Special Interest Article

Ed. Note: In December, 1980 the province of Ontario passed Bill 82, a bill on special education. Because of its possible implications, it was suggested that the editorial staff ask some CSHA members in Ontario to discuss the impact on our profession in the province.

What follows are two discussions of the issues involved. Mary Ann Peloso discusses the Bill and some of its possible implications for institutions, training programs, parents and students.

Sara Wegner and Pat Marek-Thornton discuss the effect the Bill has had on the Carleton Board of Education.

<u>H.C.C.</u> hopes to provide an updated follow-up to the discussion later. Comments sent to the editor will be considered for publication.

BILL 82 AND THE SPEECH LANGUAGE PATHOLOGIST

From: Mary Ann Peloso, B.Sc., D.S.P.A., Reg. O.S.H.A. Speech Language Pathologist 1609 Dollard Avenue Sudbury, Ontario, P3A 4G8

Bill 82 (A Bill for Special Education) is an Act of the Ontario Legislature (Passed December, 1980) to amend the Education Act of 1974, designed to ensure that every exceptional pupil in Ontario receives an education suited to his or her needs and abilities. Essentially, Bill 82 removed the optional status of special education, making it mandatory for all public and separate school boards, effective September 1, 1985, to provide special education programs and services to meet the needs of "Exceptional Pupils", including providing for the education of their trainable, retarded pupils and ensuring the involvement and participation of the parents or guardians of the exceptional pupil in the assessment, identification and placement of such pupils with establishment of appeal mechanisms if the parents or guardians disagree. If it is considered that a "hard to serve pupil" cannot benefit from instruction, the school board will assist the parents to locate appropriate care or treatment services.

"Exceptional Pupil" means a pupil whose behavioral, communicational (including autism, hearing impairment, language impairment, speech impairment, and learning disability), intellectual (including the intellectually gifted), physical or multiple exceptionality are such that he or she is considered by a board committee to need placement in a special education program.

"Special education program" means an educational program that is based on, and modified by, the results of continuous assessment and evaluation and that includes a plan containing specific objectives and an outline of educational services that meets the needs of the exceptional pupil.

¹A copy of the Act and A Guide to Bill 82 and other Regulations (including a definition of each exceptionality grouping) further defining Bill 82 may be obtained from the Ontario Government Book Store, 880 Bay Street, Toronto, Ontario, M7A 1L2.

What are the implications for Speech/Language Pathologists? Bill 82. particularly with the inclusion of the communicational exceptionality grouping which officially recognizes communication disorders as affecting learning and requiring specialized programs may be a most significant step forward for the professions involved in serving the communicatively handicapped. This step should serve to enhance the roles of speech/language pathologists within education. Although O.S.H.A. as a professional group was not involved prior to the enactment of Bill 82, many Speech Pathologists have independently played significant roles in assisting their employing or affiliated boards, (where clinical services provide consultation to boards of education), in developing plans (which all boards were required to submit by May, 1982) for implementation of Bill 82. This is a tribute to the positive impact Speech Pathologists have had in Education in Ontario over the past 10 to 15 years, particularly since Speech Pathologists have no official status within Education and qualifications for designing and implementing programs for children with communication exceptionalities are not defined in educational or Speech Pathology terms. Unfortunately, we have been caught short in not being able to specify competency levels, standards and qualifications and resolve issues regarding Speech Teacher and Speech Pathologist roles within Education. Also, University training programs in Ontario mainly train Speech Pathologists to work in clinical settings without enough emphasis or skill development to work in educational settings. Adequate education programs are also not available for teachers to develop the competencies needed to work with children with communication disorders. This is even more significant when we consider that many boards do not employ Speech Pathologists. Speech Pathologists should be trained specifically to work in education and competency levels and qualifications should be specified in educational terms for all programming for the communicatively impaired. Time and budget constraints along with emphasis on mainstreaming have resulted in some boards' decision to train and place a resource teacher in each school with the unrealistic expectation of having that teacher be responsible for all the exceptionalities in that school. Unfortunately, without the funding, specialized staff and training, the "special programs" may be tokenistic at best.

Further, with each board attempting to provide for all exceptionalities (although purchase of service and cooperation of boards is recommended), there is the danger that costly duplication of services, which may be less specialized than existing services, will occur. Also, the Ministries of Health and of Community and Social Services do not have similar legislation defining their areas of responsibility for the children with behavioral, communicational, intellectual and physical exceptionalities that they provide services for. This makes sharing or purchase of service arrangements difficult.

With the schools taking on more responsibility for communication disorders, it will be necessary for the three ministries to jointly define areas of responsibility to ensure adequate funding and facilities for all of the communicatively handicapped. This may mean changes in emphasis in hospital and mental health and rehabilitation centres to prevention programs, to treatment of pre-school and adult populations, and a shift away from the treatment of more academically significant communication disorders such as speech difficulties and language disabilities in children, towards specialization in more medically-related clinical treatment of disorders, such as voice and fluency problems.

Other concerns involve the Exceptionality Categories and definitions themselves. A major danger is inherent in the necessity to assign a categorical exceptionality label to each child before admitting him to

any program and in planning programs around etiological labels. Aside from the self-fulfilling prophecy hazard, (the child living up to the expectations of the label assigned), there are limitations to programming to the major problem area identified to the exclusion of other potential disabilities and careful analysis of strengths and weaknesses. Further, the exceptionality label may not indicate why there is a particular exceptionality such as a language or speech disorder and hence not specify an intervention program (what and how the child should be taught). Consequently, there is the temptation to apply fairly uniform programs to all children with the same label. The orientation to etiological labels, if observation of skills and behaviors is emphasized. should provide information about how intervention should be presented. This diagnostic information would be valuable in planning programs which need to be individualized beyond the applied exceptionality label. Unfortunately, the label itself abstracts the information and too often decreases the understanding of the child. Careful description of the child's behaviors and skills, strengths and weaknesses, is essential in determining programming content and strategies (what and how the child will learn).

A further concern involves the inclusion of Autism as a communication exceptionality. Although I appreciate the recognition of the significant language impairment involved in autism, I feel the behavioral, intellectual and perceptual components warrant the placement of Autism in the Multiple Exceptionality Category.

Another potential danger is the exclusion of children with severe language disorders from Learning Disability programs, if individual board's criteria for Learning Disabled status requires average IQ scores in both verbal and non-verbal areas, (children with language disabilities rarely score in the average range on verbal tests), although the definition of learning disability clearly recognizes language disabilities.

Much of the impact of Bill 82 remains to be realized as individual boards plan their strategies for implementation and the Ministry of Education further directs the development of Special Education Services throughout Ontario. Speech Pathologists individually and within Professional Groups should be preparing themselves for, and actively participating in, shaping their expanded role in Education, heralded by Bill 82.

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BILL 82: A BILL ON SPECIAL EDUCATION

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The Ontario Legislature has passed into law an Act entitled Bill 82. This Bill ensures:

- universal access of all Ontario school age pupils to publicly supported education regardless of the pupil's special needs;
- the provision of special education programs and services that meet the needs of exceptional pupils;

- involvement and participation of parents in the assessment, identification and placement of such pupils, including the right to withhold permission for a particular placement and the right to require a review of the pupil's placement at any time.

An "exceptional pupil" is one whose behavioural, communicational, intellectual, physical or multiple exceptionalities are such that he or she is considered by a Board Committee to need placement in a special education program.

This article will address the effect Bill 82 has had on The Carleton Board of Education.

General Description of The Carleton Board of Education

The C.B.E. is located in Carleton County, which surrounds the City of Ottawa. Its 38,000 students attend 17 secondary and 57 elementary schools. The schools are served by multi-disciplinary Special Services teams, composed of a Psycho-Educational Consultant, Educational Consultant, Social Services Consultant and Speech-Language Pathologist. In addition, registered Psychologists, Teachers of the Hearing-Impaired, Teachers attached to the Kindergarten Early Identification Program, and Speech-Language Pathologists attached to Special Education Language Classes provide services across teams.

The C.B.E. provides a range of special education programs for exceptional pupils. These include school-based Special Education Resource Units (S.E.R.U.) which offer up to half-time withdrawal assistance and self-contained system classes: Social Adjustment, Specific Learning Disability, Opportunity (E.M.R.), and Language. One school for the trainable mentally retarded serves this population from age 5 to 21.

Effect of Bill 82

Bill 82 created a need to re-examine Carleton's special education system. Staff were surveyed to estimate the level and types of programs and services required. Briefs were called for from interested members of the public, special interest groups, Board-employed specialists and others. Two briefs were presented by the School Affairs Committee of the Ontario Speech and Hearing Association. A complete evaluation and revision of the procedures for deeming a child "exceptional", placing the child in special programs, and appeal by parents was completed. This included the development and standardization of forms for these procedures.

The following changes in the Special Education component of the Board have been effected:

Prior to Bill 82	Total as of September 1982
${\tt Special \ Services \ Staff \ Composition:}$	(no further additions planned)
6 multi-disciplinary teams	<pre>8 multi-disciplinary teams (one team to be bilingual)</pre>
1 registered Psychologist	<pre>2 registered Psychologists 1 Co-ordinator of Special Services</pre>

Prior to Bill 82 (cont.)

Total as of September 1982 (cont.)

No additions in these areas.

- 1 Superintendent of Special Services
- 4 Teachers of Hearing-Impaired
- 2 Teachers (Early Identification Program)
- 3 Speech-Language Pathologists (Language Classes)

8 Secretarial staff 11 Secretarial staff

Special Education Program:

37 elementary SERU 67 elementary SERU 9 secondary SERU 34 secondary SERU

1 French Special Education Class 2 secondary Social Adjustment

1 secondary Special Education Class 3 secondary Learning Disability

1 Social Adjustment and 1 Learning Disability at the Vocational Secondary School

8 elementary Social Adjustment

37 elementary Learning Disability

20 Opportunity (EMR)

4 Language

20 Teacher Aides

The elementary panel was felt to be well served, so no additions in service were made.

28 Teacher Aides

Remodelling of the schools is now being undertaken in order that physically handicapped children can attend their neighbourhood schools.

Identification and Placement Procedures

The procedures for identifying a child as "exceptional" and placing him in a special education program have remained basically the same, although they are now more formalized. Some noteworthy changes include:

- 1. parents are now kept fully informed of each step in the process,
- greater emphasis has been placed on the role of the school principal in collecting and disseminating information regarding his students and coordinating all aspects of their placement in school-based special education programs,
- placement of "exceptional" pupils in the school-based special education program (SERU) now requires a formal committee decision,
- increased record-keeping and data collection will occur, especially throughout the 1982-83 school year, to determine frequency and effectiveness of student contacts and procedures.

The implementation of these formalized procedures for placement will undoubtedly raise many questions over this first year. Some concerns of the Speech-Language Pathologists are:

- "Special Education Program" Definition of this term is unclear. How does it differ from "a little extra help"? Our Board interpretation has been that most of our children enrolled in speech or language therapy are not classified as "exceptional" and therapy has not been labelled as a "Special Education Program". Also in this category are children who require a remedial program due to academic weakness.
- 2. Caseload selection. When a remedial or speech-language therapy program is provided to a child who has not been formally deemed "exceptional", could that child be pre-empted by a child who has been labelled?

Ministry of Education review in the Spring of 1983 will no doubt dictate certain modifications and refinements to this system. Hopefully, that feedback will subsequently enable us to discuss the implications of this new Legislation.

October, 1982.

HEAR HERE

From the Editor

This is the fifth issue of <u>Human Communication Canada</u>. Our new publication is more than one-half way through its first year.

I have commented in this space before about the large number of members who are directly involved in putting out the publication: the staff of fifteen, the publications committee, all the National Council and of course the contributors, most of whom are members of CSHA.

It was with regret that the resignation of Sandra McCaig as assistant editor for Employment Opportunities and Advertisements was recently received. Sandy joined the staff of <u>Hear Here</u> in December, 1981 just before the publication moved to Winnipeg. She was responsible for setting up and organizing the procedures for processing, recording, and billing for all ads. She was also involved in implementing the policy guidelines set by council.

Did you know for example that each new commercial ad must be read to insure that it meets CSHA guidelines, and is returned if it does not? Each employment ad must also be read - not only to insure CSHA policy on employment ads is followed but that it is consistent with human rights legislation.

Sandy accomplished all of the above with speed, decisiveness and efficiency. Her contribution to setting up procedures is much appreciated and will continue to provide a firm base for the future. On behalf of the membership, the staff extends our thanks to Sandy for her contribution.

Viginia Martin