

Individual Education Plan (IEP)

THIS IEP CONTAINS AC MOD ALT

REASON FOR DEVELOPING THE IEP

- Student identified as exceptional by IPRC Student not formally identified but requires special education program/services, including modified/alternative learning expectations and/or accommodations

IPRC Date: 20/05/2013

Placement: Regular class with resource assistance

Exceptionality (identified): Communication: Deaf and Hard-of-Hearing

STUDENT PROFILE

Student OEN: 24682468

Last Name: QRS

First Name: Q

Gender: M

Date of Birth: 20/05/2002

School: Elementary School

School Type: Elementary

Principal: Mr. Principal

Current Grade/Special Class: Grade 6

School Year: 2013-14

Reporting Period

Elementary



Progress Report

RELEVANT ASSESSMENT DATA

Information Source	Date	Summary of Results
Multiple Intelligence Assessment (classroom)	30/09/2013	Visual learner with support from Kinesthetic approach to learning.
Classroom based vocabulary assessment	17/09/2013	Vocabulary age appropriate.
Classroom based writing samples	16/09/2013	Written expression age appropriate.
Educational Assessment	11/02/2013	Report indicates math computation and problem solving skills at grade level.
Audiologist Report	20/07/2012	Report indicates severe to profound bilateral sensorineural hearing loss. (Student has had a cochlear implant since age 2)
Psychological Report	03/03/2011	Report indicates average cognitive ability.
Speech-Language Pathology Report	24/09/2010	Report indicates moderate speech impediment.

STUDENT'S AREAS OF STRENGTH AND AREAS OF NEED

Areas of Strength	Areas of Need
Computer keyboarding skills	Social skills with peers
Organizational skills	Self-advocacy skills
Co-operation with adults and peers	Auditory and Visual Processing Skills
Visual learner	

SUBJECTS, COURSES/CODES OR ALTERNATIVE SKILL AREAS TO WHICH THE IEP APPLIES

Accommodated only(AC), Modified(MOD), Alternative(ALT)

1.Language	<input checked="" type="checkbox"/> AC <input type="checkbox"/> MOD <input type="checkbox"/> ALT
2.Math	<input checked="" type="checkbox"/> AC <input type="checkbox"/> MOD <input type="checkbox"/> ALT
3.Social Studies	<input checked="" type="checkbox"/> AC <input type="checkbox"/> MOD <input type="checkbox"/> ALT
4.Science and Technology	<input checked="" type="checkbox"/> AC <input type="checkbox"/> MOD <input type="checkbox"/> ALT
5.Collaboration	<input type="checkbox"/> AC <input type="checkbox"/> MOD <input checked="" type="checkbox"/> ALT
6.Self Regulation	<input type="checkbox"/> AC <input type="checkbox"/> MOD <input checked="" type="checkbox"/> ALT

REPORTING FORMAT Provincial Report Card Alternative Report**ACCOMMODATIONS FOR LEARNING, INCLUDING REQUIRED EQUIPMENT**

Accommodations are assumed to be the same for all program areas unless otherwise indicated

Instructional Accommodations	Environmental Accommodations	Assessment Accommodations
Visual aids	Strategic seating to optimize hearing	Additional time
Extra time for processing information	Hush-ups on chairs	Oral and written clarification for assessments
Visual supports to presentations	Individual FM system	Alternative settings
Word processing for written tasks	Reduce background noise in all environments	Word processing for written tasks
Use of personal FM system	For group work, limit group to 2 peers	Use of personal FM system
Rewording/Rephrasing of information		Fewer tasks to demonstrate skill/concept
Preteach vocabulary		Due dates and assignment requirements provided in writing
Provide instructional materials for reference		
Closed captioning for AV resources		
Highlight peer responses during		

classroom discussion

PROVINCIAL ASSESSMENTS

This is a provincial assessment year No Yes

Type of assessment: Grade 6 -- Reading, Writing and Mathematics

Permitted Accommodations No Yes (list below)

Setting-Individual or Quiet Setting

Presentation Format-Assistive technology formats

Response Format-use of a computer or word processor or assisted devices and technology

Exemption with Rationale No Yes (list below)

Deferral of Ontario Secondary School Literacy Test (OSSLT) with Rationale No Yes (list below)

Ontario Secondary School Literacy Course (OSSLC) Yes

Special Education Program

Subject or Course/Code or Alternative Skill Area

Collaboration

Baseline Level of Achievement (usually from previous June report card):
 Prerequisite secondary course (if applicable):
 Letter grade/Mark:
 Curriculum grade level:

Baseline Level of Achievement for Alternative Skill Areas:

Is comfortable in social situations and participates in group discussions. He needs to initiate interactions with peers during group work and leisure activities.

Annual Program Goal(s): A goal statement describing what the student can reasonably be expected to accomplish by the end of the school year (or semester) in a particular subject, course, or alternative skill area.

With minimal verbal prompts, will build healthy peer-to-peer relationships through personal interactions during instructional group work and in non-structured leisure situations throughout the school day.

Learning Expectations	Teaching Strategies	Assessment Methods
Progress Report		
Independently initiate conversation with peers during unstructured leisure periods.	Provide initial script for student to use. Fade verbal prompts and script as student masters skill.	Student self –monitoring. Debrief with student weekly then fading.
With minimal verbal prompts, share information or ask questions during small group work on a daily basis.	Model small group interaction for student. Prompt interaction initially and fade prompts as student masters skill.	Teacher checklist monitoring student interaction (weekly structured observation for interaction type and level of prompting required to interact).
Term 1		
Term 2		

Special Education Program

Subject or Course/Code or Alternative Skill Area

Self Regulation

Baseline Level of Achievement (usually from previous June report card):
 Prerequisite secondary course (if applicable):
 Letter grade/Mark:
 Curriculum grade level:

Baseline Level of Achievement for Alternative Skill Areas:
 Struggles in daily work when he is unclear of learning expectations and does not ask for clarification. The student independently maintains his cochlear implant and occasionally takes responsibility for the FM System.

Annual Program Goal(s): A goal statement describing what the student can reasonably be expected to accomplish by the end of the school year (or semester) in a particular subject, course, or alternative skill area.

Student will independently and consistently seek clarification when needed and will, with minimal support, care for his FM system on a daily basis in order to meet his personal goals for this year.

Learning Expectations	Teaching Strategies	Assessment Methods
Progress Report		
Independently and consistently, "check in" with peer partner before beginning daily tasks and ask for clarification if necessary.	Provide peer partner. Model "check in" and asking for clarification. Prompt when necessary.	Teacher observation to assess student skill development and level of prompting required to complete task.
Transfer his FM system from teacher to teacher daily with minimal verbal support from staff.	Model FM set up and care to student. Provide checklist and schedule for student to follow and monitor.	Student self- monitoring. Teacher conferencing with student (weekly) to assess skill development and problem solve alternatives with student (anecdotal notes).
Term 1		
Term 2		

HUMAN RESOURCES (teaching/non-teaching)

Type of Service	Frequency or Intensity for board staff	Location
Deaf /Hard of Hearing Itinerant Teacher	FM system support; direct teaching (45 min per week starting in September)	Regular Classroom/Resource Room
Special education resource teacher	Once per month-consultation Sept.- June	Resource Room
Educational audiologist	Once per term consultation (October and May)	Resource Room

Health Support Services in the School Setting: No Yes

IEP DEVELOPMENT TEAM

Staff Member	Position
Mr. Principal	Principal
Mrs. Teacher	Classroom teacher
Ms. Itinerant	Itinerant Deaf/Hard of Hearing Teacher
Ms. Special Education Resource Teacher (SERT)	SERT

TRANSITION PLAN No Yes

Long-term Goal(s):

To independently and consistently participate both academically and socially during the school day as preparation for increased expectations for a full rotary schedule in the Intermediate Division next school year.

Actions	Person(s) Responsible for Actions	Timelines
Focus on Self-Regulation (transitioning FM equipment from teacher to teacher). Student to add reflections and self assessment to his "All About Me Portfolio".	Student, teacher, SERT	Grade 6
Focus on Collaboration (peer to peer relationships during group work and leisure opportunities). Student to add reflections and self assessment to his "All About Me Portfolio".	Student, teacher, SERT	Grade 6
Regular, independent use of Assistive Technology (FM, computer or laptop) that will be used during EQAO assessment and instructional tasks.	Student, teacher, SERT	Grade 4, 5 and 6
Interest, aptitude assessment to assist with Career Planning and program decisions. Add results to his IPP.	Student, parents, teacher, guidance	Grade 7 and 8



LOG OF PARENT/STUDENT CONSULTATION

Date	Description of Consultation	Parent/Student Feedback/Outcome of Consultation
20/09/2013	Telephone discussion to review last years IEP and discuss goals for upcoming year.	Parent indicated that they would like to see more student ownership for FM system.
07/10/2013	Draft copy of IEP sent home for parents to review and provide input	Parents reviewed-no changes made at this time.
14/10/2013	Term #1 sent home.	Parents signed and in agreement with term goals.

PRINCIPAL'S RESPONSIBILITY

The principal is legally required to certify that the IEP is developed within 30 school days after placement in the program, and that the parent has been consulted in its development. The principal is further required to ensure that a copy of the IEP is sent to the parent (or the student if 16 years of age or older), that the IEP will be implemented and reviewed in relation to the student's report card each reporting period, and that it will be placed in the OSR.

Principal Signature

Date

Parent/Guardian Signature
(Please sign and return this page to the school for the OSR)

Date

Student Signature (if 16 years of age or older)

Date

IEP completion date:15/10/2013