CGCV

NCCD Evidentiary Requirements Guidance

This document is intended to clarify the evidence requirements of the Nationally Consistent Collection of Data on School Students with Disability (NCCD) for Victorian Catholic schools. Schools are required to collect data which aligns with the Victorian Registration and Qualifications Authority (VRQA) minimum standards, duty of care obligations and best practice as described in the <u>Australian Professional Standards for Teachers</u>. Examples include medical management plans, student safety plans, risk assessments, administration of medication plans and behaviour support plans. These are required as evidence of the school carrying out its duty of care responsibilities, but will also constitute evidence of adjustments.

For NCCD purposes, each school's evidence will be contextual. The evidence must reflect individual student needs and strengths, and the school's learning and support processes and practices. NCCD evidence is required in four general areas:

- 1. assessed individual needs of the student
- 2. adjustments being provided to the student to address their assessed individual needs associated with disability (including support provided within quality differentiated teaching practice)
- 3. ongoing monitoring and review of the adjustments
- 4. consultation and collaboration with the student, and/or parents, guardians, carers or associates.

The Catholic Education Commission of Victoria Ltd (CECV) strongly encourages school staff responsible for gathering evidence not to create unnecessary documentation. Additional documentation to verify existing evidence is contrary to the expressed aims of the NCCD quality assurance process. A series of evaluated and signed personalised learning plans that documents the nature of the student's disability (identified need), the supports and adjustments provided to achieve the intended outcomes (goals), and the tracking and monitoring of progress towards those goals may meet all four areas of evidence.

Evidence listed below in each of the four areas is provided for guidance. It is neither an exhaustive, nor a compulsory list. Some evidence may cover more than one element of the process, while others may only address one aspect. Schools are encouraged to consider and discuss the types of evidence available to support their judgements about the inclusion of students in the NCCD. In keeping with best practice, schools should retain relevant evidence of their provisions for students at the school and of student progress over time.



General area 1: Evidence of assessed individual needs of the student [Schools to collect evidence relevant to student's needs and school's context]

Examples of evidence *that may be used* for the NCCD:

- results of diagnostic or summative school and/or standardised assessments over time, documenting an ongoing learning or social-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, socioeconomic or non-disability related causes
- parental report of disability in conjunction with evidence of an assessed individual need
- specialist diagnoses or reports (e.g. from a medical practitioner such as a paediatrician, or other specialist such as a guidance officer/counsellor, speech pathologist or audiologist)
- profiles or assessment reports that identify the functional needs of a student with disability.

General area 2: Evidence of adjustments being provided to the student to address their assessed individual needs associated with disability [Schools to collect evidence relevant to student's needs and school's context]

Examples of evidence that may be used for the NCCD:

individualised/personalised learning planning (e.g. individual education plan, personalised learning plan, curriculum plan, communication plan, behaviour plan, transition plan) or goals and strategies in program planning

- · adjustments to teaching noted on teacher unit, weekly or term planning
- adjusted timetable or staff timetables
- record of educational and/or social-emotional interventions provided
- 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 or physiotherapists)

Examples of evidence in excess of what is required for the NCCD:

- Recording adjustments in the program or elsewhere is sufficient.
 Teacher notes or annotations at the end of lessons to describe the adjustments made, or recording student goals as evidence, are in excess of what is required for the NCCD.
- Recording the adjustments to be provided to a student is sufficient.
 Narrative or supplementary texts explaining school decisions with respect to the student's adjustments are in excess of what is required for the NCCD.
- A timetable that specifies what activity is to occur in a particular session is sufficient.



Examples of evidence *that may be used* for the NCCD:

- records of advice sought or conversations with the student, or parent, guardian or carer
- adjustments or supports required in assessment settings
- adjustments to learning materials (e.g. alternative format, adjusted worksheets, reworded tasks)
- manual handling, personal care or 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 emergency situations (e.g. fire drills or medical emergencies).

Examples of evidence in excess of what is required for the NCCD:

Annotations by learning support officers/teacher aides to the timetable post-lesson are in excess of what is required for the NCCD.

- Program Support Group meeting minutes/formal records that document key decisions are sufficient.
 - Records of every conversation with the student or parent, guardian or carer are in excess of what is required for the NCCD.
- Class timetables, programs or student assessments that indicate the support that is to take place are sufficient.
 - Photographs (with the appropriate approvals in place) of teachers or aides supporting students are in excess of what is required for the NCCD. (There are also cultural sensitivities to consider if photographs are of Aboriginal or Torres Strait Islander peoples.)
- A statement on seating in the list of adjustments recorded is sufficient.
 - Photographs or maps of the location of a student's seat in the classroom are in excess of what is required for the NCCD.

General area 3: Evidence of ongoing monitoring and review of the adjustments [Schools to collect evidence relevant to student's needs and school's context]

Examples of evidence that may be used for the NCCD:

- records of meetings to review adjustments with parents, guardians or carers, and specialist staff, where appropriate
- an individual education plan with learning goals and interventions that have been regularly monitored and reviewed
- student progress data, which may include both formative and summative assessments

Examples of evidence in excess of what is required for the NCCD:

- Recording the adjustments to be provided to a student is sufficient.
 Narrative or supplementary texts explaining school decisions with respect to the student's adjustments are in excess of what is required for the NCCD.
- A timetable that specifies what activity is to occur in a particular session is sufficient.



Examples of evidence *that may be used* for the NCCD:

- progress or file notes by a teacher, specialist staff or paraprofessionals
- behaviour documentation including observational records and 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 a medical specialist, that is reviewed regularly.

Examples of evidence in excess of what is required for the NCCD:

Annotations by learning support officers/teacher aides to the timetable post-lesson are in excess of what is required for the NCCD.

General area 4: Evidence of consultation and collaboration with the student, and/or parents, guardians, carers or associates

[Schools to collect evidence relevant to student's needs and school's context]

Examples of evidence *that may be used* for the NCCD:

- documented meetings, phone calls, conversations between the school and parent, guardian or carer (minutes or notes)
- documented meetings, phone calls, conversations between the school and allied health or other invested professionals
- documented student plans signed by the parent, guardian, carer and/or student
- individualised/personalised learning planning (e.g. individual education plan, personalised learning plan, curriculum plan, communication plan, behaviour plan, transition plan) or goals and strategies in program planning
- record of formal parent–teacher interviews
- parent-teacher communication books
- emails between the student and/or parents, guardians, carers or associates.

Examples of evidence in excess of what is required for the NCCD:

Notes from meetings with parents or carers are sufficient.

Voice recordings (with the appropriate approvals in place) of meetings are in excess of what is required for the NCCD, if written notes are already available.