



Inclusion

Updated: April 2020
Owner: Head of Inclusion

1. Vision

- 1.1. The Inclusion Department's vision is to make the RPS community as responsive as possible to the diverse needs of individual children in a safe and inclusive setting across the school, and to help children achieve their full potential through providing an equal opportunity for enhanced academic wellbeing promoting positive self-esteem and confidence.

2. Staffing

- 2.1. Governor of Inclusion: Mr. Nishi Saran
- 2.2. Head of Inclusion (Leader of Provision): Mrs. Hala Koussous Muasher
- 2.3. Inclusion Champion: Mrs. Hala Koussous Muashe
- 2.4. Support Teacher (Inclusion Teacher): Mrs. Laura Mogford
- 2.5. Learning Support Assistant: Mrs. Mai Sattar

3. The Mission

- 3.1. The Inclusion Department's mission is to identify individuals or groups of individuals who require special attention, and to develop strategies that will optimize children's learning experiences at school. It is also to provide the best possible conditions, where learners realize the utmost level of their academic and social potential, through establishing positive educational conditions that are responsive to individual differences, and supportive to teacher enterprise.

4. The Philosophy

- 4.1. Our philosophy is that every child is entitled to a personalized education that will bring out the best in him/her; an education that will build on the strengths and will enable the child to develop love for learning while helping them grow into confident and independent learners.
- 4.2. All practices of the Inclusion personnel at RPS stem from a basic philosophy that believes in the basic right of each learner to be included in the educational process. The philosophy of the department believes in building a balanced character and adjusted personality that goes in line with preparing the individual to meet the demands of an ever changing world.
- 4.3. The foundation of our philosophy is embedded in the belief of valuing the individual and his/her freedom and dignity and facilitating the opportunity to practice informed choice. The children are a diverse group with unique strengths and needs, and that inclusion and differentiation are the likely strategies to address these differences.
- 4.4. Emphasizing the importance of partnership with the parents/guardians is an essential element of the efforts to meet the children's educational and social needs, and to achieve the highest level of his/her potential.

- 4.5. Individual developmental changes, the children's ability, style of learning and needs vary to a large extent. This calls for providing support services aiming at helping him/her overcome the possible frustration and the distress resulting from the learning adventure, while celebrating the accomplishment and achievement in any task that the children attempts.
- 4.6. Our services are not an alternative for the regular instruction inside the class room. We try to provide maximum assistance to the learner to meet the expectations of the academic program of his/her school leve.
- 4.7. The intervention of the Inclusion team to support both, children and parents, starts very early. Initially, this entails observing the child and collecting relevant data about his/her needs, and communicating with the family, and then subsequently with the referral process if needed.

5. Aims

- 5.1. The aim of this policy is to outline how RPS provides for SEND children within the guidance provided in the KHDA Inspection Handbook and the U.K. SEND Code of Practice, 2014 valuing diversity and providing equal opportunities to all through optimal inclusion. It is hoped that all guidelines from the Executive Council Resolution No.2 of 2017 will be followed accordingly.

6. Definitions:

- 6.1. The *UAE Federal Law 29 (2006)* defines **a person with special needs** as every person suffering from a temporary or permanent, full or partial deficiency or infirmity in his physical, sensory, mental, communicational, educational or psychological abilities to an extent that limits his possibility of performing the ordinary requirements as people without special needs.
- 6.2. The *UAE School Inspection Framework* defines a **Special Educational Need** as 'Educational needs that are different from those of the majority of students, and which arise from the impact of a disability or recognised disorder'.
- 6.3. A **Disability** is 'a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.'
- 6.4. The *UAE Federal Law 29 (2006)* defines **Discrimination** as any segregation, exclusion or restriction due to special needs leading to the damage or denial of recognition of any rights granted by the prevailing legislation in the country or its practice or enjoyment on an equal footing. The definition of **"day to day activities"** includes mobility, manual dexterity, lifting, hearing, eyesight, speech, memory, and the ability to concentrate, learn or understand.

7. Legislation:

- 7.1. This policy aims to ensure that RPS is compliant with the terms of: the UAE Federal Law 29 (2006) concerning the Rights of People with Special Needs;
- 7.2. UAE Federal Law 2 (2015) against Discrimination and Hatred;
- 7.3. The School's admissions policy adheres to the stipulations of the **Dubai Inclusive Education Framework (DIEF)** (Published November 2017).
- 7.4. The School's admission policy adheres to the stipulations of the UAE Federal Law No 29 of 2006 concerning the Rights of People of Determination.
- 7.5. The School's admission policy adheres to the stipulations of the Dubai Law No 2 of 2014 concerning the Protection of the Rights of Persons with Disabilities in the Emirate of Dubai.
- 7.6. The School's admission policy adheres to the stipulations of the UAE Executive
- 7.7. Council Resolution No. (2) of 2017 Regulating Private Schools in the Emirate of Dubai (especially Article 4 clause 14; Article 13, clauses, 16, 17 and 19; Article 23 clause 4) Article 4 Clause 14:
- 7.8. To establish the conditions, rules, and standards that are required to facilitate the enrolment and integration of Students with disabilities in Private Schools; Article 13 Clause 16:
- 7.9. To treat its Students equitably and not discriminate against them on grounds of nationality, race, gender, religion, social class, or special educational needs of Students with disabilities; Article 13 Clause 17:
- 7.10. To admit Students with disabilities in accordance with the terms of its Educational Permit, the rules adopted by the KHDA, and the relevant legislation in force; Article 13 Clause 19:
- 7.11. To provide all supplies required for conducting the Educational activity, including devices, equipment, furniture, and other supplies which the KHDA deems necessary, such as the supplies required by Students with disabilities; Article 23 Clause 1:
- 7.12. To provide for equality amongst Students and prevent discrimination based on race, gender, nationality, religion, or social class; Article 23 Clause 4:

- 7.13. To provide a special needs friendly environment and academic programmes appropriate for Students with disabilities in accordance with the rules and conditions determined by the KHDA and the concerned Government Entities in this respect.

8. CATEGORISATION OF NEED

8.1. The UAE Inspection framework identifies six categories of **need**:

- 8.1.1. Behavioural, Social and Emotional;
- 8.1.2. Sensory (Visual and Hearing Impairment);
- 8.1.3. Physical Disability;
- 8.1.4. Medical Conditions or Health-related Disability;
- 8.1.5. Speech and Language Disorders;
- 8.1.6. Communication and Interaction;

9. General Learning Difficulty (GLD)

9.1. The UAE Inspection framework identifies four categories of GLD:

- 9.1.1. **Learning Difficulties 1** - Below average general intellectual functioning often reflected in a slow rate of maturation, reduced learning capacity and inadequate social adjustment.
- 9.1.2. **Learning Difficulties 2** - Significant learning difficulties which have a major effect on participation in the mainstream curriculum, without support.
- 9.1.3. **Profound and Multiple Learning Difficulty (PMLD)** - Complex learning needs resulting in severely impaired functioning in respect of a basic awareness of themselves, the people and the world around them. They may include physical disabilities or a sensory impairment. A high level of support is likely to be required.
- 9.1.4. **Assessed Syndrome** - A syndrome usually refers to a medical condition where the underlying genetic cause has been identified, and the collection of symptoms is genetically related. Examples of syndromes include: Down's syndrome, Stickler syndrome and Williams syndrome.

10. Specific Learning Difficulty (SLD):

10.1. The UAE Inspection framework identifies four categories of SLD:

10.1.1. **Dyslexia – reading**

10.1.2. **Dysgraphia - writing/spelling**

10.1.3. **Dyscalculia - using number**

10.1.4. **Dyspraxia – fine and gross motor skills.**

See all laws and legislation in References.

11. Aims

- 11.1. The Inclusion Department aims to:
- 11.2. Help children reach their maximum potential personally, socially and academically.
- 11.3. Help children deal with different life demands and develop healthy coping skills.
- 11.4. Help children develop an ongoing and deepening understanding of their abilities and needs.
- 11.5. Help children assume an ever-growing sense of responsibility for their education.
- 11.6. Help children be aware of and respond to the diversity of their own needs.
- 11.7. Help children develop positive self-esteem and confidence.
- 11.8. Help children prepare for their future career by discovering and developing their vocational interests.
- 11.9. Ensure that the school detects and identifies the social and educational needs of all children as early as possible, especially those that require the time and attention of the Inclusion Department.

12. Policy

- 12.1. The purpose of the services of the Inclusion Department is to provide assistance to children who are enrolled at RPS and not coping with the demands of the curriculum because of diagnosed/identified learning differences. The aim is to enhance the children's chances of meeting the expectations of the school programs, and to ensure equal opportunities for the achievement of their maximum possible level.
- 12.2. The support is not designed to provide a totally individualized program of study. It is to provide support services that will enhance the regular curriculum and not replace it.
- 12.3. The Inclusion Department's services throughout the academic year include pullout sessions as well as support in the inclusive setting, differentiation of pedagogy, content and product. Accommodations and /or modifications are provided throughout the academic year and during formative, summative and standardized assessments.

- 12.4. The professional commitment of the Inclusion Department is to ensure that the enrolled children are supported until they eventually develop an ongoing and deep understanding of their abilities and needs. The phase of exiting the program is evaluated according to the children's ability to demonstrate self-advocacy in addition to an independent ability to pursue an ever-increasing responsibility for his/her education.
- 12.5. Whenever needed, our staff will take the initiative to inform the concerned parents about the necessity of referring the children to an out-of-school agency or professionals to receive further assessment or intervention.

13. Support and Services:

- 13.1. All types of support services are within the domain of the Support Services Department. All parties shall be informed through the proper channels of communication about each and every children's allowances and services that are relevant to his/her needs. A detailed description of these services will be followed in the subsequent section:
- 13.1.1. It is understood that each child enrolled at RPS is fully entitled to seek and to receive learning support services from a professional team. This will be made available after consulting both, the class teacher and the parents/ guardians, and the decision will be based on what learning environment will serve and meet the children's needs best.
- 13.1.2. It is understood that the children's concerns within the domain of SEND will be dealt with in the most professional and confidential manner.
- 13.1.3. It is understood that all the SEND documents and records, including the Individual Education Program (IEP), observational notes, meetings with children and/ or parents and the reports, are to be considered as classified and privileged and not accessible except for the SEND team and the concerned parties.
- 13.1.4. It is understood that all external reports will be approved by the school.

14. Inclusion:

- 14.1. The Inclusion Department offers its services in a manner that is designed to be inclusive. This means that to the extent possible, any children identified with a specific need related to his or her learning will be supported in such a way as to limit disruption to the normal flow of his or her regularly scheduled day.

15. Children Admission:

- 15.1. The children's enrollment onto the SEND register is based on the following:

- 15.1.1. Documented observation at random times and situations (in-class and out-class).
- 15.1.2. Contacting the parents for further information concerning their child's history, analysis and prior diagnosis.
- 15.1.3. Parental consent for inclusive professional evaluation (that could be implemented out of school). SEND team will guide parents in this process until a full and detailed report is provided to the school.
- 15.1.4. The Inclusion Department will prepare a detailed IEP to be discussed with the parents/ guardians, and this will be reviewed and activated at the end of every semester. The IEP will be agreed and signed by both the school and the parents (and children as appropriate) and will be regularly reviewed by all concerned parties.

16. The Rights of Children:

- 16.1. Through the learning support team, RPS endeavors to provide unrestricted support to all its registered children to enable them to become self-reliant and self-advocates. As well as to improve their learning abilities and their academic standards. The learning support team is experienced in providing special pedagogy to promote learning independence, and in setting strategies and differentiation techniques. This team aims to ensure a positive and healthy learning environment and advocacy to all children.

17. Individual Education Program (IEP):

- 17.1. The IEP is a shared endeavor and responsibility among all parties; the class room teacher, SEND, parents, and the children themselves.
- 17.2. Children who receive Learning Support will have an Individual Education Program (IEP). The IEP creates an opportunity for teachers, parents, school administrators, related services personnel, and children to work together to improve educational results for children with learning differences.
- 17.3. The IEP should mainly consist of the following features:
- 17.3.1. Nature of difficulty.
 - 17.3.2. Date of initializing the IEP.
 - 17.3.3. Goals and objectives (short term and long term).
 - 17.3.4. Strategies that will be used.
 - 17.3.5. Areas of strength.
 - 17.3.6. Provision of help.
 - 17.3.7. Date of follow-ups.
 - 17.3.8. Parents' consent.
 - 17.3.9. Role of parents in supporting the IEP.
 - 17.3.10. An area where the achievements and accomplishments can be monitored. (Mastery and comments)
 - 17.3.11. Evidence of the children's progress/regression. (reference to children's folders)
 - 17.3.12. Teachers' involvement in contributing to the IEP and their role.
 - 17.3.13. Signatures of all appropriate parties
- 17.4. For an effective IEP, parents, teachers and the SEND staff, specialists-- and often the children--must come together to look closely at the children's identified needs. These individuals provide knowledge, experience and commitment to design an educational program that will help the children be involved in the curriculum and its requirements and make progress in it. The IEP guides the efforts of the learning support team and teachers and directs the delivery of the services for the children.

*For more details about the IEP- Kindly refer to the IEP Guide, found in [appendix 1](#).

18. Exiting the Learning Support Services:

- 18.1.1. Criteria to exit the program:
- 18.1.2. To be qualified to exit the program, the children must demonstrate that he/she has achieved the coping skills agreed upon (independent learning) in the IEP short term goals and can implement them in the regular class, these include the following but not limited to them.
- 18.1.3. Advocate for own self – using effective and suitable communication skills and means.
- 18.1.4. Demonstrate note taking skills.
- 18.1.5. Able to access school resources.
- 18.1.6. Productive study habits, test taking skills, organization and time management skills.
- 18.1.7. Develops strategies to respond to questions relevantly
- 18.1.8. Develops strategies for literacy, writing, reading, and comprehension.
- 18.1.9. Work through his/her own learning style
- 18.1.10. Participate effectively in cooperative learning activities.

19. Accommodations and Modifications:

19.1. The Head of Inclusion is the professional body at RPS which is responsible for taking charge of informing, coordinating, and arranging all the accommodations and/or the modifications required to meet the children's needs in accordance with the school's philosophy, policy, and procedures. These measures include the assessment processes that the school implements through its assessment policy. All types of modifications and accommodations should be consistent with the children's needs and based on diagnosis/evaluation report/s. The definition of both aspects of provision of help is as follows:

19.1.1. Accommodation: Techniques and materials that allow individual children, who have a diagnosed learning difficulty/s, to complete school or work tasks with greater ease and effectiveness. Examples include spellchecking, recorders, extra time for completing a task or exam or an assessed piece of work. This provision is granted to all the children - based upon an official educational /psychological assessment report approved by the school- if it was provided. These include but are not exclusive of the following:

- 19.1.1.1.1. Additional time

- 19.1.1.1.2. Rest periods
- 19.1.1.1.3. Laptop for written work. No facility of the software may be used that gives an advantage over other children. (No access to information stored in the memory or on disk, no thesaurus, no spell check). Candidates with severe dyslexia may use a spellchecker during the written work and daily assessments - An official authorization is needed during official assessments.
- 19.1.1.1.4. Reader: The role of the reader is to read the examination paper to the children, repeat when the children requests. The reader may also read back the children's responses at the children's request.
- 19.1.1.1.5. Writer: The role is to write down what the child says as an answer.
- 19.1.1.1.6. Prompter: A prompter is a person who supports the children to remain focused on the task / exam at hand
- 19.1.1.1.7. Change of print: Enlarged print, change of font, lay out of the paper, and colored paper
- 19.1.1.1.8. Oral responses for a child who is unable to provide a handwritten or word-processed script (Example Dyslexics)
- 19.1.1.1.9. Dictionary or calculator
- 19.1.1.1.10. Seating arrangement
- 19.1.1.1.11. Recorder.

20. Modification

- 20.1. This provision entails all changes in both, the academic program or instruction and the assessment process. It is the alteration of the wording/content/amount "coverage"/ or criteria of any assessment tool or means. These changes are due to an identified/ diagnosed learning difficulty which is stated in the children's IEP. All modified assessment tools (assessment sheets, project plans or reports...Etc.) should state clearly:
 - 20.1.1. Changes made to the language of the exam questions: structuring and simplifying of language; rephrasing of question without alternation to the technical language.
 - 20.1.2. Reducing the number of questions
 - 20.1.3. Reducing the content of the material to be studied
- 20.2. Conditions for extending accommodations and / or modifications:

20.2.1. The presence of the needs of a child to any of the above (but not limited to) from his/ her academic portfolio – for the last three months.

20.2.2. Feedback from parent, teacher, children him/herself, SEND observation

20.2.3. Official educational/psychological assessment report approved by the school that specifies the children's needs (if available)

21. Evaluation and assessment:

21.1. Evaluation is considered an essential part of the SEND work. The primary purpose of evaluation is to obtain information that will help us and parents to understand the individual educational needs of the children, and to help the children understand themselves in relation to the learning tasks and educational decision they have to face.

21.2. Teachers will also be able to understand better class or grade competency and hence be able to plan their pedagogy more effectively.

21.3. Assessment / evaluation is conducted through two processes:

21.4. Informal assessment: This is undertaken jointly when liaising with the teachers, parents and the children themselves. The SEND provides evaluation and interpretation of the results derived from official educational reports as well as diagnostic tests pertaining to the children.

21.5. The team fully investigates the nature of any difficulty through day to day observation of the children across the school, collation of the children's academic work, progress or otherwise consultation with subject teacher.

21.6. Formal assessment: This includes the administration of standardized tools that are recognized by official and authorized parties, as the measure of abilities, personality, and behavioral assessment devices. These tools are applicable only by a special permission or allowed to authorized/licensed professionals. Advice on effective intervention is then given in the light of a comprehensive report, an ILP (Individual Learning Plan) a SNAP assessment and later, an IEP if necessary.

22. Documentation:

22.1. The SEND team is responsible, for keeping an up-dated and detailed record on all evaluation processes that are taking place or carried out either by any member of the team or an out-of-school party, whether it is a formal or informal evaluation. The documentation must include a detailed description of the children's performance, the results of the evaluation, and a summary on the meetings with parents/guardians, and what is agreed upon with the school administration as this could be part of the IEP. All records are kept on iSAMS.

23. Channels of Communication:

23.1. The SEND operates through an ongoing open line of communication between the staff, children and parents. These channels will ensure proper planning, the exchange of information, and two – way feedback. There will be at least two meetings per term with the concerned parents to follow on the children's achievement and adjustment. In addition, there will be continuous communication through the electronic mail, written reports and the communication copybook where necessary.

24. Procedures

24.1. Children's Enrollment:

24.1.1. The children will be admitted to the SEND promptly upon meeting with the concerned parties (parents/ guardians)

24.1.2. Observation:

24.1.3. The SEND team will conduct a series of direct and indirect observations as part of data collecting process about the concerned children. The observation process will be carried after the SEND receives a note from either, parents, teachers, or the school administration concerning the children's academic status. The observation process takes place in and out of class.

24.2. The Referral Process:

24.2.1. The SEND follows a structured and systematic approach in order to maintain clarity and ease of dissemination of information leading to early intervention, formal educational assessment and official registration at the department.

24.2.2. Initial Referral: This is completed by the teacher – it is best if the initial referral is made by email to ensure a record of the referral. Checklists are available for teachers to support collection of data of the children.

24.2.3. Comprehensive Referral Report: Teachers fill out the SEND referral form. Head of Inclusion will observe children accordingly and work with the class room teacher to pull together an ILP.

24.2.4. Request for Official Assessment Form: An in-house assessment is done and then request is officially made to the parents to pursue a formal educational/ psychological specialist assessment, only if necessary. (Mainly out of school referral)

24.2.5. Progress and Monitoring Report: A sustainable document between teachers, parents and the SEND team to monitor the progress of the children. The IEP is implemented for a specific period of time and then reviewed and modified. Review of the IEP is undertaken in consultation with parents and teachers and based on the progress and monitoring report.

25. Children's Progress monitoring

25.1. The SEND monitors the progress of enrolled children on a continual basis throughout the year. Different assessment techniques are used, appropriate to the skills and content being developed.

25.2. Formative Assessments:

25.2.1. This is continuous and done on daily basis. It includes homework, quizzes, class tests, group and individual projects and presentations. Attitude to learning and participation in the work of the class also form an important part of the overall assessment of each child.

***Appendix 1 IEP GUIDE:**

1. IEP Process

1.1. The most critical component of the Individual Educational Program (IEP) occurs before any IEPs are planned, written or implemented. Being children-focused is essential in the quality of and commitment to the IEP process. A children-focused process involves creating relationships with children and parents which tend to result in:

1.1.1. friendlier and more positive language;

1.1.2. more achievable and relevant goals that build on strengths;

1.1.3. increased success of implementation.

1.2. Embedded in a children-focused IEP process is a strong belief in the necessity and power of IEPs for individual children. This belief sets the tone and focus for the entire IEP process and helps teachers and others to overcome some of the challenges they may face in supporting children with special education needs. This involves a fundamental understanding of:

1.2.1. the IEP and its purpose;

1.2.2. the essential elements of an IEP and their value;

1.2.3. the links between assessment and the IEP.

1.3. This shared understanding allows individual staff members to work together as a team by ensuring they are oriented to a common purpose in the development and implementation of the IEP process. This learning team may consist of the class room teacher, Specialist(s), Head of Inclusion, parents and children (where appropriate). This team could also include LSAs, teacher assistants and health-related professionals such as speech and language pathologists, psychologists, occupational therapists, physiotherapists, and educational specialists.

2. Staff Involvement in the development of the IEP

2.1. The Head of Inclusion is responsible for ensuring that an IEP is developed and implemented for each child who is receiving pull-out learning support.

2.2. The Head of Inclusion will develop the IEP in collaboration with the class room teacher, subject teacher(s) and other specialists (if necessary)

2.3. An IEP is a written commitment of intent by the learning team to ensure appropriate planning for children of determination. An IEP is a concise plan of action designed to address children's educational needs and is based on diagnostic information which provides the basis for intervention strategies

3. An IEP is:

- 3.1.** a written plan describing the special education program and services required by a particular child with educational needs;
- 3.2.** a way to focus on specific educational and/or social goals from the appropriate grade level curriculum;
- 3.3.** a written action plan outlining teaching and assessment strategies needed to assist the children in achieving learning expectations to meet their targets;
- 3.4.** a tool to help teachers monitor and communicate the children's growth;
- 3.5.** a plan developed, implemented, and monitored by school staff;
- 3.6.** a flexible, working document that can be adjusted as necessary;
- 3.7.** an ongoing record that ensures accountability and continuity in programming;
- 3.8.** shared with teachers through a link for the Inclusion Provision Map on SharePoint.

4. An IEP is not

a description of everything that will be taught to the children;

an educational program or set of expectations for all children.

5. Steps in the IEP Process

5.1. One way of looking at the IEP process is as a set of interrelated actions that can be described as the following cycle of five steps. These steps may occur in different sequences or be worked on simultaneously, depending on the individual needs of children.

6. Identifying strengths and areas of need

6.1. Because the purpose of the IEP is to establish an individualized program, it is essential to identify the children's strengths and specific learning needs. Knowing what the children's strengths are, will help the learning team choose goals, strategies and accommodations that build on these strengths. Knowing what the children's interests and personality traits are, can also contribute to more effective programming decisions. Learning needs may include academic needs as well as social, behavioral and other needs.

6.2. The Children Study Team (SST) should examine information from a variety of sources in order to accurately identify children needs. These sources may include:

6.2.1. teacher observations;

6.2.2. classroom assessments and products;

6.2.3. specialized assessments;

6.2.4. parent observations;

6.2.5. children interest surveys.

7. Setting the direction

7.1. Establishing priorities helps the SST focus on what is critical for the children to learn this school year. The team establishes these priorities based on all the information that has been gathered to date and the availability of resources. To determine the most important learning goals, the team considers:

7.1.1. priority areas to focus on;

7.1.2. possibilities for using this new skill or knowledge in other areas and settings;

7.1.3. related areas of strength;

7.1.4. how this need affects overall learning and achievement;

7.1.5. transferability to other subject areas.

8. Creating a plan

8.1. Based on a discussion of the children's needs and strengths, as well as the priority areas identified, the SST will develop a plan that includes goals and action plans for the children. Typically, a child may have from two to five goals. The IEP does not target all learner outcomes, only those considered most critical for independent performance in the most meaningful activities.

9. Implementing the plan

9.1. In this phase of the process, the SST reviews the content of the IEP and how progress will be measured. Teachers then put the instructional and assessment strategies into practice and adjust action plans as needed. Parents and other team members may support the IEP goals at home or in other contexts.

10. Reviewing, revising and planning for transition

10.1. Ongoing review and revision are important parts of the IEP process. Review meetings are opportunities to discuss the children's program and consider possible revisions. The year-end review is especially important as the SST reviews the education plan and adds written recommendations to the IEP. This is particularly true for children making any kind of transition.

10.2. Parents or other team members may also request a review of the IEP at any time if they have concerns about the children's progress or if the children are experiencing significant changes in achievement, attitude or behavior. The IEP can be adjusted or changed at any time throughout the school year as the SST deems necessary. Planning for transition involves identifying the kinds of skills that need to be in place for children to be successful today and in future settings and developing a plan of action to ensure children acquire these skills and attitudes. Planning for transition involves identifying potential changes within the next school year and outlining strategies for preparing and supporting children through these transitions.

11. Sections of the IEP

- 11.1.** Summary of assessment data and current achievement levels
- 11.2.** Educational and/or social goals for the children to address his or her needs;
- 11.3.** Action plans to achieve these goals;
- 11.4.** Teaching and assessment strategies to help carry out these action plans;
- 11.5.** Formal review of progress at regularly scheduled reporting periods;
- 11.6.** Other information to facilitate support for the children.

12. Assessment Data

- 12.1.** Information in this section of the IEP should be directly related to the identification of the children's educational needs and the types of programs, supports and services these children might need. The assessment data should include reports from specialized assessment, which is formal, standardized testing done for diagnostic and programming purposes and completed by qualified professionals.
- 12.2.** It includes cognitive and psychological assessments as well as medical and health-related assessments. Possible sources of assessment data from specialists include current educational assessments, medical/health assessments such as vision, hearing, physical, neurological, speech and language assessments, occupational therapy, physiotherapy, behavioral, psychological or psychiatric assessments.
- 12.3.** Current data is generally considered to be data that has been collected within the last two or three years. Each assessment report should be listed within the IEP and should include the date and source. In addition to standardized tests, specialized assessment could include formal observations that could be used to make a diagnosis. The IEP needs to reflect the connection between the relevant data and the children's learning strengths and areas of need. This section of the IEP should also include any medical assessment relevant to the children's learning needs.
- 12.4.** For example, it might include a summary of a report that confirms a diagnosis such as ADHD and might indicate whether or not the children are on daily medication. Only medical information directly relevant to the children's learning needs should be included on the IEP. (This information needs to be handled sensitively and, on a case,-by-case basis.)
- 12.5.** For example, a Year 5 child who appears to have average cognitive functioning, but reads and writes significantly below grade-level expectations, might have a specialized assessment that includes cognitive ability and educational levels in language and math. Summary of the

assessment information can be found on the IEP. A lot of the results can be based on GL Assessment Data.

13. Current level of achievement

- 13.1.** The current level is a “snapshot” of how a child is performing in the classroom, in relation to the grade-level program of studies.
- 13.2.** It is generally completed by the classroom teacher and includes such strategies as informal reading inventories, writing samples, teacher-made tests and classroom observations. Current level of performance can also include standardized tests designed to be administered by the Head of Inclusion. Teachers use this data to assess children growth and to plan for instruction. This section should also include summaries of classroom assessments that are current (e.g., within one school year). Examples of classroom assessment information that might be relevant include writing samples, math skill inventories, reading analysis, behavior and work habit checklists, and other informal assessments that link directly with IEP goals.
- 13.3.** Academic performance in IEPs is most useful when it is reported as grade level equivalent scores. It may be necessary to break subject areas into different types of skill areas. For example, a current level of performance for language might include scores for reading and writing. If a child is working to grade level in a particular core subject area, this should be documented. For example, to identify current level of performance for the Year 5 children in the previous example, the classroom teacher might use several different assessment strategies to establish a baseline and track growth. The teacher might look at the previous year’s report card and may administer informal assessments such as reading inventories and writing samples at the beginning and end of the school year. Here is one example of how this information might be reported:

14. Identification of strengths and areas of need

- 14.1.** When describing the children’s areas of strength, it is appropriate to include information such as the following:
- 14.2.** strengths in areas such as cognitive processing and communication (e.g., expressive language–speaking);
- 14.3.** children’s learning preferences (e.g., visual, auditory, kinesthetic or learns best on his or her own or working with others);
- 14.4.** previously acquired skills (e.g., organizational skills, time-management skills).
- 14.5.** Example
- 14.6.** It may be appropriate to also include information related to the children’s:

- 14.7.** personal characteristics that support learning (e.g., self-motivation, willingness to work with others);
- 14.8.** interests and hobbies;
- 14.9.** non-academic accomplishments.
- 14.10.** The learning team for the Year 5 children from the previous examples might generate a short list of strengths that could include things like social relationships, and interests both in and out of school. For example:
- 14.10.1.1. Enjoys working and playing with other children, has many friends
 - 14.10.1.2. Likes to build things, especially in science
 - 14.10.1.3. Comfortable with the computer, can find all kinds of interesting sites on the Internet
 - 14.10.1.4. Excels in sports—hockey and soccer
- 14.11.** The description of the children's areas of need should link assessment data to areas of need such as the following:
- 14.12.** broad cognitive and/or processing challenges (e.g., in areas such as verbal reasoning, visual memory);
- 14.13.** skills deficits that relate to the children's special education needs and/or interfere with his or her ability to learn (e.g., in areas such as social skills, attention, emotional control);
- 14.14.** academic skills (e.g., in areas such as reading comprehension, written expression).
- 14.15.** The children's study team may use information from both specialized assessment and current level of performance to identify specific needs or areas of growth for the Year 5 children from the previous examples. His list of needs might include the following:
- 14.16.** Areas of need
- 1.1.1. Strategies to improve reading comprehension across the subject areas, but especially for social studies
 - 1.1.2. Planning, writing and proofreading strategies to increase quality and quantity of written expression
 - 1.1.3. Reduce anxiety around test-taking situations
 - 1.1.4. Determining strengths and areas of need should involve input from parents and, when possible, from children.

15. Conclusion

- 15.1.** RPS supports inclusion for all pupils with special educational needs, in line with the Dubai Inclusive Education Policy Framework. The facilities and

resources include necessary modifications for the diverse range of special needs. Individualised planning and effective review procedures ensure that our pupils' needs are fully met. As a result, it is hoped that the pupils make excellent progress.

16. Suggested Strategies

If you see this....	Try this....
1. Difficulty following through a plan- has high aspirations but sets unrealistic goals.	Assist children in setting long-range goals: break the goal into realistic parts. <ul style="list-style-type: none"> • Use a questioning strategy with the children; ask, What do you need to be able to do this? • Keep asking that question until the children has reached an obtainable goal. • Have children set clear timelines of what he needs to do to accomplish each step (monitor children progress frequently).
2. Difficulty sequencing and completing steps to accomplish specific tasks (e.g. writing a book report, term paper.	Break up task into workable and obtainable steps. <ul style="list-style-type: none"> • Provide examples and specific steps to accomplish task
3. Shifting from one uncompleted activity to another without closure.	Define the requirements of a completed activity (e.g. your math is finished when all six problems are complete and corrected; do not begin on the next task until it is finished).
4. Difficulty following through on instructions from others.	Gain children's attention before giving directions. Use alerting cues. Accompany oral directions with written directions. <ul style="list-style-type: none"> • Give one direction at a time. Quietly repeat directions to the children after they have been given to the rest of the class. Check for understanding by having the children repeat the directions.
5. Difficulty prioritizing from most to least important.	Prioritize assignment and activities. <ul style="list-style-type: none"> • Provide a model to help children. Post the

	model and refer to it often.
6. Difficulty sustaining effort and accuracy over time.	Reduce assignment length and strive for quality (rather than quantity). <ul style="list-style-type: none"> • Increase the frequency of positive reinforcements (catch the children doing it right and let him know it)
7. Difficulty completing assignments.	List and/or post (and say) all steps necessary to complete each assignment. <ul style="list-style-type: none"> • Reduce the assignment into manageable sections with specific due dates. • Make frequent checks for work/assignment completion. • Arrange for the children to have a "study buddy" with phone number in each subject area.
8. Difficulty with any tasks that requires memory.	Combine seeing, saying, writing and doing; children may need to sub vocalize to remember. <ul style="list-style-type: none"> • Teach memory techniques as a study strategy (e.g. mnemonics, visualization, oral rehearsal, numerous repetitions).
9. Difficulty with test taking.	Allow extra time for testing; teach test-taking skills and strategies; and allow children to be tested orally. <ul style="list-style-type: none"> • Use clear, readable and uncluttered test forms. Use test format that the children are most comfortable with. Allow ample space for children response. Consider having lined answer spaces for essay or short answer tests.
10. Confusion from non-verbal cue (misreads body language, etc.)	Directly teach what non-verbal cues mean. Model and have children practice reading cues in a safe setting.
11. Confusion from written material (difficulty finding main idea from a paragraph; attributes greater importance to minor details)	Provide children with copy of reading material with main ideas underlined or highlighted. <ul style="list-style-type: none"> • Provide an outline of important points

	<p>from reading material.</p> <ul style="list-style-type: none"> • Teach outlining, main-idea / details concepts. • Provide tape of text /chapter
<p>12. Confusion from written material (difficulty finding main idea from a paragraph; attributes greater importance to minor details)</p>	<p>Provide children with a copy of presentation notes.</p> <ul style="list-style-type: none"> • Allow peers to share carbon-copy notes from presentation (have children compare own notes with a copy of peer's notes). • Provide framed outlines of presentations (introducing visual and auditory cues to important information). • Encourage use of a recorder. • Teach and emphasize key words (the following..., the most important point..., etc.).
<p>13. Difficulty sustaining attention to task or other activities (easily distracted by extraneous stimuli)</p>	<p>Reward attention. Breakup activities into small units. Reward for timely accomplishment.</p> <ul style="list-style-type: none"> • Use physical proximity and touch. Use ear-phones and/or study carrels, quiet place, or preferential seating.
<p>14. Frequent messiness or sloppiness.</p>	<p>Teach organizational skills. Be sure children has daily, weekly and/or monthly assignment sheets; list of materials needed daily; and consistent format for papers. Have a consistent way for children to turn in and receive back papers; reduce distractions.</p> <ul style="list-style-type: none"> • Give reward points for notebook checks and proper paper format. • Provide clear copies of worksheets and handouts and consistent format for worksheets. <p>Establish a daily routine; provide models for what you want the children to do.</p> <ul style="list-style-type: none"> • Arrange for a peer who will help him with organization. • Assist children to keep materials in a specific place (e.g. pencils and pens in pouch). • Be willing to repeat expectations

<p>15. Poor handwriting (often mixing or cursive with manuscript and upper-case with lower-case letters).</p>	<p>Allow for a scribe and grade for content, not handwriting. Allow for use of tablet or laptop.</p> <ul style="list-style-type: none"> • Consider alternative methods for children response (e.g., voice recorder, oral reports, etc.) • Don't penalize children for minimizing cursive or manuscript (accept any method of production) • Use a pencil with a rubber grip (provide grip when necessary)
<p>16. Difficulty with fluency in handwriting e.g. good letter/word production but very slow and laborious.</p>	<p>Allow for shorter assignments (quality, not quantity)</p> <ul style="list-style-type: none"> • Allow alternate method of production (computer, scribe, oral presentation) • Use a pencil with a rubber grip (provide grip when necessary)
<p>17. Poorly developed study skills</p>	<p>Teach study skills specific to the subject area and organization (e.g., assignment calendar), textbook reading, notetaking (find the main idea / detail, mapping, outlining), skimming, summarizing</p>
<p>18. Poor self-monitoring (careless errors in spelling, arithmetic, reading)</p>	<p>Teach specific methods of self-monitoring (e.g., stop, look, listen)</p> <ul style="list-style-type: none"> • Have children proof-read finished work when it is done
<p>19. Low fluency or production of written material (takes hours on a 10-minute assignment)</p>	<p>Allow for alternative method of completing assignment (oral presentation, voice recorded report, visual presentation, graphs, maps, pictures, etc., with reduced written requirements)</p> <ul style="list-style-type: none"> • Allow for alternative method of writing (e.g., computer, cursive or printing, scribe)
<p>20. Apparent Inattention (underachievement, daydreaming, not there)</p>	<p>Get children's attention before giving directions (tell children how to pay attention, look at me not while I talk, watch my eyes while I speak). Ask children to repeat directions.)</p> <ul style="list-style-type: none"> • Attempt to actively involve children in lessons (e.g. Cooperative learning).

<p>21. Difficulty participating in class without being interruptive; difficulty working quietly</p>	<p>Seat children near the teacher.</p> <ul style="list-style-type: none"> • Reward appropriate behavior (catch children being good). • Use study carrel if appropriate.
<p>22. Inappropriate seeking of attention (clowns around, exhibits loud excessive or exaggerated movement as attention-seeking behavior, interrupts, butts into other children's activities, needles others)</p>	<p>Show children (model) how to gain other's attention appropriately.</p> <ul style="list-style-type: none"> • Catch the children positive behavior when appropriate and reinforce.
<p>23. Frequent excessive talking</p>	<p>Teach children hand signals and use them to tell children when to and when not to talk.</p> <ul style="list-style-type: none"> • Make sure children are called when it is appropriate and reinforce listening
<p>24. Difficulty making transitions (from activity to activity or class to class); takes an excessive amount of time to find pencil, gives up, refuses to leave previous task; appears agitated during change.</p>	<p>Program child for transitions. Give advance warnings of when a transition is going to take place (now we are completing the worksheet, next we will ...) and the expectation for the transition (and you will need...).</p> <ul style="list-style-type: none"> • Specifically say and display lists of materials needed until a routine is possible. List steps/ visual timetable • Necessary to complete each assignment. • Have specific locations for all materials (pencil pouches, tabs in notebooks, etc.). • Arrange for an organized helper (peer).
<p>25. Difficulty remaining seated or in a particular position when required</p>	<p>Give children frequent opportunities to get up and move around. Allow space for movement.</p>
<p>26. Frequent fidgeting with hands, feet or objects, squirming in seat.</p>	<p>Break tasks down into small increments and give frequent positive reinforcement for accomplishments (this type of behavior is often due to frustration).</p> <ul style="list-style-type: none"> • Allow alternative movement when possible.
<p>27. Inappropriate responses in class often blurted out; answers given to questions before they have been completed.</p>	<p>Break tasks down into small increments and give frequent positive reinforcement for accomplishments (this type of behavior is often due to frustration).</p>

	<ul style="list-style-type: none"> • Allow alternative movement when possible.
28. Agitation under pressure and competition (athletic or academic)	<p>Seat children in close proximity to teacher so that visual and physical monitoring of children behavior can be done by the teacher.</p> <ul style="list-style-type: none"> • State behavior that you do want (tell the children how you expect him to behave).
29. Inappropriate behaviors in a team or large group sport or athletic activity (difficulty waiting turn in games or group situations)	<p>Stress effort and enjoyment for self rather than competition with others.</p> <ul style="list-style-type: none"> • Minimize timed activities; structure class for team effort and cooperation.
30. Frequent involvement in physically dangerous activities without considering possible consequences	<p>Stress on Stop-Look-Listen Anticipate and plan for situations in advance Pair with a responsible peer (rotate responsible children so they are not worn out.)</p>
31. Poor adult interactions. Defies authority.	<p>Provide positive attention</p> <ul style="list-style-type: none"> • Talk with children individually about the inappropriate behavior (what you are doing is..., a better way of getting what you need or want is...).
32. Frequent self-putdowns, poor personal care and posture, negative comments about self and others, low self esteem	<p>Structure for success.</p> <ul style="list-style-type: none"> • Train children for self-monitoring, • Reinforce improvements • Teach self-questioning strategies (What am I doing? How is that going to affect others?) • Allow opportunities for the children to show their strengths. • Give positive recognition
33. Difficulty using unstructured time recess, hallways, lunchroom, locker room, library, assembly	<p>Provide children with a definite purpose during unstructured activities (The purpose of going to the library is to check out... the purpose... of is...).</p> <ul style="list-style-type: none"> • Encourage group games and participation (organized school clubs and activities).

<p>34. Losing things necessary for task or activities at school or at home (e.g. pencils, books, assignments before, during and after completion of a task)</p>	<p>Help children get organized. Frequently monitor notebook and dividers, pencil pouch, locker, book bag, desks. A place or everything and everything in its place.</p> <ul style="list-style-type: none"> • Provide positive reinforcement for good organization. Provide children with a list of needed given materials and locations
<p>35. Poor use or time (sitting, starting off into space, doodling, not working on task at hand)</p>	<p>Teach reminder cues (a gentle touch on the shoulder, hand signal, etc.).</p> <ul style="list-style-type: none"> • Tell the children your expectations of what paying attention looks like. (You look like you are paying attention when...) • Give the children a limit for small unit of work with positive reinforcement for accurate completion. • Use a contract, timer, etc. for self-monitoring.

17. References:

17.1. KHDA Inspections handbook:

https://www.khda.gov.ae/Areas/Administration/Content/FileUploads/Publication/Documents/English/20170716151230_20170716144744_School_Inspection_Supplement_En.pdf

17.2. Ministry of Education Guidelines:

http://www.ibe.unesco.org/fileadmin/user_upload/Policy_Dialogue/48th_ICE/Presentations/IBE_ICE_Workshop_3B_Presentation_EN_Hanif_Hassan_Nov08.pdf

17.3. Ministry of Education Guidelines

<https://www.moe.gov.ae/English/SiteDocuments/Rules/SNrulesEn.pdf>

17.4. Laws and Legislation

17.4.1. Dubai Inclusive education Policy Framework (2017)

https://www.khda.gov.ae/.../texteditor/documents/Education_Po...

17.4.2. UN Convention on the Rights of Persons with Disabilities and Optional Protocol <http://www.un.org/disabiliti.../.../convention/convoptprot-e.pdf>

17.4.3. Federal Law No. (29) of 2006 Concerning the Rights of People of Determination <https://www.abudhabi.ae/.../federal-law-no-29-of-2006-concern...>

17.4.4. Law No. (2) of 2014 Concerning Protection of the Rights of Persons with Disabilities in the Emirate of Dubai <https://www.cda.gov.ae/.../Concerning%20Protection%20of%20the...>

17.4.5. Executive Council Resolution No. (2) of 2017 Regulating Private Schools in the Emirate of Dubai

17.4.6. [https://www.khda.gov.ae/.../ExecutiveCouncilResolutionNo.\(2\)o...](https://www.khda.gov.ae/.../ExecutiveCouncilResolutionNo.(2)o...)

17.4.7. General Rules for the Provision of Special Education Programs and Services (Public & Private Schools)

<https://www.moe.gov.ae/English/SiteDocuments/.../SNrulesEn.pdf>

