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| 1701 IDENTIFICATION AND PLANNING RESOURCE Intensive Behaviour Interventions or Serious Mental Illness | | | | | | H |
| Student Name: | | | D.O.B. | | | |
| School: | Grade: | Date: | PEN #: | | | |

INITIAL each of the following for confirmation of documentation and planning process.

| Eligibility Criteria: Assessment and Impact to Learning | |
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| <i>Program Manager and School Administrator</i> | <p>Documentation that indicates:</p> <ul style="list-style-type: none"> <input type="checkbox"/> current and relevant behavioural assessment and/or <input type="checkbox"/> current and relevant mental health assessment <p>The relevant assessment indicates evidence of one or both:</p> <ul style="list-style-type: none"> <input type="checkbox"/> antisocial, extreme disruptive behaviour in most other environments or profound withdrawal or other internalizing conditions in school. These behaviours are persistent over time; and/or <input type="checkbox"/> severe mental illness diagnosed by a mental health professional (psychiatrist, pediatrician, physician, registered psychologist specializing in this area). <p>Program manager and school administrator confirm that the documented evidence indicates <u>ALL</u> of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> the behavior places student or others at serious risk and interferes with the student's academic progress and that of other students <u>and</u> <input type="checkbox"/> the school-based team and district have exhausted the resources along the continuum of support <u>and</u> <input type="checkbox"/> planning is coordinated across agency and community and has integrated case wrap-around. |

| Eligibility Criteria: School Support Planning Process | |
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| <i>Program Manager (school determines LA, RT, Counsellor, or shared coordination)</i> | <p>Student's red file contains:</p> <ul style="list-style-type: none"> <input type="checkbox"/> completed Acknowledgement of Identification Form (Signed by guardian) <input type="checkbox"/> IEP including dates of collaborative planning and review <input type="checkbox"/> documents pertinent for planning: observation notes, file review, FBA, Instructional Support Planning Tool, Basic Skills Checklist, etc. <input type="checkbox"/> documentation that the learning needs have been reviewed and IEP goals reflect multi-tiered approach <input type="checkbox"/> evidence of outside agency collaboration (wraparound meeting notes, intake forms with goals, community agency referral) <input type="checkbox"/> evidence that additional supports are provided: <ul style="list-style-type: none"> • direct intervention in classroom to support positive behavior or social emotional support as per IEP and/or • placement in a program designed to promote positive behavior change/implement IEP • ongoing, individually implemented, or small group social skills training and/or instruction in behavior/learning strategies |

Eligibility Criteria: Evidence of Community Agency Involvement

Program Manager

Provide specific information about the community agencies that are currently involved.

- full name of the agency / community service
- service start date and future / regular appointments
- support worker's name and role
- agency /service connection to development and review of student's IEP
- evidence of ongoing coordinated, cross-agency community planning such as integrated case management or "wrap-around" planning is in the student's file.

| Agency Name | Start Date/Future Date(s) | Worker Name and Role | Included in IEP |
|-------------|---------------------------|----------------------|-----------------|
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Other:

Principal's Confirmation of Appropriate Documentation

The category for additional support has been documented in MyEd BC by Inclusive Learning. The school ensures consultation has occurred with the parent and the completed "[Acknowledgement of Identification](#)" form is filed. If guardian declines identification with the Ministry, please inform Inclusive Learning to update MyEd BC.

The documentation meets the criteria established in the Special Education Services: A Manual of Policies, Procedures and Guidelines.

PRINCIPAL'S SIGNATURE:

DATE:

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