusion.”

**Recommendation 19:**

Legislative processes emerging from the White Paper should include the development of both *new legislation* to ensure that the wide range of issues outlined in these Guidelines are

addressed in all bands of education, and amendments to existing legislation (S.A.Schools Act. 1996, other Education Acts, and other relevant Acts from other Departments.)

### **1.3 Amendments to Admissions Policy:**

A range of amendments will have to be effected to the Admissions Policy once the guidelines have been field tested.

The section on the age requirement for admission to ordinary public schools (section 2), needs to be amended to include the procedures for assessing learner support needs and admissions to the relevant support programmes delivered by public sites of learning.

Section 22. Appropriate arrangements to admit learners to ordinary public schools must be outlined in accordance with the Strategy

Section 23. The conditions under which learners will be admitted to programmes which cannot be provided at ordinary schools need to be more closely defined. The procedures to be followed and the role of the DBST need to be outlined.

Section 24. This section needs to be radically revised as it is currently being abused.

Section 25. The roles of the team and other role players are outlined in greater detail in the strategy. The authority of the Head of Department in approving the decision, should be more effectively delegated.

Section 27. The procedures for older learners need to be outlined and the exact nature of and accelerated programme will be determined within the framework of the Revised National Curriculum Statement.

Section 29. More appropriate procedures need to be developed for learners who are 16 years of age or older and who have never attended school and who are seeking admission for the first time or did not make sufficient progress with his or her peer group, as referral to ABET does not always prove advisable.

### **1.4 Assessment Policy**

The Assessment Policy In The General Education And Training Band, Grades R To 9 And Abet (1998) which was published in terms of the National Education Policy Act, 1996 (Act

No. 27 Of 1996) already makes extensive provision for learners who experience barriers to learning.

The following sections will need revision and clarification

Section 8. Assessment in OBE focuses on the achievement of clearly defined outcomes, making it possible to credit learners' achievements at every level, whatever pathway they may have followed, and at whatever rate they may have acquired the necessary competence. This applies to adult and child learners with special education needs (LSEN), both in and outside ordinary schools and ABET centres. This is of great importance for LSEN, as both curriculum and assessment for this sector have presented problems in the past.

Section 19. Educators have the overall responsibility to assess the progress of learners in achieving the expected specific outcomes. The assessment process involves a partnership between educators, learners, parents and education support services (ESS) such as occupational and speech therapists and educational psychologists. Given that the ESS are spread very thinly, it is expected that they will in future be provided at district, circuit and area levels in order to maximise access to such services.

Section 32. It is expected that in the main, learners will progress with their age cohort. Where it is felt that a learner needs more or less time to demonstrate achievement, decisions shall be made based on the advice of the relevant role-players: educators, learners, parents and education support services. If a learner needs more time to achieve particular outcomes, he or she need not be retained in a grade for a whole year. No learner should stay in the same phase for longer than four years, unless the provincial Head o' Department has given approval based on specific circumstances and professional advice.

### **Assessment and special learning needs**

The process of assessing learners with special needs, including gifted and talented learners shall follow the same principles outlined in this policy. The policy on LSEN is currently being developed and the following guidelines are expected to be progressively applied as capacity is increased.

Section 42. It is important that learners who are likely to experience barriers to learning and development are identified early, assessed and provided with learning

---

support. Ideally, barriers to learning and development will be identified in the early childhood development phase (0-5 years) by parents, professionals in the health sector, community-based and school clinics. This will require the establishment of clear links between these services and the formal education system.

Section 43. Educators should within the guidelines of the Education Support Services (ESS) play a central role in the assessment of barriers to learning and development. Specialist education support personnel should be called upon to support educators when specialised assessment procedures are required to identify learning difficulties.

Section 44. Some learners with learning difficulties can be appropriately assessed in the same way as those without learning difficulties. However, some learners with learning difficulties such as those with severe disabilities may require additional support during assessment. In these instances additional time may be required to conduct the assessment.

Section 45. Good practices at learning sites would include measures which would:

- ensure that learning support plays a full part in the assessment and reporting process;
- develop a reporting system which does not unfairly discriminate against LSEN or give the impression that learning support is only concerned with those who have learning difficulties; and
- provide all parents with real opportunities to support their children's learning.

Section 46. Education support personnel have an important role in supporting educators and parents in assessment and they should develop appropriate intervention strategies to make assessment effective.

Section 47. The implementation of this new system of educator-driven assessment must be supported by a programme of orientation and training of educators and education support services personnel.

## **1.5 Policy on group and individual psychometric assessment:**

This strategy removes the need for any group or individual psychometric assessment to be conducted to determine the level of intensity and the nature of support needed by learners. Regulations need to be drafted in this regard through a consultation process with all stakeholders.

#### **1.6 Norms and Standards for Districts:**

Detailed delegations will be captured in regulations as to who will ultimately be responsible at each level of decision-making.

#### **Roles and Responsibilities**

Roles and responsibilities of various officials and educators will be incorporated into revised job descriptions and conditions of service within the framework of the District Based Support Team.

#### **1.7 Children's Bill, Child Care Act and Child Justice Bill**

The regulations pertaining to learners who are in need of care are outlined in the Child Care Act which will eventually be replaced by the Children's Bill.

Regulations pertaining to children in conflict with the law are outlined in the Criminal Procedures Act which will be replaced by the Child Justice Bill.

Issues related to screening and identification of educational support needs, need to be outlined in both these pieces of legislation in accordance with the approach of this Strategy.

## **2. INFORMATION MANAGEMENT SYSTEMS**

The strategy will be highly dependent on effective information gathering and management systems. These systems will have to focus on:

- Learners who have been identified to be in need of additional support
- Effective delivery of support programmes
- Accountability of all levels of the system
- Review of funding allocation made



# Part 7: The implementation plan of the strategy

The following outcomes towards the implementation of the Strategy for Screening, Identification, Assessment and Support are outlined in the Strategic Plan of the Directorate Inclusive Education for 2005 - 2009:

1. Protocols for Screening, Identification, Assessment and Support field tested in designated ordinary schools in nodal areas as well as in all special schools (2005)
2. Analytic report on field-test with evidence based recommendations for Protocols for Screening, Identification, Assessment and Support available (2005)
3. Protocols for Screening, Identification, Assessment and Support revised, approved and ready for system-wide implementation (2006)
4. Protocols for Screening, Identification, Assessment and Support implemented in all provinces (2007)
5. Protocols for Screening, Identification, Assessment and Support revised and consolidated (2008)
6. First cyclical review of Protocols for Screening, Identification, Assessment and Support completed (2009)

The implementation of the Strategy for Screening, Identification, Assessment and Support will be incremental over period of five years and will comprise of the following components:

- Human Resource Development
- Field Testing/Research
- Systemic/infra-structure development
- Monitoring and evaluation



## Human Resource Development

Component	Strategies	Lead Agencies	Completed by
Development of first draft of training for the field test	Set up materials development and training team	Sisonke Consortium	1 June 2005
	Review Strategy Document	Sisonke Consortium	2 – 6 June 2005
	Writing process	Sisonke Consortium	6 – 27 June
	Training materials approved	DoE	26 August 2005
	Training materials ready for field test	Sisonke Consortium	12 Sept 2005
	Conduct Situational Analysis	Sisonke Consortium	2 June – 30 September 2005
	Outline Framework for Training based on findings of Situational Analysis and Field Test	Sisonke Consortium	1 Oct – 30 December 2005
Develop second set of training manuals	Revise first draft of training materials based on findings of field test	Sisonke Consortium	28 Oct. 2005 – 20 January 2006
Train staff in designated sites on the Strategy	Train training teams	Sisonke Consortium	24 – 28 January 2006
	Train DBSTs and Special Schools on application of the Strategy	Sisonke Consortium	1 – 11 February 2006
	Train educators, managers, support staff in Full-service schools and Special Schools/Resource Centres	Sisonke Consortium	14 – 28 February 2006
Train staff in all special schools on the Strategy	Conduct training in all other special schools within the system based on findings of training in the designated sites	DoE	April – July 2006
Develop final strategy for Human Resource Development	Determine implications of HRD Strategy for implementing the Screening, Identification, Assessment and Support Strategy	Sisonke Consortium DoE	March 2007
Train all districts on the Strategy	Roll-out training on strategy throughout all districts in the system	DoE	March 2008
Train all ILSTs on the Strategy	Roll-out training on strategy throughout all schools in the system	DoE	March 2009

## Field Testing / Research

Component	Strategies	Lead Agencies	Completed by
Conduct field test in sample sites	Setting up teams and selection of sample sites	Sisonke Consortium	1 – 16 Sept.
	Approval of selection criteria and sample sites	DoE	9 Sept.
	Conducting field test with first	Sisonke Consortium	19 – 23 Sept.

	draft training manuals		
	Reviewing results of field test in sample sites	Sisonke Consortium DoE	26 Sept. – 21 Oct.
Review Strategy on a cyclical basis	First review and revision of Strategy	DoE	Oct. 2005
	Second review of strategy based on research conducted in the field test in the nodal areas	DoE	March 2007
	Third review	DoE	March 2008
	Final review	DoE	March 2009

### Systemic/infra-structure development

Component	Strategies	Lead Agencies	Completed by
Establish District-Based Support Teams in designated districts	Develop Framework for DBSTs Select team members Establish DBSTs Train DBSTs to fulfil new roles in terms of the strategy	CSIR Consortium DoE	February 2006
Develop norms and standards for DBSTs	Develop norms and standards for DBSTs within the larger framework of District Development based on findings of the field test	DoE	March 2007
Conduct infra-structural improvements in Full Service Schools	Fully equip first series of schools to deal with a full range of needs and conduct a costing study	DoE PDEs through tender processes	March 2007
Conduct Infra-Structural Improvements in Special Schools	Based on findings of Field Test conduct programme of strengthening physical and material resources of special schools/resource centres	Provincial Departments of Education	March 2008
Develop Funding Norms for Inclusive Education	Develop funding norms for IE based on findings of the field test of the Strategy	DoE	March 2007
	Finalise funding norms	DoE	March 2008
	Implement funding norms	DoE	March 2009

### Monitoring and evaluation

Component	Strategies	Lead Agencies	Completed by
Monitoring implementation of Strategy	- Monitor the field test in designated areas - Monitor revision of the Strategy based on findings of field test - Monitor training in designated areas - Monitor development of final Guidelines	DoE External Evaluation team	March 2007
	Monitor implementation in all special schools	DoE	March 2008
	Monitor implementation in all districts and schools	DoE	March 2009

# Part 8: Field testing the strategy

## 1. CHALLENGES FOR THE FIELD TEST

- Shifting the frame of reference regarding admissions of both special and full-service schools
- Engaging special schools to understand and accept the move away from category of disability to level of support needs
- Addressing the logistical and training problems which such a move away from category of disability will entail
- Making actual resources available during the period of the field test to ensure the successful implementation of the recommended support programmes
- Refining the indicators of the instrument in Form 3 so as to be user friendly and unambiguous enough to be applied by ordinary teachers
- Determining the target audience of the field test: Designated full-service schools, special schools/resource centres, all special schools, rural, urban, advantaged, disadvantaged schools
- Determining a sample which will be representative enough to inform the whole system
- Development of Guidelines for the whole system which are to be field tested in the designated districts.
- Determining whether the strategy can be operationalised without the additional resources?
- How can provinces start organising support systems in the short term outside the framework of new funding norms? Which support strategies to be unfolded first.

- Ensuring that the rating scales for weighting of the support programmes can be applied correctly, consistently, fairly and equitably.
- Ensuring that new role functions are understood so as to ensure accessible, equitable and appropriate organisation of support.

## **2. PRACTICAL EXAMPLES OF HOW THE PROFILE DOCUMENTS SHOULD BE APPLIED**

The following are a few examples of how the instruments can be applied. It is for instance not possible to determine per se that a deaf learner has high-intensity support needs, a learner with Down Syndrome, moderate or a learner who has a learning disability, low needs. One has to also take into account a range of factors related to level of functioning, participation and contextual circumstances to be able to determine the level and nature of support needed by a learner.

To achieve this shift, it will be vital to include some scenarios in the training to outline the profiles of learners who will be falling within the various levels of support. The scenarios must shift the view of what constitutes high and very high needs from how it is currently being perceived in practice and where children with disabilities of a relatively moderate nature are referred to special schools as a matter of course. The system needs to ensure that only bona fide high needs are responded to in specialised facilities. Further, the scenarios need to challenge the stereotypical view of each category of disability by replacing it with an approach where each learner is seen as an individual with strengths and limitations whose needs have to be met by appropriate curriculum responses.

When deciding on the level and nature of support which needs to be provided to learners, the following four points have to be taken into consideration:

1. The category of disability does not determine the level or type of support which is needed by any individual learner, neither does a learner have to be moved to a certain setting to have access to certain types of support programmes.
2. A single type of institution may be capable of accommodating learners who fall within different zones of barriers to learning and participation, depending on where the learner can best be supported. This differs from one individual to another. It also implies that placement is less important than eligibility to access support programmes which can be

provided in the most cost effective way in the most appropriate site on either a full-time or part time basis.

3. The zone of barriers to learning and participation that the learner is assessed as having is fundamentally linked to the level and nature of physical, material and human resources provided. The barriers are also not always intrinsically linked to the disability of the learner, but very often to circumstances arising from his/her living and learning context. For a learner who does not have transport to a specific institution, that may become the most serious barrier to access whereas for another learner the inability of the teacher to convey the skills and knowledge which he requires, becomes a serious barrier.
4. The District-based Support Team can also become a provider of support programmes. This would mean that interventions which require skilled personnel, can be organised from the district by for instance providing consultative support/training to teachers by specialist staff based at the district office or special school/resource centre. Interventions which require material resources may also be organised from a central point such as the provision of assistive devices which are movable and/or can be shared.

<b>Levels</b>	<b>Levels of support required by learners with disabilities</b>	<b>'Zone' of barriers to learning &amp; participation</b>	<b>Type of educational institution where learners will be eligible to access appropriate support programmes on a full time or part time basis</b>	<b>Degree and nature of intervention by the District-based Support Service</b>
1 – 3	Low to Moderate levels of support	Low to Moderate	Ordinary schools	General and focused on building capacity of all teachers and ILSTs
4	Intensive support	High	Ordinary and Full service schools	More specific and providing consultative support around individual cases
5	Very Intensive support	Very High	Ordinary schools/ Full Service schools / Resource centres / special schools /	More intensive in the form of providing individual interventions which require more staff time or resources

The following scenarios are meant to show the shift in applying the instrument to determine levels of need:

## 2.1 Learners who might fall within the Low to Moderate Range (Levels 1 – 3)

### Scenario a

*Sandile is hard of hearing. When looking at all the indicators, one may find that she may have no useful hearing (in the high needs column), but that she has moderate expressive and receptive language, can lip read and or make use of residual hearing (through FM system), has few cognitive, fine motor and behaviour problems, does not come from a poor socio-economic home environment, has strong family support, lives within reach of a school with a high level of resourcing and the capacity to organize effective school based support. The completed learner profile will therefore show that the learner falls predominantly within the range of 'low-moderate zone'. Decisions to be taken around this learner would therefore not be based on his/her category of disability but on the level of support needed and how this can practically be organized. The ordinary school can arrange for the learner to use a FM system in class, organize teaching and assessment to accommodate him/her. The district support team could arrange support and training for teachers and the Institution Level Support Team by specialists who can be drawn from the District Based Support Team or a special school. If any of the above arrangements cannot be made, the learner could be given the choice of attending a full-service school.*

## 2.2 Learners who might fall in the High Range (Level 4)

### Scenario b

*Susan is a learner with severe intellectual disability. When assessed by the teacher the following profile emerges: she may broadly speaking fall within the high needs range with regard to cognitive functioning. Her cognitive skills in literacy may however fall within moderate range, numeracy skills in high needs, she may have good participation and social skills, mobility, receptive communication, hearing, vision and self-care. However, regarding expressive language, the learner falls within the high needs range, she is only moderately safe in terms of independent moving in and outside the school, fine motor skills fall within the moderate range, in terms of health needs the learner falls within the moderate range and also has moderate transport needs. The school profile shows that the local neighbourhood school would fall in the moderately effective range, because of lack of resources, large classes, safety problems, lack of capacity amongst educators, no Institution Level Support Team and a district support team which does not yet function effectively. Decisions on*

*organizing support for this learner who falls predominantly within the moderate-intensity support needs range and where the local school also has some level of developmental needs, may find that placement in a full-service school will be more appropriate. Had this learner lived in a district where there is a fully functioning district based support team with pro-active training on inclusive practice and had the school been highly effective, with good curriculum implementation and an Institution-level Support team, the learner may quite easily have attended the local school with support coming from the DBST and or special/resource school. The decision on the placement of the learner needs also not be permanent but should be reviewed annually. This case makes it quite clear that the decision must be based on a range of factors and not solely on the category of disability of the learner.*

### **Scenario c**

*Richard is in conflict with the law. Although only 14 years old he has been in and out of school due to involvement in street gang activities. He is at present awaiting trial and has been placed in a secure care centre. In the area of "challenging behaviour" he would require constant supervision and counselling by a youth care worker. In the areas of cognitive functioning with respect to literacy, numeracy and life skills, he has fallen far behind his grade age peers and will need assistance through a fast track programme. It appears that he has the ability to access the ordinary school curriculum. He has no expressive and receptive language problems. His socio-economic and family situation shows that he has no back-up from his home. His completed profile might show that he might be a learner who needs high-level support. However, if he has access to a rehabilitation programme, he will not need to be in a high needs facility for ever. His identification as a learner with high-level support needs is also not based on any category of disability.*

## **2.3 Learners who might fall the Very High Range (Level 5)**

### **Scenario d**

*Tebogo is a learner with severe limitation of movement because of cerebral palsy, with moderate cognitive ability, poor fine motor skills, little expressive and receptive language, a very low level of self-care, high medical needs and no transport to school, may fall within the very high zone of support needs. If contextual factors also indicate that the local school is not accessible, that support (e.g. physio-therapy) is not readily available in the district, etc. this learner may possibly best be accommodated in a special school/resource centre. If a special*

*school is not within reach, a full service school should also be targeted and equipped. All the contextual factors should however weigh heavier in the decision making process than the category of disability. If some indicators e.g. receptive language, cognitive ability and transport needs, accessibility of school and availability of physio-therapy on a peripatetic basis had been different, some other decision could have been arrived at regarding the placement of this learner.*

These are but four scenarios, which start explaining how individual and diverse the decision making process around each learner is. It also shows that the people who know the child best and who understand the capacity of the context to organize support and create a welcoming environment, are best situated to make decisions.



# Part 9: Assessment Tools And Forms

## **FORM 1: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS**

1. The form must be filled in for a learner who is applying for additional support for the first time at school level.
2. The form must be filled in by the parent/caregiver or the early intervention provider in consultation with the parent/care giver.
3. The completed form must be submitted to the local ordinary school in the year before the learner becomes eligible for formal schooling/Gr.R.

## **FORM 2: ASSESSMENT FOR ADDITIONAL SUPPORT NEEDS AND PROVISION**

1. The form must be filled in for a learner who is applying for additional support or for a review of the support provided.
2. The form must be filled in by the school which has recognized the need for additional support in consultation with the parents/care givers.
3. The completed form must be submitted to the District-based Support Team (DBST) through the Institution Level Support Team (ILST).

## **FORM 3: ONGOING ASSESSMENT AND REVIEW OF SUPPORT NEEDS AND PROVISIONING**

1. The form must be filled in for a learner who has been identified to have additional support needs.
2. The form must be filled in by the current school / the Early Childhood Development Centre in consultation with the parents/care givers
3. The completed form must be submitted to the District-based Support Team via the ILST

## **FORM 4: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS FOR RESOURCING AND MONITORING PURPOSES**

1. The form must be filled in for a learner on whose behalf a school is motivating for additional support and/or alternative specialized support.
  2. The form must be filled in by the District Based Support Team after verification of information provided by ILST
  3. The form may not be completed without consultation with the parents/caregivers
  4. The completed form will be used by the DBST to plan the resourcing and delivery of support programmes as well as to monitor the progress of the learner.
-

Registration Number:

## FORM 1: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS

(See guidelines for filling in of the form)

4. The form must be filled in for a learner who is applying for additional support for the first time at school level.
5. The form must be filled in by:  
the parent/caregiver  
Or  
the early intervention provider in consultation with the parent/care giver.
6. The completed form must be submitted to the local ordinary school in the year before the learner becomes eligible for formal schooling/Gr.R.

### SECTION A: GENERAL INFORMATION ABOUT THE LEARNER

Surname:	First Names:	Name used:
Date of Birth	Age	Gender
Nationality:	Race	Home language of learner

Current Early Childhood Development Centre/ Grade R/ Early intervention provider/Special School/Resource Centre:
Address:
Phone:
Fax:
e-mail:

Local school/Gr R to which application is made:
Proposed Date of Enrolment:
Address:
Phone:
Fax:
e-mail:

General information about family background:
--

Who does the child live with? Both parents/mother/father/caregiver/grandparent/other

Name of provider/principal of referring center:
Signature of provider: _____ Date: _____

Name of ILST Coordinator of local ordinary school:
Signature of ILST Coordinator _____ Date: _____

**SECTION B: DEVELOPMENTAL HISTORY OF LEARNER**

**1. Parent / caregiver input:**

1.1 What have been your experiences of your child since birth?
1.2 What are your observations about his strengths and weaknesses?
1.3 What are your aspirations for him/her?

## 2. DEVELOPMENTAL MILESTONES

(This sub-section needs to be further elaborated)

Replace with road to health card information

## 3. CONTEXTUAL REALITIES

<b>FAMILY DYNAMICS</b>	
Temporary family turbulence due to separation process, death, etc.	<input type="checkbox"/>
Family experiencing pressures due to chronic illness of family member, etc.	<input type="checkbox"/>
Learner experiences serious family trauma because of loss of parent/s and limited support	<input type="checkbox"/>
Learner experiences severe family trauma because of loss of both parents and limited support	<input type="checkbox"/>
<b>SOCIO-ECONOMIC HOME CONDITIONS</b>	
One/both parents are employed.	<input type="checkbox"/>
Family income is +R1000 a month.	<input type="checkbox"/>
Family dependent on welfare grant.	<input type="checkbox"/>
Family has no stable source of income.	<input type="checkbox"/>
Family living in squatter conditions.	<input type="checkbox"/>
Family living in brick and mortar dwelling	<input type="checkbox"/>
Child Headed family	<input type="checkbox"/>

## 4. EARLY INTERVENTION PROVIDER INPUT

(attach all available records, reports and record cards)

### 4.1 Early Intervention programmes in which the child has participated

Age 0 – 18 mths
Nature of programme/s
Successes of the programme/s
Age 18mths – 3years
Nature of programme/s
Successes of the programme/s
Age 3 – 5 years

Nature of programme/s
Successes of the programme/s
Gr. R
Nature of programme/s
Successes of the programme/s

#### 4.2 Recommendations for future support programme/s:

*Area in which learner requires support:	
1. Communication: <ul style="list-style-type: none"> <li>• Expressive</li> <li>• Receptive</li> </ul>	
2. Cognitive Skills: <ul style="list-style-type: none"> <li>• Processing skills</li> <li>• Task Behaviour</li> </ul>	
3. Behaviour management	
4. Physical development (motor, mobility, hearing, vision)	
4. Activities of daily living	
5. Medical or para-medical support	
* See Form 3 - Section on Indicators	

#### 4.3 Information on assistive devices:

Assistive devices already available to child:
---

Maintenance needs of these devices:	
Assistive devices to be provided in the learning environment	
Braille Typewriter	
Hearing Aid	
Earphones	
Voice Amplifier	
Stereo player	
Audio Tape recorder	
Whiteboard light	
IT resources for learner	
Touch-screen computer for Visual Impairment	
Braille printer	
Software for teaching literacy and numeracy	
Other (Specify)	

**4.4 Information on medical needs of child:**

Medicine
Surgical intervention
Follow-up surgical intervention
Chronic illness
Allergies
Other:

#### 4.5 Role which early intervention provider can continue to play in the future support of the learner

Individual learner intervention:
Consultation and mentoring:
Training:
Programme planning and assessment:

**FORM 2: ASSESSMENT FOR ADDITIONAL SUPPORT NEEDS AND PROVISION**

(See guidelines for filling in of the form)

1. The form must be filled in for a learner who is applying for additional support or for a review of the support provided.
2. The form must be filled in by the school which has recognized the need for additional support in consultation with the parents/care givers.
3. The completed form must be submitted to the District-based Support Team (DBST) through the Institution Level Support Team (ILST).

**SECTION A: GENERAL INFORMATION ABOUT THE LEARNER**

Surname:	First Names:	Nick name:
Date of Birth	Age	Gender
Nationality:	Race	Home language of learner

Current School / Current Early Childhood Development Centre/ Grade R/ Early intervention provider/Special School/Resource Centre:
Address:
Phone:
Fax:
e-mail:
Local school to which application is made:
Proposed Date of Enrolment:
Address:
Phone:
Fax:
e-mail:
Name of ILST Coordinator:
Signature of ILST Coordinator
General information about family background:
Who does the child live with? Both parents/mother/father/caregiver/grandparent/other

Name of principal of school:
------------------------------



Signature of principals:

Date:

Name of ILST Coordinator of local ordinary school:

Signature of ILST Coordinator

Date:

Consent by Parent/ caregiver

Name(s) of parent(s)/caregiver(s) :

Signature(s) of parent(s)/caregiver(s):

Date:

## SECTION B: SCREENING OF CURRENT LEARNER NEEDS

### Primary means of transportation to/from school

Regular school bus	<input type="checkbox"/>	Walk	<input type="checkbox"/>
Car	<input type="checkbox"/>	Walks / moves less than 5 km.	<input type="checkbox"/>
		Walks / moves more than 5 km	<input type="checkbox"/>
		Walks / moves more than 10 km.	<input type="checkbox"/>
Taxi/public transport	<input type="checkbox"/>	Other (specify)	<input type="checkbox"/>
Primary means of mobility (if more than one means is used, number according to frequency of use: 1 = most frequent, 2,3, etc)			
Walks on own	<input type="checkbox"/>	Wheelchair (manual)	<input type="checkbox"/>
Crutches, cane or walker	<input type="checkbox"/>	Wheelchair (electric)	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/>		

### Primary means of communication: (if more than one means is used, number according to frequency of use: 1 = most frequent, 2,3, etc)

	Receptive	Expressive
Verbal	<input type="checkbox"/>	<input type="checkbox"/>
Written/pictorial	<input type="checkbox"/>	<input type="checkbox"/>
Sign/fingerspell	<input type="checkbox"/>	<input type="checkbox"/>
Gesture/body movements	<input type="checkbox"/>	<input type="checkbox"/>
Communication board	<input type="checkbox"/>	<input type="checkbox"/>
Computer/electronic	<input type="checkbox"/>	<input type="checkbox"/>

### Primary method used for written work: (if more than one means is used, number according to frequency of use: 1 = most frequent, 2,3, etc)

Writing by hand	<input type="checkbox"/>
Dictation	<input type="checkbox"/>

Computer	<input type="checkbox"/>
Braille writer	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>

**ECOLOGICAL FACTORS THAT MAY IMPACT ON LEARNING AND DEVELOPMENT:**

<b>NUTRITIONAL NEEDS:</b>	
Learner does not need school nutrition programme	<input type="checkbox"/>
Learner is in need of being enrolled in school nutrition programme	<input type="checkbox"/>
<b>FAMILY DYNAMICS</b>	
Temporary family turbulence due to separation process, death, etc.	<input type="checkbox"/>
Family experiencing pressures due to chronic illness of member of household, etc.	<input type="checkbox"/>
Learner experiences serious family trauma because of loss of one parent and limited support	<input type="checkbox"/>
Learner experiences severe family trauma because of loss of both parents and limited support	<input type="checkbox"/>
<b>SOCIO-ECONOMIC HOME CONDITIONS</b>	
Family has a reasonable income and copes with their tasks.	<input type="checkbox"/>
Family has occasional decrease of income.	<input type="checkbox"/>
Families experiences economical and / or social difficulties.	<input type="checkbox"/>
Family experiences constant economical constraints.	<input type="checkbox"/>
Family experiences constant economical and social constraints.	<input type="checkbox"/>

**SECTION C: SURVEY ON SCHOOL'S CAPACITY TO PROVIDE ADDITIONAL SUPPORT**

1. SCHOOL TYPE		2. LANGUAGE	
Primary	<input type="checkbox"/>	Language of Teaching and Learning (LOLT)	
Secondary	<input type="checkbox"/>	Home Language of Learner	
Full Service	<input type="checkbox"/>		
Special School/Resource Centre	<input type="checkbox"/>		
ECD/ Grade R	<input type="checkbox"/>		

<b>3. PERSONNEL AND STAFFING:</b>		
Average Teacher/Learner ratio for school		
<b>Access to specialist staff:</b>		
	At school	From district/FSS/Special School as Resource Centre
• Physiotherapist	<input type="checkbox"/>	<input type="checkbox"/>
• Speech Therapist	<input type="checkbox"/>	<input type="checkbox"/>
• Occupational Therapist	<input type="checkbox"/>	<input type="checkbox"/>

• Nurse	<input type="checkbox"/>	<input type="checkbox"/>	
• Social worker	<input type="checkbox"/>	<input type="checkbox"/>	
• Psychologist	<input type="checkbox"/>	<input type="checkbox"/>	
• Support teacher	<input type="checkbox"/>	<input type="checkbox"/>	
• Technicians for assistive devices	<input type="checkbox"/>	<input type="checkbox"/>	
• Staff development	<input type="checkbox"/>	<input type="checkbox"/>	
• Ongoing staff development strategy	<input type="checkbox"/>	<input type="checkbox"/>	
• Availability of specialized competences:	<input type="checkbox"/>	<input type="checkbox"/>	
• Management of an Institution Level Support Team	<input type="checkbox"/>	<input type="checkbox"/>	
• Teaching and learning support	<input type="checkbox"/>	<input type="checkbox"/>	
• Multi-lingualism	<input type="checkbox"/>	<input type="checkbox"/>	
• Sign language	<input type="checkbox"/>	<input type="checkbox"/>	
• Mobility and orientation	<input type="checkbox"/>	<input type="checkbox"/>	
<b>6. BUILT AND NATURAL ENVIRONMENT:</b>			
<b>Accessibility and safety of the building:</b>	YES	NO	
<b>The school environment and building is rather accessible and safe:</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Some parts of the school are not easily accessible.	<input type="checkbox"/>	<input type="checkbox"/>	
School has workshop facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Braille signage	<input type="checkbox"/>	<input type="checkbox"/>	
All areas in the school are accessible to wheel chairs via ramps	<input type="checkbox"/>	<input type="checkbox"/>	
School is on one level only	<input type="checkbox"/>	<input type="checkbox"/>	
All areas outside the school building such as sports fields and playgrounds are accessible to wheelchairs	<input type="checkbox"/>	<input type="checkbox"/>	
<b>The learner will have access to:</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Rooms for the application of adaptive methods of assessment (e.g. reader)	<input type="checkbox"/>	<input type="checkbox"/>	
Workshops when he/she has to demonstrate competence towards achieving learning outcomes	<input type="checkbox"/>	<input type="checkbox"/>	
A Room/s for receiving therapy	<input type="checkbox"/>	<input type="checkbox"/>	
Mulyi-sensory rooms	<input type="checkbox"/>	<input type="checkbox"/>	
Sound proof room	<input type="checkbox"/>	<input type="checkbox"/>	
Soft play room	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7. LEARNING AND TEACHING MATERIAL (LTSM):</b>		<b>Yes</b>	<b>No</b>
<b>1. Audio Visual Equipment</b>	Audio Cassette Recorders,	<input type="checkbox"/>	<input type="checkbox"/>
	Video Machines,	<input type="checkbox"/>	<input type="checkbox"/>

	Powerpoint Projectors,	<input type="checkbox"/>	<input type="checkbox"/>
	Monitors,	<input type="checkbox"/>	<input type="checkbox"/>
	Overhead Projectors,	<input type="checkbox"/>	<input type="checkbox"/>
	Radios,	<input type="checkbox"/>	<input type="checkbox"/>
	Stereo Players,	<input type="checkbox"/>	<input type="checkbox"/>
	CCTV cameras)	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Writing boards</b>	Blackboard	<input type="checkbox"/>	<input type="checkbox"/>
	Whiteboard	<input type="checkbox"/>	<input type="checkbox"/>
	Electronic whiteboard	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Devices for Braille/embossed printing</b>	Embosser/printer	<input type="checkbox"/>	<input type="checkbox"/>
	Typewriter	<input type="checkbox"/>	<input type="checkbox"/>
	Braille translation software	<input type="checkbox"/>	<input type="checkbox"/>
	graphics embosser/printer	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. Reading devices for learners with vision barriers</b>	Optical Corrector Recognition software	<input type="checkbox"/>	<input type="checkbox"/>
	PC with text reader and voice synthesiser software	<input type="checkbox"/>	<input type="checkbox"/>
	tactile graphics designing software	<input type="checkbox"/>	<input type="checkbox"/>
	touch screen computers	<input type="checkbox"/>	<input type="checkbox"/>
	zoomtext/magnification software	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Computers</b>	Computer hardware	<input type="checkbox"/>	<input type="checkbox"/>
	Scanners	<input type="checkbox"/>	<input type="checkbox"/>
	computer software	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. Devices for learners with physical disability</b>	Crutches	<input type="checkbox"/>	<input type="checkbox"/>
	Wheelchairs	<input type="checkbox"/>	<input type="checkbox"/>
	walking frames	<input type="checkbox"/>	<input type="checkbox"/>
<b>7. Devices for learners with hearing loss (Including Hearing Aids, Head phones, Earphones, FM system with voice amplifier)</b>	hearing aids	<input type="checkbox"/>	<input type="checkbox"/>
	head phones	<input type="checkbox"/>	<input type="checkbox"/>
	Earphones	<input type="checkbox"/>	<input type="checkbox"/>
	FM systems with voice amplifiers	<input type="checkbox"/>	<input type="checkbox"/>
<b>8. Printers:</b>	Fixed	<input type="checkbox"/>	<input type="checkbox"/>
	Portable	<input type="checkbox"/>	<input type="checkbox"/>
<b>9. Electrical equipment</b>	extension cables	<input type="checkbox"/>	<input type="checkbox"/>
	white board lights	<input type="checkbox"/>	<input type="checkbox"/>
<b>10. Photocopiers (with size enlargement)</b>		<input type="checkbox"/>	<input type="checkbox"/>
<b>11. Hydro-therapy pool</b>		<input type="checkbox"/>	<input type="checkbox"/>

<b>8. READINESS OF SCHOOL TO IMPLEMENT INCLUSIVE EDUCATION</b>			
<b>Staff Development :</b>			
Institution Level Support Team (ILST) established	YES	NO	
ILST level of functioning	Non-functional	Limited functioning	Highly effective
ILST has received orientation with follow up	Once	Twice	Regularly
Educators have received orientation with follow up in IE	Once	Twice	Regularly
<b>Diversity of learner demographics:</b>			
Inclusion of learners from diverse cultural backgrounds	Small percentage	Average	Significant number
Inclusion of learners from diverse language backgrounds	Small percentage	Average	Significant number
Inclusion of learners with disabilities	None	Few	Significant number
SGB support for the approach	No support	Moderate support	Fully supportive
<b>School Policies:</b>			
Admission Policy embraces inclusivity	YES	NO	
Language policy embraces multi-lingualism	YES	NO	

#### **SECTION D: MOTIVATION FOR ADITIONAL SUPPORT**

What support can the school provide:	
What support must be provided by DBST:	
Motivation for access to support programmes which will be more effectively delivered in an alternative site:	

Registration Number:

### FORM 3: ONGOING ASSESSMENT AND REVIEW OF SUPPORT NEEDS AND PROVISIONING

(See guidelines for filling in of the form)

1. The form must be filled in for a learner who has been identified to have additional support needs.
2. The form must be filled in by the current school / the Early Childhood Development Centre in consultation with the parents/care givers
3. The completed form must be submitted to the District-based Support Team via the ILST

#### SECTION A: GENERAL INFORMATION ABOUT THE LEARNER

Surname:	First Names:	Nick name:
Date of Birth	Age	Gender
Nationality:	Race	Home language of learner

Current School / Current Early Childhood Development Centre/ Grade R /Special School/Resource Centre:
Address:
Phone:
Fax:
e-mail:
Referring school:
Date of completion of assessment:
Address:
Phone:
Fax:
e-mail:
Name of ILST Coordinator:
Signature of ILST Coordinator
General information about family background:
Who does the child live with? Both parents/mother/father/caregiver/grandparent/other

Name of principal of school:
Signature of principals: _____ Date: _____

Name of ILST Coordinator of local ordinary school:
Signature of ILST Coordinator _____ Date: _____

Consent by Parent/ caregiver
Name(s) of parent(s)/caregiver(s) :
Signature(s) of parent(s)/caregiver(s): _____ Date: _____

## SECTION B: SURVEY ON SCHOOL'S CAPACITY TO PROVIDE ADDITIONAL SUPPORT

2. SCHOOL TYPE		2. LANGUAGE	
Primary	<input type="checkbox"/>	Language of Teaching and Learning (LOLT)	
Secondary	<input type="checkbox"/>	Home Language of Learners	<input type="checkbox"/>
Full Service	<input type="checkbox"/>	Afrikaans	<input type="checkbox"/>
Special School/Resource Centre	<input type="checkbox"/>	IsiNdebele	<input type="checkbox"/>
ECD/ Grade R	<input type="checkbox"/>	IsiXhosa	<input type="checkbox"/>
Residential School	<input type="checkbox"/>	IsiZulu	<input type="checkbox"/>
Reform School	<input type="checkbox"/>	Tshivenda	<input type="checkbox"/>
School of Industry	<input type="checkbox"/>	Sepedi	<input type="checkbox"/>
Urban	<input type="checkbox"/>	Xitsonga	<input type="checkbox"/>
Township	<input type="checkbox"/>	IsiSwati	<input type="checkbox"/>
Rural school	<input type="checkbox"/>	English	<input type="checkbox"/>
Farm school	<input type="checkbox"/>	Sesotho	<input type="checkbox"/>
		Setswana	<input type="checkbox"/>
		South African Sign Language	<input type="checkbox"/>

3. PERSONNEL AND STAFFING:		
Average Teacher/Learner ratio for school	1: _____	
Teacher/Learner ratio (in grade which learner is)	1: _____	
Access to specialist staff		
	At school	From district
• Physiotherapist	<input type="checkbox"/>	<input type="checkbox"/>
• Speech Therapist	<input type="checkbox"/>	<input type="checkbox"/>
• Occupational Therapist	<input type="checkbox"/>	<input type="checkbox"/>
• Nurse	<input type="checkbox"/>	<input type="checkbox"/>
• Social worker	<input type="checkbox"/>	<input type="checkbox"/>
• Psychologist	<input type="checkbox"/>	<input type="checkbox"/>
• Learning Support teacher	<input type="checkbox"/>	<input type="checkbox"/>
• Technicians for assistive devices	<input type="checkbox"/>	<input type="checkbox"/>
• Staff development	<input type="checkbox"/>	<input type="checkbox"/>
• Ongoing staff development strategy	<input type="checkbox"/>	<input type="checkbox"/>

• Availability of specialized competences:	<input type="checkbox"/>	<input type="checkbox"/>
• Management of an ILST	<input type="checkbox"/>	<input type="checkbox"/>
• Remedial education	<input type="checkbox"/>	<input type="checkbox"/>
• Multi-lingualism	<input type="checkbox"/>	<input type="checkbox"/>
• Sign language	<input type="checkbox"/>	<input type="checkbox"/>
• Mobility and orientation	<input type="checkbox"/>	<input type="checkbox"/>

**4. BUILT AND NATURAL ENVIRONMENT:**

<b>Accessibility and safety of the building:</b>	YES	NO	SUGGES-TIONS FOR IMPROVE-MENT
The school environment and building is rather accessible and safe.	<input type="checkbox"/>	<input type="checkbox"/>	
Some parts of the school are not easily accessible.	<input type="checkbox"/>	<input type="checkbox"/>	
The school has made efforts in improving accessibility	<input type="checkbox"/>	<input type="checkbox"/>	
School has workshop facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Braille signage	<input type="checkbox"/>	<input type="checkbox"/>	
All areas in the school are accessible to wheel chairs via ramps	<input type="checkbox"/>	<input type="checkbox"/>	
School is on one level only	<input type="checkbox"/>	<input type="checkbox"/>	
All areas outside the school building such as sports fields and playgrounds are accessible to wheelchairs	<input type="checkbox"/>	<input type="checkbox"/>	

<b>The learner will have access to:</b>	<input type="checkbox"/>	<input type="checkbox"/>	OPTIONS AVAILABLE/ ALTERNATIVE ARRANGE-MENTS
Rooms for the application of adaptive methods of assessment (e.g. reader)	<input type="checkbox"/>	<input type="checkbox"/>	
Workshops when he/she has to demonstrate competence towards achieving learning outcomes	<input type="checkbox"/>	<input type="checkbox"/>	
A Room/s for receiving therapy	<input type="checkbox"/>	<input type="checkbox"/>	

<b>5. LEARNING AND TEACHING MATERIAL (LTSM):</b>		Yes	No
<b>1. Audio Visual Equipment</b>	Audio Cassette Recorders,	<input type="checkbox"/>	<input type="checkbox"/>
	Video Machines,	<input type="checkbox"/>	<input type="checkbox"/>
	Powerpoint Projectors,	<input type="checkbox"/>	<input type="checkbox"/>
	Monitors,	<input type="checkbox"/>	<input type="checkbox"/>
	Overhead Projectors,	<input type="checkbox"/>	<input type="checkbox"/>
	Radios,		
	Stereo Players,		
	CCTV cameras)		
<b>2. Writing boards</b>	Blackboard		
	Whiteboard		



	Electronic whiteboard		
<b>3. Devices for Braille/embossed printing</b>	Embosser/printer		
	Typewriter		
	Braille translation software		
	graphics embosser/printer		
<b>4. Reading devices for learners with vision barriers</b>	Optical Corrector Recognition software		
	PC with text reader and voice synthesiser software		
	tactile graphics designing software		
	touch screen computers		
	zoomtext/magnification software		
<b>5. Computers</b>	Computer hardware		
	Scanners		
	computer software		
<b>6. Devices for learners with physical disability</b>	Crutches		
	Wheelchairs		
	walking frames		
<b>7. Devices for learners with hearing loss (Including Hearing Aids, Head phones, Earphones, FM system with voice amplifier)</b>	hearing aids		
	head phones		
	Earphones		
	FM systems with voice amplifiers		
<b>8. Printers:</b>	Fixed		
	Portable		
<b>9. Electrical equipment</b>	extension cables		
	white board lights		
<b>10. Photocopiers (with size enlargement)</b>			
<b>11. Hydro-therapy pool</b>			
<b>12. Rooms</b>	multi-sensory		
	sound proof		
	soft play		

**6. DEVELOPMENTAL STEPS TAKEN BY SCHOOL TO IMPLEMENT INCLUSIVE EDUCATION**

Staff Development and Systems in place:

Functioning of Institution Level Support Team (ILST)

Describe steps taken:

Development of capacity of ILST	Describe developmental programme:
District is providing ongoing development support to ILST	Describe:
Developmental programme of SGB to support inclusive education	Describe:

<b>7. LEARNING ENVIRONMENT:</b>		
	Strengths	Recommendations for Support
Human Relations and School Ethos	<ul style="list-style-type: none"> <li>Policy of inclusivity/ multi-lingualism/ safety/HIV Aids/ Health Promotion embraced (underline)</li> </ul>	
	<ul style="list-style-type: none"> <li>Generally accepting attitude towards difference/ Diversity (gender, race, language, disability)</li> </ul>	
	<ul style="list-style-type: none"> <li>Does the school have an induction programme for learners, new staff and parent/care givers? (underline)</li> </ul>	
	<ul style="list-style-type: none"> <li>Morale amongst staff and students is high. This reflected through team planning and teaching, classroom observation and peer evaluation.</li> </ul>	
Organisation of support	<ul style="list-style-type: none"> <li>There is an attempt to avoid labelling learners as 'having special educational needs' such as being 'slow learners', 'dyslexic', 'hyper-active', etc.</li> </ul>	
	<ul style="list-style-type: none"> <li>Learners who are categorised as 'having special educational needs' are seen as individuals</li> </ul>	

	with differing interests, knowledge and skills and not as a homogeneous LSEN group	
	<ul style="list-style-type: none"> <li>Teachers see the attempts to remove barriers to learning and participation of one learner as part of a process which will benefit all learners in the class</li> </ul>	
	<ul style="list-style-type: none"> <li>There an understanding that it is less important to diagnose the exact nature of the impairments/learning difficulties than to actually plan educational support for learners</li> </ul>	
	<ul style="list-style-type: none"> <li>All staff development activities help teachers to understand diversity and reduce barriers to learning and participation?</li> </ul>	
	<ul style="list-style-type: none"> <li>There is a recognition that learners whose home language is different from the language of teaching and learning need support in a co-ordinated and ongoing way?</li> </ul>	
Learning Space	<ul style="list-style-type: none"> <li>Organisation of learning space shows creativity and enables all learners to productively engaged in individual and cooperative learning.</li> </ul>	
	<ul style="list-style-type: none"> <li>Learners participate actively and are encouraged to be creative and exchange ideas with confidence.</li> </ul>	
	<ul style="list-style-type: none"> <li>Educator uses inclusive strategies and promotes respect for individuality and diversity (learning styles, language, race/ethnic, disability)</li> </ul>	
Discipline	<ul style="list-style-type: none"> <li>Learners are motivated and self disciplined.</li> </ul>	
	<ul style="list-style-type: none"> <li>Learners accept discipline without feeling threatened.</li> </ul>	
	<ul style="list-style-type: none"> <li>Learners know who to see when they have a problem?</li> </ul>	
	<ul style="list-style-type: none"> <li>Responses to concerns about behaviour of learners tend to focus on education and rehabilitation rather than on retribution?</li> </ul>	

## SECTION C: INDICATORS TO DETERMINE THE INTENSITY OF SUPPORT NEEDED

### Rubrics for Indicators

FACTORS	Level 1	Level 2	Level 3	Level 4	Level 5
	Full participation	Modified full participation	Participation in all aspects with occasional assistance	Participation in only some activities	Participation extremely limited in certain areas
	No requirement for additional learning and teaching support	Requires some additional support to maximise learning outcomes	Requires additional support in a number of areas to maximise learning outcomes	Requires additional specialised support in many areas including ongoing monitoring to facilitate participation to maximise learning outcomes	Requires specialised learning programme planning and/or high level support
	No additional adaptation required	Adaptation planned and managed at the grade or phase level	Adaptation planned and managed with intervention of the ILST	Adaptation planned and managed with assistance by DBST	Adaptation and continuous monitoring needed in all areas

### To be used by ILST

Note: The list of indicators is not exhaustive

FACTORS	Level 1	Level 2	Level 3	Level 4	Level 5
<b>A. LEARNING FACTORS</b>					
<b>1. COMMUNICATION FACTORS: Language and language of proficiency</b>					
<b>LANGUAGE OF LEARNING AND TEACHING (LOLT)</b>	The LOLT is the learner's first language (L1); second language (L2); third language (L3); Other				

<b>ANDTEACHING (LOLT)</b> <u>Languages – home language</u> <u>Languages – first additional language</u> <u>Languages – second additional language</u>	The LOLT does not interfere with the learner's participation in learning and teaching	<p>The LOLT is not the learner's first language. The learner can understand but is not fluent in the LOLT.</p> <p>The impact of LOLT can be minimised by the educator.</p> <p><i>(Scenario: Afrikaans first language learner attending English medium school)</i></p>	<p>The LOLT is not the learner's first language. The learner can understand but is not fluent in the LOLT.</p> <p>The educator does not know how to minimise the impact of the LOLT needing ILST support</p> <p><i>(Scenario: Educator needs training in teaching through the learner's second language)</i></p>	<p>The LOLT is not the learner's first language and limits participation in many areas of learning</p> <p><i>(Scenario: Specialised support needed for educator to create more opportunities for learning the LOLT)</i></p>	The LOLT significantly interferes with the learner's participation as the learner cannot speak or understand the LOLT
	<b>Support needed by learner</b>				
<b>Support needed by the teacher/ school</b>					

<b>EXPRESSIVE COMMUNICATION: The ability of the learner to express him/herself in any language</b>	<b>Narrative Description of Strengths of learner:</b>				
<b>Spoken language /</b> (voice articulation or fluency)  <u>Languages – home language: Learning outcome 2 p.6</u>  <b>South Africa Sign</b>	Communicates well through spoken language and participates fully in learning activities across all learning areas  Participates fully in	Difficulties with articulation/use of gestures/use of SASL/AAC interferes with participation in learning activities  <i>(Scenario: Mild stuttering, lisp, physical damage to</i>	Learner requires curriculum adaptation; assistive devices/modification, as well as assistance with use of the modification, in order to participate effectively in learning activities	Learner requires modification, assistive devices and specialist support in order to participate in learning activities  <i>(Scenario: Peers and educators are unfamiliar</i>	Participation in learning activities requires intensive specialist intervention to develop: <ul style="list-style-type: none"> <li>• learner's spoken language</li> <li>• use of gestures</li> <li>• SASL</li> <li>• Parent's knowledge</li> </ul>

<p><b>Language (SASL) / Alternative and augmentative communication (AAC)</b> (symbol system, words, pictures, gestures or vocalizations)</p>	<p>learning using SASL or AAC in an appropriately supportive environment</p> <p><i>(Scenario: Learner in school with peers and teachers who have learnt to communicate effectively with AAC)</i></p>	<p><i>jaw</i></p> <p><i>Learner with inadequate knowledge of SASL, teacher proficient in SASL provides additional stimulation and language support)</i></p>	<p><i>(Scenario: Learner has a hearing aid/FM system, teacher expected to check/monitor/troubles hoot hearing aid/FM system before/during all lessons</i></p> <p><i>Learner with severe stutter is unable to do oral</i></p> <p><i>Learner has specific difficulty with expressing ideas verbally but performs well in other learning areas</i></p> <p><i>Learner has specific difficulty with understanding, but has good ability in other areas</i></p>	<p><i>with the learner's symbol system, words, pictures, gestures or vocalizations – unable to understand the learner)</i></p>	<p>of SASL</p> <p><i>(Scenario: Deaf learner entering school for first time with no SASL or oral language</i></p> <p><i>Multiply disabled deaf learner</i></p> <p><i>Deaf-blind learner</i></p> <p><i>Learner with severe cerebral palsy, severely intellectually disabled</i></p> <p><i>Learner with severe autism)</i></p>
<p><b>Support needed by learner</b></p>					
<p><b>Support needed by the school</b></p>					

<p><b>Written language</b> (writing, knowing writing carries meaning, uses writing to communicate a message)</p> <p>Note: This section <u>does not</u> handwriting skill or the ability to spell/use correct grammar</p> <p><u>Languages – home language: Learning outcome 4</u> <u>GrR p.40-45</u> <u>Gr4-6 p.78-81</u> <u>Gr7-9 p. 108-111</u></p> <p><u>Mathematics</u></p>	<p>Communicates well through written text/computer/Braille. Participates/performs well in learning activities across all learning areas</p> <p><i>(Scenario: Learner who wear glasses to correct vision</i></p> <p><i>Learner using SASL or AAC device or Braille whose written language is appropriate, and understood by educator)</i></p>	<p>Able to communicate message in writing with some impact on participation/performance in learning activities.</p> <p><i>(Scenario: Learner has difficulty writing at same speed/accuracy level as peers</i></p> <p><i>Visually impaired learner who can participate using enlarged font; appropriate positioning; or assisted reading)</i></p>	<p>Learner requires curriculum adaptation; assistive devices (magnifier), as well as assistance with use of a modification (Braille/computer), in order to participate effectively/perform successfully in learning activities</p> <p>Includes adaptations and modifications such as amanuensis or scribing</p> <p><i>(Scenario: Learner has a hearing aid/FM system, teacher expected to check/monitor/troubles hoot hearing aid/FM system before/during all lessons</i></p> <p><i>Learner is unable to write due to poor hand function/control needs assistance from peers with note taking and amanuensis during assessment</i></p> <p><i>Learner with prosthetic hand who still needs assistance)</i></p>	<p>Learner requires curriculum adaptation, assistive devices and specialist support in order to participate in/perform learning activities</p> <p><i>(Scenario: Learner using Braille in an environment where Braille is not supported)</i></p>	<p>Participation in learning activities requires intensive specialist intervention to develop:</p> <ul style="list-style-type: none"> <li>• learner’s written language</li> <li>• use of Braille</li> <li>• computer aided writing</li> </ul> <p><i>(Scenario: Blind or deaf learner entering school for first time</i></p> <p><i>Multiply disabled deaf and/or blind learner</i></p> <p><i>Learner with severe cerebral palsy, or severe intellectual disability)</i></p>
--	--	--	---	---	--

<b>Reciprocal communication</b> (following social conventions, dialogue, turn taking, joint attention/reference)					
<b>Support needed by learner</b>					
<b>Support needed by the school</b>					

<b>RECEPTIVE COMMUNICATION: The ability of the learner to listen and understand</b>	<b>Narrative Description of Strengths of learner:</b>				
<b>Spoken language /</b> <i><u>Languages – home language: Learning outcome 1</u></i>	Participates fully in learning activities	Understanding of conversational speech, sign language, culturally appropriate gestures and body language interferes minimally with learning and teaching activities.	Learner requires assistive devices/modification, as well as assistance with use of the modification in order to understand the expressive language.	Learner requires modification, assistive devices and specialist support in order to understand expressive language.	Participation in learning activities requires intensive specialist intervention to develop receptive skills:
<b>South Africa Sign Language (SASL) /</b> <b>Alternative and augmentative communication (AAC)</b> [symbol system, words, pictures, gestures or vocalizations]					
<b>Support needed by learner</b>					



<b>Support needed by the school</b>	
-------------------------------------	--

<b>2. COGNITIVE SKILLS</b>	<b>Sustained attention, memory recall, concept formation and application, planning, problem solving</b>
----------------------------	---

<b>Task behaviour</b>	Narrative Description of Strengths of learner:
-----------------------	--

Understanding of concepts, problem solving, imitating, generalising	Copes with and accesses basically all Learning Programmes and activities provided within the range of Grade level	Requires some assistance in skill acquisition or specific tasks as relates to knowledge or academic skills	Can participate in all Learning Programmes with differentiation within and adaptation of lesson plans and activities	Can access curriculum through substantial differentiation and adaptations to most learning programmes and tasks	Can practise the basic skills and knowledge only with substantial assistance and curriculum adaptation
---	---	--	--	---	--

<b>Support needed by learner</b>	
----------------------------------	--

<b>Support needed by the school</b>	
-------------------------------------	--

<b>Processing – General</b>	Narrative Description of Strengths of learner:
-----------------------------	--

Understanding of concepts, problem solving, imitating, generalising	Copes with and accesses basically all Learning Programmes and activities provided within the range of Grade level	Requires some assistance in skill acquisition or specific tasks as relates to knowledge or academic skills	Requires individualised planning in all learning areas as relates to knowledge of an abstract nature and more academic skills	Can access curriculum through substantial adaptations to most learning programmes and tasks	Can practise the basic skills and knowledge only with substantial assistance and curriculum adaptation
---	---	--	---	---	--

<b>Support needed by learner</b>	
<b>Support needed by the school</b>	

<b>Cognitive Skills – Language Processing</b> <ul style="list-style-type: none"> <li>• reading</li> <li>• listening</li> <li>• writing</li> <li>• speaking</li> </ul>	Narrative Description of Strengths of learner:				
	The learner is able to meet the curriculum demands in literacy	Reads with comprehension but at a very slow pace	Reads words but without comprehension and at a slow pace	Recognises individual letters of the alphabet	Unable to recognise the printed word
<b>Support needed by learner</b>	Sometimes requires assistance in certain aspects of skills acquisition, e.g. perception (visual, spatial, oral, etc)., or additional language Requires pictures, objects, and other cues in order to access written information. Reads text but doesn't understand				
<b>Support needed by the school</b>	Encounters difficulties in producing ideas in oral/written form / understanding text or instructions, etc. Cannot make use of given information without interpretation in different forms				
<b>What can I do differently?</b>					

<b>Cognitive Skills – Numeracy Skills</b>	Narrative Description of Strengths of learner:
---	--

	Requires occasional assistance in understanding mathematical concepts and their relationship to day-to-day experiences.	Sometimes requires assistance/adaptations in order to progress in skills acquisition.	Requires pictures, objects, and other cues in order to access mathematical concepts and formulas.	Encounters difficulties in formulating concrete tasks to mathematical concepts and in problem solving.	Has no or little understanding of mathematical concepts and numeracy
<b>Support needed by learner</b>					
<b>Support needed by learner</b>					

<b>B. BEHAVIOURAL FACTORS:</b>	<b>Behaviour that interferes with participation in learning and requires a coordinated approach across home, school and other agencies</b>				
<b>Social conventions: Following social conventions, rules</b>	<b>Narrative Description of Strengths of learner:</b>				
	Shows good relationship with his/her peers, behaviour is age appropriate,	Social background differs from school ethos, school and learner need a period of acclimatisation	Occasional inappropriate behaviour that disrupts the learning process for short periods	Frequent display of inappropriate behaviour that requires a structured and focussed intervention to facilitate inclusion in group activities.	Learning process broken down due to persistent display of inappropriate behaviour and limited response to support provided.
<b>Socio-emotional factors</b>	<b>Narrative Description of Strengths of learner:</b>				

	Culturally and situationally appropriate behaviour that does not interfere with participation in learning activities.	Shows occasional culturally and situationally inappropriate behaviour  Requires occasional collaboration between home and school.  (Scenario: Infrequent anger outbursts, withdrawal)	Emotional crisis and inappropriate behaviour interferes with learning activities. Requires a coordinated approach between home, school and other agencies.  This includes <ul style="list-style-type: none"> <li>• emotional outbursts</li> <li>• depression</li> <li>• obsessive behaviour</li> <li>• bullying</li> <li>• stealing</li> <li>• fighting with peers</li> <li>• drug abuse</li> </ul>	Learner participates effectively in learning only if isolated from peers and kept under supervision. Requires specialised intervention to facilitate inclusion in group activities.  (Scenario: Anger, violence, mutilation, learner's who have experienced trauma)	Behaviour results in no or extremely limited participation in learning. Requires specialised intervention that cuts across home, school and other agencies.  (Scenario: Drug rehabilitation programme; Anorexia; Suicide; Rape; Sexual abuse)
<b>Support needed by learner</b>					
<b>Support needed by the school</b>					

<b>C. PHYSICAL FACTORS:</b>	
<b>MOTOR &amp; MOBILITY:</b>	<b>This refers to all bodily movement</b>
<b>Gross motor control: Large body movements</b>	<b>Narrative Description of Strengths of learner:</b>

<p>(Walk, run, skip, hop, leap, jump, gallop, slide, climb stairs, throw and catch)</p> <p><u>See Arts and Culture learning outcome No 1 (Page 18/19)</u></p> <p><u>See Lifeskills learning outcome 4: Physical development and movement (Foundation Phase p77)</u></p>	<p>Participates fully in motor activities. Learner moves around the school, in the building and outside in the playground, keeps pace with peers in all school situations, with no additional support.</p> <p>Meets assessment standards for Arts and Culture</p>	<p>Full participation with modification (assistive devices, adapted environment)</p> <p>Meets assessment standards for Arts and Culture with some modification/adaptation</p> <p><i>(Scenario: Propels own wheelchair or other device, lowering door handle, guiding/supportive rails)</i></p>	<p>Participates in motor activities with occasional assistance.</p> <p>Moves around in the school building, and outside in the playground and requires assistance occasionally</p> <p><i>(Scenario: Peer pushes wheelchair; Teacher able to lift/ position learner correctly; Less sophisticated mobility and orientation for the visually impaired learner)</i></p>	<p>Learner's participation in all learning involving large body movement is limited and requires specialised support to facilitate participation.</p> <p><i>(Scenario: A learner with uncontrolled bodily movement, falls frequently, needs assistive device to sit and adaptation to curriculum to participate in classroom activity, needs ongoing monitoring by specialised support services;</i></p> <p><i>Learner needs early training in mobility and orientation for the visually impaired)</i></p>	<p>Learner's participation in all activities involving body movement is extremely limited and requires specialised support whenever he/she has to move.</p> <p><i>(Scenario: A learner is able to participate in Arts and Culture learning area 'dance' using own movement strategies as a dance form, with specialised support to move body and/or propel wheelchair)</i></p>
<p><b>Fine motor control: Small body movements</b></p> <p><b>(Hand function Eye-hand coordination)</b></p>	<p>Fully participates in all activities involving hand movement.</p>	<p>Minimal additional support required for full participation in all learning activities.</p>	<p>Participates in all activities but requires adaptation to curriculum,/assistive device/adaptation to environment</p>	<p>Participates only in some activities and requires specialised support to facilitate participation</p>	<p>Learner is extremely limited in all activities involving hand movement and requires specialised support whenever he/she has to use hands</p>
<p><b>Support needed by learner</b></p>					
<p><b>Support needed by the school</b></p>					

SENSORY FACTORS					
<b>Auditory function</b>	Narrative Description of Strengths of learner:				
See communication Source: Pottas 2005, p. 47	Hearing difficulties do not impact on language acquisition and learning Problems with people speaking softly Sometimes unaware of subtle innuendos in conversation (minimal hearing loss 16 – 25 dB HL)	Can lose 25 – 40% of speech signals at 30 dB Background noise, distance from teacher and the course of the audiogram determine the nature and degree of problems in the classroom environment Can miss up to 50% of class discussion particularly if people speak softly or outside the line of vision Problems with consonants, particularly in the case of high frequency loss (Mild Hearing loss – 4 – 55 dB HL)	Understands conversational speech at a distance of 1 – 1,5 m Hearing loss of 40dB and 50 dB (without amplification) can lead to 50 – 75% and 80 – 100% loss of speech signal respectively Language problems: limited vocabulary, slow development of or faulty syntax Can exhibit faulty speech production Voice quality may already be toneless (Moderate hearing loss – 41 – 55 dB HL)	Conversation must be very loud to be heard without amplification Can lose up to 100% of the speech signal Increasing, distinct problems with verbal communication in the school environment Slow speech and language development Speech production mostly unintelligible Toneless voice quality (Moderate to severe hearing loss – 56 – 70 dB HL) Hears loud sounds ± 10cm from the ear Can identify certain sounds in his/her vicinity Can discriminate vowel sounds, not all consonants Pre-lingual hearing loss: speech and language do not develop spontaneously Post-lingual hearing loss: deterioration of speech and language abilities (Severe hearing loss – 71 – 90 dB HL)	Reacts more to vibrations than to sound Visually rather than auditorily inclined with regard to communication Speech and language do not develop spontaneously Rapid deterioration of speech and language abilities in the case of post-lingual hearing loss (Total hearing loss – 91+ dB HL)

<b>Support needed by learner</b>					
<b>Support needed by the school</b>					
<b>VISION</b>	Narrative Description of Strengths of learner:				
	Child who functions well with glasses	Difficulty with print, graphics or small objects OR at level of objects in environment even when vision corrected with spectacles or contact lenses.	Difficulty with print, graphics or small objects AND at level of objects in environment.	Uses tactile, auditory and/or voice synthesised modes for access to and production of written work	Difficulty in using Braille and/or other modes to access and produce written work
<b>Support needed by learner</b>					
<b>Support needed by the school</b>					
<b>What can I do differently?</b>					

<b>SELF-CARE</b>					
<b>Activities for daily living</b>	Narrative Description of Strengths of learner:				
	Level of participation in eating, drinking, toileting, grooming and general hygiene activities does not interfere with learning	Learner requires assistive devices related to the following areas in order to participate in learning activities in the classroom:	Learner requires support with <u>one</u> of the following areas in order to participate in learning activities in the classroom:	Learner requires modification, assistive devices and supervision with issues related to: <ul style="list-style-type: none"> <li>• Eating</li> <li>• Drinking</li> </ul>	Learner requires constant supervision with all activities for daily living skills.

		<ul style="list-style-type: none"> <li>• Eating</li> <li>• Drinking</li> <li>• Toileting</li> <li>• Hygiene</li> <li>• Dressing</li> </ul>	<ul style="list-style-type: none"> <li>• Eating</li> <li>• Drinking</li> <li>• Toileting</li> <li>• Hygiene</li> <li>• Dressing</li> </ul>	<ul style="list-style-type: none"> <li>• Toileting</li> <li>• Hygiene</li> <li>• Dressing</li> </ul>	
<b>Support needed by learner</b>					
<b>Support needed by the school</b>					
<b>What can I do differently?</b>					
<b>SAFETY</b>	<b>Narrative Description of Strengths of learner:</b>				
	Is capable of operating safely in most school environments	Requires supervision in certain activities.		Requires constant supervision in range of activities.	
<b>Transport</b>	Learner is able to use models of transport to get to and from school under all conditions	Learner requires modification to mode of transport in order to access transport with minimum supervision	Learner requires assistive devices/modification to mode of transport, as well as assistance with use of the modification in order to move in and out of vehicles	Learner requires support moving in and out of vehicles, entering and exiting the school buildings	Learner requires constant supervision when accessing and travelling in vehicles. Support is also needed to maintain appropriate social behaviour both while on vehicles as well as entering and exiting school buildings
<b>Support needed by learner</b>					



<b>Support needed by the school</b>	
<b>What can I do differently?</b>	

<b>Medical condition: as it impacts on learning and development</b>	<b>1 Under control and does not need support</b>	<b>2 Needs supervision by teacher</b>	<b>3 Needs regular supervision by teacher or external provider</b>	<b>4 Can interfere with attendance</b>	<b>5 Needs constant medical care</b>
<b>Medicine</b>					
<b>Chronic illness</b>					
<b>Surgery undergone</b>					
<b>Surgery still to be undergone</b>					
<b>Allergies</b>					
<b>Other medical conditions</b>					

Registration Number:

**FORM 4: REVIEW OF LEARNER ADDITIONAL SUPPORT NEEDS FOR RESOURCING AND MONITORING PURPOSES**

(See guidelines for filling in of the form)

1. The form must be filled in for a learner on whose behalf a school is motivating for additional support and/or alternative specialized support.
2. The form must be filled in by the District Based Support Team after verification of information provided by ILST
3. The form may not be completed without consultation with the parents/caregivers
4. The completed form will be used by the DBST to plan the resourcing and delivery of support programmes as well as to monitor the progress of the learner.

**SECTION A: GENERAL INFORMATION ABOUT THE LEARNER AND SCHOOL**

Surname:	First Names:	Nick name:
Date of Birth	Age	Gender
Nationality:	Race	Home language of learner
Name of referring school:		
Address:		
Phone:		
Fax:		
e-mail:		

Name of ILST Coordinator of referring school:	
Signature of ILST Coordinator	Date:

Name of principal of referring school/ ECD Centre:	
Signature of principal:	Date:

Name of District Director/Manager:	
Signature of District Director/Manager:	Date:

**SECTION B: Parent / caregiver / learner input:**

1.1 Preferred site for delivery of support programme
1.2 What are your observations about the support which your child has been receiving in his/her current school? What support has been effective and what support ineffective?
1.3 How do you propose that the support to your child can be improved?
1.4 What additional support do you think the school should receive in order for your child to develop his/her full potential in the current school?

**2. CONTEXTUAL REALITIES**

<b>2.1 FAMILY DYNAMICS</b>	<b>YES</b>	<b>NO</b>
Temporary family turbulence due to separation process, death, etc.	<input type="checkbox"/>	<input type="checkbox"/>
Family experiencing pressures due to chronic illness of member of household, etc.	<input type="checkbox"/>	<input type="checkbox"/>
Learner experiences serious family trauma because of loss of parent/s and limited support	<input type="checkbox"/>	<input type="checkbox"/>
Learner experiences severe family trauma because of loss of both parents and limited support	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.2 SOCIO-ECONOMIC HOME CONDITIONS</b>		

One/both parents are employed.	<input type="checkbox"/>	<input type="checkbox"/>
Family income is +R1000 a month.	<input type="checkbox"/>	<input type="checkbox"/>
Family dependent on welfare grant.	<input type="checkbox"/>	<input type="checkbox"/>
Family has no stable source of income.	<input type="checkbox"/>	<input type="checkbox"/>
Family living in informal settlement conditions.	<input type="checkbox"/>	<input type="checkbox"/>
Family living in brick and mortar dwelling	<input type="checkbox"/>	<input type="checkbox"/>
Child headed family	<input type="checkbox"/>	<input type="checkbox"/>

### 3. Recommendations for future support programme/s:

Area of Support	Short Description of kind of support needed
<b>Learning Support:</b>	
Communication	
• Receptive	
• Expressive	
Social:	
• Emotional	
• Behavioural	
Cognitive:	
• Task behaviour	
• Processing skills:	
General	
• Language Processing	
• Number skills	
<b>Physical Support:</b>	
• Motor	
• Sensory	
• Self care	
• Medical	

**See Form 3 Section on Indicators**

### 4. Information on assistive devices and material resources:

Assistive devices already available to child:

Maintenance needs of these devices:		
Assistive devices/equipment/spaces to be provided in the learning environment		
<b>1. Audio Visual Equipment</b>	Audio Cassette Recorders,	
	Video Machines,	
	Powerpoint Projectors,	
	Monitors,	
	Overhead Projectors,	
	Radios,	
	Stereo Players,	
	CCTV cameras)	
<b>2. Writing boards</b>	Blackboard	
	Whiteboard	
	Electronic whiteboard	
<b>3. Devices for Braille/embossed printing</b>	Embosser/printer	
	Typewriter	
	Braille translation software	
	graphics embosser/printer	
<b>4. Reading devices for learners with vision barriers</b>	Optical Corrector Recognition software	
	PC with text reader and voice synthesiser software	
	tactile graphics designing software	
	touch screen computers	
	zoomtext/magnification software	
<b>5. Computers</b>	Computer hardware	
	Scanners	
	computer software	
<b>6. Devices for learners with physical disability</b>	Crutches	
	Wheelchairs	
	walking frames	
<b>7. Devices for learners with hearing loss (Including Hearing Aids, Head phones, Earphones, FM system with voice amplifier)</b>	hearing aids	
	head phones	
	Earphones	
	FM systems with voice amplifiers	
<b>8. Printers:</b>	Fixed	
	Portable	
<b>9. Electrical equipment</b>	extension cables	

	white board lights	
<b>10. Photocopiers (with size enlargement)</b>		
<b>11. Hydro-therapy pool</b>		
<b>12. Rooms</b>	multi-sensory	
	sound proof	
	soft play	

**5. Information on medical needs of child:**

Medicine
Surgical intervention
Follow-up surgical intervention
Chronic illness
Allergies

**6. Review of support needs and provisioning**

Verification of level of needs of learner:
Review of schools capacity to provide support:
Review of development needs of programmes to provide additional support to schools and other agencies:
Review of programmes in alternative settings:

# Sources and References

1. Booth, T., Ainscow, M. (2002) *Index for Inclusion. Developing Learning and Participation in Schools*. Revised. Centre for Studies on Inclusive Education: Bristol.
2. Burden, R. (1996) Meaningful questions or meaningful answers: Worthwhile assessment in a changing world, in: Engelbrecht, P., Kriegler, S.M., Booysen, M.I. (ed.) *Perspectives on Learning Difficulties: International Concerns and South African Realities*. Van Schaik, Pretoria.
3. Department of Education (2001) *Education White Paper 6 on Special Needs Education: Building an Inclusive Education and Training System*. Pretoria.
4. Department of Education (2002) *Curriculum 2005: Inclusion Guidelines for Assessment*. Pretoria.
5. Department of Education (2003) *Integrated Quality Management Systems*. Pretoria
6. Department of Education (2004) *Conceptual and Operational Guidelines on Inclusive Education: District-Based Support Teams*. Unpublished Document, Pretoria.
7. Department of Education (2004) *Draft Conceptual and Operational Guidelines for Inclusive Education: District-Based Support Teams*. Unpublished Document. Pretoria.
8. Department of Education (2004) *Draft Conceptual and Operational Guidelines for Inclusive Education: Special Schools as Resource Centres*. Unpublished Document. Pretoria.
9. Department of Education (2004) *Draft Conceptual and Operational Guidelines for Inclusive Education: Full-Service Schools*. Unpublished Document. Pretoria.
10. Education Queensland (March 2003) *Draft Manual on Supporting Teaching Adjustments and Resourcing (S.T.A.R.)*. Brisbane.
11. Ministry of Education, New Zealand (2002) *Ongoing and Reviewable Resourcing Schemes*. Wellington.
12. Pottas, L (2005) *Inclusive Education in South Africa: The Challenges Posed to the Teacher of the Child with a Hearing Loss*. Unpublished PhD Dissertation, University of Pretoria.
13. The Psychological Corporation (1998) *School Function Assessment*. San Antonio
14. UNESCO (2004) *Changing Teaching Practices: using curriculum differentiation to respond to students' diversity*. Paris.

15. Vayrynen, S. (2003) *Observations from South African Classrooms: Some Inclusive Strategies*. South African – Finnish Co-operation Programme in the Education Sector (SCOPE).
16. World Health Organisation (2001) *International Classification of Functioning, Disability and Health (ICF)*. Geneva.