

EXAMPLES OF EVIDENCE TO SUPPORT A STUDENT'S INCLUSION IN THE NATIONALLY CONSISTENT COLLECTION OF DATA ON SCHOOL STUDENTS WITH DISABILITY (NCCD)

Decision making for the NCCD relies on evidence of personalised adjustments. Each school's evidence is contextual and reflects individual student needs and strengths and the school's learning and support processes and practices for meeting the educational needs of students with disability.

Schools will draw on evidence from across four key areas when making their decisions:

- assessed individual needs of the student
- adjustments being provided to the student to address the disability – this includes support provided with quality differentiated teaching practice
- ongoing monitoring and review of the adjustments
- consultation and collaboration with the student and/or parents and carers or associates.

The evidence examples listed below is not an exhaustive list. Some evidence may cover more than one element of the process, while others may only address one aspect.

Evidence of assessed individual needs of the student

This evidence demonstrates that the student's needs for adjustment have been identified and arise from a disability. Evidence of this aspect can include:

- Results of diagnostic or summative school and/or standardised assessments over time documenting an ongoing learning or socio-emotional need arising from a disability, e.g. continued and high level behaviour incidents, reading assessments or end of unit assessments
- Documentation of ongoing learning needs that have a limited response to targeted intervention over time and cannot be attributed to external factors such as English as an additional language or dialect, socio-economic or non-disability related causes
- Parental report of disability in conjunction with evidence of an assessed individual need
- Specialist diagnosis or reports e.g. medical practitioner such as paediatrician, or a specialist, e.g. guidance officer/counsellor, speech pathologist, audiologist
- Profiles or assessment reports that identify the functional needs of a student with disability.

Evidence that adjustments are being provided to the student to address their individual needs based on their disability

Teachers document adjustments in a number of ways. Evidence of the provision, frequency and intensity of adjustments can include:

- Adjustments to teaching noted on teacher unit, weekly or term planning
- Adjusted timetable/ staff timetables
- Teachers' teaching and learning program and program registration

- Record of educational and/or social-emotional interventions provided
- Individualised/personalised learning planning e.g. individual education plan, individual learning plan, individual curriculum plan, communication plan, behaviour plans, transition plans/ goals and strategies in program planning
- Therapy or disability-specific programs in place with an educational focus e.g. orientation and mobility program
- Records of meetings to plan for adjustments with specialist staff e.g. advisory visiting teachers, guidance officers/counsellors, psychologists, speech-language pathologists, physiotherapists
- Records of advice sought or conversations with the student or family/carer
- Adjustments or supports required in assessment settings
- Adjustments to learning materials e.g. alternate format, adjusted worksheets, reworded tasks
- Manual handling/personal care/health plans
- Specific resources developed to support individualised learning e.g. visual supports, augmentative and alternative communication supports, accessible materials
- Personalised organisational devices e.g. diary use, pictorial sequences
- Documentation of environmental adjustments beyond those already in place in the school e.g. personalised learning spaces, soundfield amplification systems
- Risk management plans for curriculum activities and for emergency situations e.g. fire drills.

Evidence that adjustments provided to the student have been monitored and reviewed

Documentation that may support school judgements about the monitoring and review of adjustments can include:

- Records of meetings to review adjustments with families/carers and specialist staff, where appropriate
- Student progress data which may include both formative and summative assessments
- Progress or file notes by teacher, specialist staff or paraprofessionals
- Behaviour monitoring data
- Evidence of interventions provided over time, with monitoring of the effectiveness of the intervention and changes to intervention occurring as required
- Health plan provided by medical specialist that is reviewed regularly.

Evidence of consultation and collaboration with the student and/or parents and carers or associates

Documentation that may support school judgement that consultation and collaboration in the provision of adjustments has occurred can include:

- Documented meetings, phone calls, conversations between school and parent/carer (minutes or notes)
- Documented student plans signed by parent and/or student
- Record of formal parent-teacher interviews
- Parent-teacher communication books
- Emails between student and/or parents and carers or associates.