



**Ministry of Education and Child Care
Resource Management Division**

2022/23 Special Education Enrolment Audit

AUDIT REPORT

PACIFIC ACADEMY (03696394)

2022/23 SPECIAL EDUCATION ENROLMENT AUDIT REPORT PACIFIC ACADEMY (03696394)

Background

The Ministry of Education and Child Care funds Independent School Authorities based on the Authorities' reported enrolment as at the Fall Data Collection deadline each year and supplemental special needs classifications in September and February. Independent School Authorities report students with special needs to the Ministry on *Form 1701: Student Data Collection* (Form 1701).

In the 2022/23 school year, the Ministry of Education and Child Care conducted a Special Education enrolment audit, recommended by the Office of the Inspector of Independent Schools (OIIS), to verify reported enrolment on Form 1701.

Purpose

The purpose of the Special Education enrolment audit is to provide assurance to the Ministry of Education and Child Care and Independent School Authorities that schools are complying with the instructions contained in [*Form 1701: Student Data Collection, Completion Instructions for Independent Schools*](#) and Ministry policies are being followed. The audit also provides assurance that the students reported have been placed in the appropriate special education category, as per the [*Special Education Services: A Manual of Policies, Procedures and Guidelines \(April 2016\)*](#).

Description of the Compliance Audit Process

A compliance audit was conducted at Pacific Academy February 13 to 16, 2023.

Prior to the file reviews, an entry meeting was held with Head of School, Principals and Learning Support Coordinators of the Elementary, Intermediate, Middle and High School, and the Information Technology Manager. The audit team interviewed school administrators and staff to enquire about the Independent School Authority's policies, procedures, and programs.

Pacific Academy reported 118 students in special education categories at the Fall 2022 Form 1701 data submission. For the purposes of this audit, 79 student records were reviewed in the following low incidence special needs categories:

Headcount	Category
2	Moderate to Profound Intellectual Disability (Code C)
25	Physical Disability or Chronic Health Impairment (Code D)
7	Deaf or Hard of Hearing (Code F)
23	Autism Spectrum Disorder (Code G)
22	Intensive Behaviour Intervention or Serious Mental Illness (Code H)

The Learning Support Services Coordinators in the four school divisions were the key contact staff throughout the audit. They provided the audit team with evidence when clarification was required. Short meetings at the end of each day with the Head of School, the Principals, and the Learning Support Services Coordinators enabled the audit team to keep the School staff apprised of the audit progress.

The file review process encountered four issues that required special meetings. The first was related to special education services. The service providers were listed in the IEPs yet there was no evidence in the student files of the service being provided. Evidence of service provision was available for all student files when requested with the exception of two student claims reported in the Physical Disability or Chronic Health Impairment category (Code D).

The second issue was related to evidence of integrated case management for students reported in the Students Needing Intensive Behaviour Intervention or Students with Serious Mental Illness category (Code H). For 13 out of the 22 students reported in Code H, there was no evidence of planning that was coordinated with an outside agency (integrated case management) in accordance with the Special Education Guidelines. For eight of the 13 files, evidence of integrated case management was provided when requested.

The third issue was related to Individual Education Plans (IEPs). For most of the student files, there was no evidence of the student being offered the learning activities in accordance with the IEP. The evidence was provided for all student files once requested.

The fourth issue was related to students reported in the Deaf and Hard of Hearing category (Code F). There were three students reported in Code F for whom the evidence in the file did not support the diagnostic criteria. For two of the files, an audiology assessment and evidence of an annual assessment by the Teacher of the Deaf and Hard of Hearing indicating the impact of the hearing loss on education were available once requested. There was one student for whom there was no evidence of a speech-language delay, nor was there assessment information indicating that the student had substantial educational difficulty due to the hearing loss.

An exit meeting was held with the Head of School, the four campus Principals, four Learning Support Services Coordinators, and the Information Technology Manager on February 16, 2023. The auditors reviewed the purpose of the audit and the audit criteria, explained the audit reporting process, reported the findings, clarified any outstanding issues, discussed reclassifications for the 2022/23 school year, and expressed appreciation for the assistance provided.

Observations

There were no recommended reclassifications for the files reviewed in Code C or Code G.

Of the 25 student files reviewed by the auditors in Code D:

- four student claims were recommended for declassification.

Of the seven student files reviewed by the auditors in Code F:

- one student claim was recommended for declassification.

Of the 22 student files reviewed by the auditors in Code H:

- five student claims were recommended for reclassification to Code R.

The auditor(s) found that:

- Four student claims in Code D did not have evidence to meet the criteria for the Physical Disability or Chronic Health Impairment category.
 - For one student claim there was evidence in the file of a medical diagnosis of pes planus (flat feet) and leg length discrepancy. There was no evidence to support there was a significant impact on functioning and education.
 - For one student claim there was no evidence to support that the neurodevelopmental disorder significantly affected the student's functioning and education.
 - For one student claim there was evidence in the file of a medical diagnosis of syndactyly of one hand and foot. There was no evidence the student received additional special education support services, nor was there evidence to support a significant impact on functioning and education.
 - For one student claim there was evidence in the file of a medical diagnosis of a knee condition with surgery done the previous year. There was no evidence that the student received additional special education support services, nor was there evidence to support a significant impact on functioning and education.
- For one student claim in Code F there was no evidence of a speech-language delay, nor was there assessment evidence of substantial educational difficulty due to the hearing loss.
- For five student claims in Code H there was no evidence in the file to meet requirements for placement in this category:
 - For one student claim there was no evidence that planning was coordinated across agency and community. The IEP listed the outside agency as a medical professional, but there was no evidence of communication with this professional. There was no coordinated planning among the school, family, and the psychologist.
 - For one student claim there was no evidence that planning was coordinated across agency and community. There was evidence of medical professional support, yet there was no evidence of coordinated planning and communication amongst the psychiatrist, family, and the school.
 - For one student claim there was no evidence that planning was coordinated across agency and community. There was no evidence of service provision, nor was there evidence of planning with the community partners.
 - For one student claim there was no evidence that planning was coordinated across agency and community. The IEP listed the outside agencies, but there was no evidence that planning was coordinated across-agency and community, nor was there evidence of outside agency service provision.
 - For one student claim there was no evidence that indicated the student or others were at serious risk and/or interfered with their academic progress and that of other students.

There was no evidence that planning was coordinated across agency and community in the current school year, nor was there evidence of outside agency service provision.

- There was evidence of regular communication between the Learning Support Coordinators, teachers, and families. The parents/guardians have regular opportunities for meaningful consultation and input about their child's program.
- The Special Education Funding: Parent/Guardian Confirmation Form was signed and included in all student files.
- All Individual Education Plans contained goals corresponding to the category in which the students were claimed, individualized goals and measurable objectives, with adaptations and or modifications where appropriate, and strategies to meet these goals.
- There was no consistent process for measuring progress toward IEP goals. At times there were instances where teachers commented on progress toward IEP goals in the report card comments section.
- The Instructional Support Planning Process tools were consistently used for student files reported in Codes C, D, and H. These provided evidence of the student's level of functioning in various domains at school.
- Service providers were listed on the IEPs yet there were some inaccuracies in the services listed. Evidence of service provision and the amount of service was not consistently available in the student file.
- There was evidence of weekly service provision by the Teacher of the Deaf and Hard of Hearing for all students with hearing impairments.
- The student files were readily accessible and well organized but not all required information to meet the special education directives were included in the student files. There was some difficulty in navigating between the student files and the digital platforms to find the required evidence.
- There was no consistent process for recording integrated case management across campuses for student claims in Code H.

Recommendations:

The auditors recommend that:

- The School staff ensure student claims in Code D meet the criteria listed in the Special Education Services: Manual of Policies, Procedures and Guidelines. There must be documentation of a medical diagnosis of a nervous system impairment that impacts movement and mobility, a musculoskeletal condition, and/or a chronic health impairment that seriously impacts the student's education and achievement. Assessment documentation must show the student's functioning and education is significantly affected by their physical disability or chronic health impairment.
- The School staff implement a consistent and accurate Kindergarten to Grade 12 process for determining that diagnostic criteria are met before reporting students in Code D for Physical Disability or Chronic Health Impairment. A medical diagnosis, by itself, does not determine the need for special educational services by students with physical disabilities or chronic health impairments.

- The School staff ensure the only supplemental funding claims reported for funding are for those students who meet all the criteria in the category being claimed.
- The School staff ensure they claim the student in the category that is supported by the relevant evidence.
- The School staff ensure that all students reported in Code D are receiving special education services to address the needs identified in the assessment documentation that are beyond those offered to the general student population and are proportionate to the level of need.
- The School staff ensure that all claims in Code F meet the diagnostic criteria listed in the Special Education Services: Manual of Policies, Procedures and Guidelines. There must be a diagnosis of a bilateral hearing loss, a significant unilateral hearing loss with speech/language delay, or a cochlear implant. There must also be assessment information that indicates that the student has substantial difficulty due to the hearing loss.
- The School staff ensure that students reported in Code H meet the diagnostic criteria listed in the Special Education Services: Manual of Policies, Procedures and Guidelines. There must be evidence of a behaviour or mental health assessment that indicates antisocial, extremely disruptive behaviour in most other environments and consistently/persistently over time; and/or a severe mental illness diagnosed by a mental health professional.
- The School staff ensure that students reported in Code H have evidence of coordinated planning, across agency and community (integrated case management).
- The School staff implement a consistent Kindergarten to Grade 12 process for tracking integrated case management communication with outside agencies for students reported in Code H.
- The School staff ensure there is outside agency service provision, and that there is evidence of ongoing coordinated planning and communication between the school staff, the outside agency, and the parents/guardians.
- The School staff ensure that only students who meet all the criteria in Code H are reported in this category.
- The School staff ensure that only active members of the student support team are listed on the IEP and the case management plans.
- The School staff ensure that procedures are in place for declassifying students when they no longer meet category placement criteria.
- The School staff be required to undertake a Ministry sanctioned compliance workshop to enhance staff understanding of the Ministry of Education and Child Care directives regarding the special education criteria.

Auditors' Comments

The auditors express their appreciation to the school staff for their cooperation and hospitality during the audit.