

**NUMBER: 6.01**

**TITLE: School Based Team Process**

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The School Based Team functions as a collaborative problem solving team to address student's needs. The School Based Team does this in two ways:

1. To address student's needs at a school level and;
2. To work with parents and other support personnel to respond to individual need(s).

Through these tenets, School Based Team shares information and problem solves school related and/or individual learning concerns to increase learner success.

The members of the School Based Team include the school administrator or designate (chair), a Learning Assistant Teacher and may include other school professionals as deemed necessary.

Parents shall be invited members of the School Based Team that has been established for their child. Specialist teachers, Student Support Services staff and other community agencies may be invited to attend a meeting when appropriate.

The School Based Team should have all members attend regularly scheduled meetings. Minutes of School Based Team meetings will be written and kept in a defined area and a copy kept in the student's red file.

The School Based Team should also schedule review of student progress in regards to identified needs at School Based Team meetings as a way to evaluate student success and to prioritize services and resources.

Teachers and/or parents who have a concern for a student's learning should follow the flowchart for referral to School Based Team. Referring teachers and/or SBT may also use the provided checklists to determine what Student Support Services staff members to consult as part of the pre-consultation process.

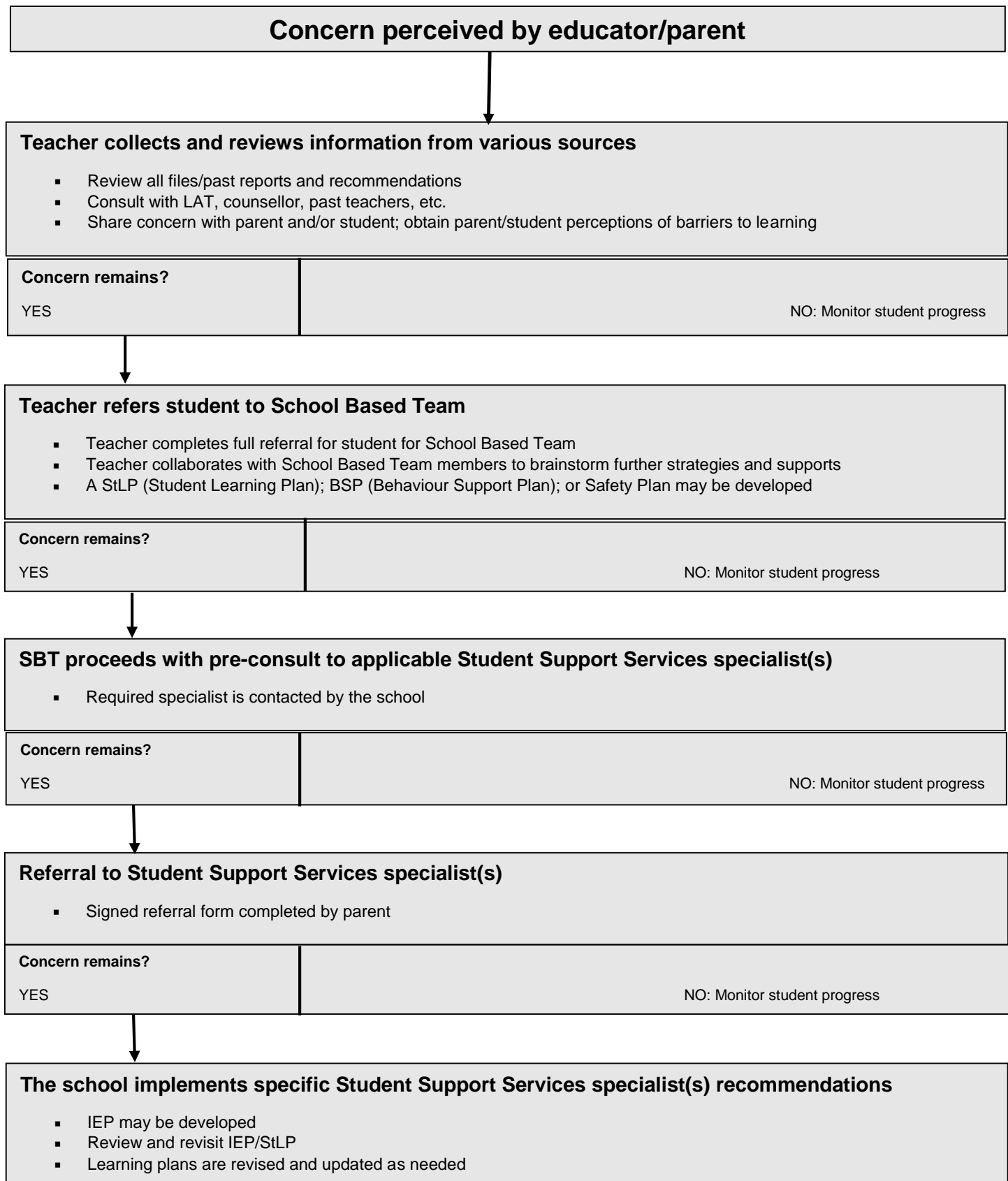
The School Based Team Meeting Notes/Minutes template may be used to record School Based Team (SBT) meeting minutes. School Based Team referrals for individual students should be filed in the School Based Team binder.

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Related Legislation: Education Act 16(3)  
Date Created: April 30, 2013  
Updated: December 3, 2015

Attached forms: School Based Team Referral  
School Based Team Intervention Strategies Summary  
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## Flowchart for Referral to School Based Team



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## REFERRING TEACHER/SCHOOL BASED TEAM CHECKLIST SUMMARY OF STUDENT DIFFICULTIES AS COMPARED TO SAME-AGE PEERS OR CLASS EXPECTATIONS

The following checklists can be used to determine areas of concern for a student. (✓) primary areas of difficulty that interfere with the student's current functioning. The results of these checklists will determine what Student Support Services Staff member(s) would be best to consult with about student need as part of the pre-consultation process.

### Consult with Teacher of the Blind and Visually Impaired

#### Visual Skills

- ☐ holding head close to paper
- ☐ difficulty reading work on the blackboard
- ☐ difficulty copying work from blackboard
- ☐ loses place in text; skips words and lines
- ☐ other \_\_\_\_\_

### Consult with Teacher of the Deaf and Hard of Hearing

#### Hearing Skills

- ☐ listening behaviours vary (eg. in small group versus gym)
- ☐ does not understand directions/instructions
- ☐ has trouble organizing what is heard
- ☐ needs instructions repeated
- ☐ difficulty retaining memorized work (labels, etc)
- ☐ speaks too loudly

### Consult with Occupational Therapist

#### Pencil and Paper Skills

- ☐ poor grasp of pencil
- ☐ difficulty controlling pencil
- ☐ difficulty drawing/coloring between the lines
- ☐ poor letter formation
- ☐ difficulty keeping letters on the line
- ☐ inconsistent sizing
- ☐ inconsistent spacing
- ☐ frequent reversals (other than b/d)
- ☐ difficulty copying from a book or the board

#### Fine Motor Skills

- ☐ difficulty holding scissors
- ☐ difficulty cutting on line
- ☐ switches hands while printing or cutting
- ☐ experiences hand/finger fatigue
- ☐ difficulty manipulating small objects
- ☐ difficulty with clothing fasteners (zippers, buttons)
- ☐ difficulty opening containers, opening doors, etc.

#### Sensory Processing Skills

- ☐ moves constantly, can't sit still
- ☐ fidgets, touches people/objects
- ☐ clumsy/awkward/poor sense of personal space
- ☐ likes to crash, fall, jump
- ☐ likes to rock or spin
- ☐ likes small spaces (eg. hides under desks, etc)
- ☐ likes/makes noise (talks, hums, makes sound effects)
- ☐ chews things frequently (pencils, clothing, food, etc)
- ☐ easily distracted by noise, lights, movement
- ☐ overwhelmed in busy environments (eg. gym, assemblies)
- ☐ avoids movement activities (playground, gym)

#### Self-Care and Activities of Daily Living

- ☐ difficulty with swallowing, chewing or drinking
- ☐ difficulty getting dressed/undressed
- ☐ difficulty with toileting (pants up/down, toilet paper, etc)
- ☐ difficulty participating in leisure activities

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## Consult with Physical Therapist

### Gross Motor

- ☐ difficulty keeping upright seating position
- ☐ strength poor compared to peers
- ☐ requires repeated practice to learn new motor skill (more than peers)
- ☐ unusual walking and/or running pattern

## Consult with Speech Language Pathologist

### Listening and Understanding

- ☐ does not understand verbal instructions
- ☐ needs directions repeated
- ☐ comments not related to topic
- ☐ consistently takes comments literally (eg. jokes, idioms, riddles)
- ☐ knows word labels but doesn't understand synonyms, antonyms
- ☐ difficulty understanding time, quantity sequence and spatial concepts
- ☐ can't identify objects by category, function, similarity/difference

### Expressive Language

- ☐ uses less precise vocabulary/overuses vague words (eg. thing)
- ☐ has many grammatical errors atypical for age
- ☐ does not use complex sentences expected for age
- ☐ is not able to tell a story in sequence
- ☐ has difficulty expressing and organizing thoughts and ideas effectively

### Speech/Articulation

- ☐ difficult to understand student's speech
- ☐ delayed sound development for age
- ☐ occurrence of stuttering / non-fluent speech
- ☐ voice quality is hoarse/raspy, and/or nasal
- ☐ other \_\_\_\_\_

### Social Communication/Pragmatics

- ☐ struggles to initiate play or conversation with peers
- ☐ difficulty following conversational rules – turn taking, topic maintenance, eye contact, tone of voice
- ☐ difficulty interpreting non-verbal cues – body language, facial expressions

### Phonological Awareness/Reading Skills

- ☐ difficulty blending sounds and syllables
- ☐ difficulty segmenting words
- ☐ difficulty identifying sounds
- ☐ difficulty associating sounds with letters
- ☐ confuses similar sounds, words
- ☐ does not comprehend when reading

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## Consult with Educational Psychologist

### Academic Functioning

#### **Reading Skills**

- ☐ Sight-word recognition
- ☐ Word decoding
- ☐ Reading fluency
- ☐ Reading rate
- ☐ Comprehension of text

#### **Written Language Skills**

- ☐ Spelling
- ☐ Writing fluency
- ☐ Limited amount of written production
- ☐ Slow in producing written work

#### **Mathematics Skills**

- ☐ Understanding math concepts/numeration
- ☐ Performing operations/computations
- ☐ Recalling basic math facts
- ☐ Applying math concepts

### Cognitive Functioning

- ☐ Difficulty with abstract thinking and/or reasoning
- ☐ Difficulty expressing concerns, needs, or thoughts
- ☐ Difficulty understanding what is being said
- ☐ Needs concrete demonstrations/modeling
- ☐ Poor sense of time
- ☐ Difficulty with sequencing or ordering
- ☐ Difficulty memorizing new information
- ☐ Difficulty retaining learned concepts
- ☐ Slow to complete tasks/requires additional time
- ☐ Thinks in concrete, literal, black-and-white terms
- ☐ Has recurrent, bizarre ideas or thoughts
- ☐ Seems disoriented or confused
- ☐ Difficulty staying focused; easily distracted
- ☐ Fails to attend to details, check work
- ☐ Makes careless errors
- ☐ Inconsistent performance one day to the next
- ☐ Appears not to listen when spoken to
- ☐ Difficulty following directions or procedure
- ☐ Difficulty switching tasks/topics
- ☐ Difficulty staying organized and planning ahead
- ☐ Difficulty initiating and/or completing tasks
- ☐ Gets bored of task before it is completed
- ☐ Frequently loses/misplaces work, books, toys, etc.

### Social Functioning

- ☐ Difficulty getting along with peers or staff
- ☐ Avoids others or is isolated from peers
- ☐ Difficulty problem-solving in social situations
- ☐ Difficulty initiating contact or connecting with others
- ☐ Difficulty applying social conventions (e.g., eye contact)
- ☐ Difficulty interpreting social cues/nuances
- ☐ Difficulty deviating from rules/routine
- ☐ Difficulty handling unpredictability or novelty
- ☐ Difficulty seeking attention in appropriate ways
- ☐ Unaware of how his/her behavior affects others
- ☐ Difficulty empathizing, seeing another point of view
- ☐ Bullied or targeted by peers
- ☐ Prefers interacting with younger peers or adults
- ☐ Unaware of how others perceive their behaviour

### Emotional Functioning

- ☐ Difficulty managing frustration
- ☐ Appears anxious or withdrawn
- ☐ Persistent worry
- ☐ Reluctant to go to school
- ☐ Avoidance of being alone or "clingy" behaviour
- ☐ Frequent complaints of headaches/stomach aches, etc
- ☐ Excessive need for reassurance
- ☐ Marked feelings of tension or inability to relax
- ☐ Marked self-consciousness
- ☐ Extreme or irrational fear(s)
- ☐ Panic attacks
- ☐ Sadness
- ☐ Irritable/unstable mood
- ☐ Low energy or fatigue
- ☐ Low self-esteem
- ☐ Feelings of hopelessness
- ☐ Talks about harming self
- ☐ Intense anger
- ☐ Unprovoked emotional reactivity/outbursts

### Behavioural Functioning

See Process for Addressing Behavioural/Emotional Needs

#### ☐ Adjudication

*\*Refer to Handbook of Procedures for criteria:*  
<http://www.bced.gov.bc.ca/exams/handbook/>

- ☐ Other psychological concerns:

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## Process for Addressing Behavioural/Emotional Concerns in Schools:

When a student's behavioural and/or emotional functioning at school is a concern, the school should consider the *nature of concerns* and *level of severity/impairment* (i.e., mild, moderate, severe) in determining how to best respond to the student's needs. The appended chart may be referenced in determining the most appropriate steps in requesting the involvement of either the Student Support Services Consultant or Educational Psychologist.

When to Consult with Student Support Services Consultant	When to Consult with Educational Psychologist
<p>Consultation can be requested from the Student Support Services Consultant when a student's behavioural difficulties are considered <b>moderate</b>. (See examples in appended charts)</p> <p>The Student Support Services Consultant can also be involved when schools require support with the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Developing a <b>Behaviour Support Plan</b></li> <li><input type="checkbox"/> Developing a <b>Safety Plan</b> (as outlined in section 9.02 of the Student Support Services Procedures manual)</li> <li><input type="checkbox"/> Completing a <b>Workplace Risk Assessment (WRA)</b>.</li> <li><input type="checkbox"/> Training in <b>Nonviolent Crisis Intervention</b></li> </ul>	<p>Consultation should be requested from the Psychologist when a student's behavioural difficulties are considered <b>severe</b>. That is, if the student's ability to function is impaired across <b>multiple settings</b> (i.e., home, school, community), and/or is complicated by any of the following factors:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Mental health concerns</b> (e.g., mood issues, anxiety, panic)</li> </ul> <p>Behavioural difficulties may be signs of underlying mental health and/or health issues if they are:</p> <ul style="list-style-type: none"> <li>○ <i>Intense,</i></li> <li>○ <i>Persist over long periods of time,</i></li> <li>○ <i>Are inappropriate for the child's age/development, and</i></li> <li>○ <i>Significantly interfere with the child's functioning across multiple settings</i></li> </ul> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Threatening or harmful behaviour towards self</b> (e.g., suicidal ideation, self-injurious behaviour)</li> </ul>

The level of severity/impairment (mild, moderate, or severe) are important considerations in determining how to respond to student behaviour. The following checklists are provided to assist schools in determining when to request for support from the Student Support Services Consultant or Educational Psychologist.

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## Behaviour/Emotional Concerns

Social Differences					Learning Differences					Emotional Differences					Safety Issues				
1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
Few Friends <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Difficulties with transition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Anxiety, worry, fears <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Verbal aggression/threats during conflict <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Friends are much older or younger <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Difficulties with changes in routine <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Anger control <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>									
Difficulty relating to peers or intimidation of others <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Repetitive/rigid or ritualized behaviour <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Withdrawn <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Physical aggression during conflict towards others, property <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Atypical social behaviour (shouts, interrupts, negative self-talk) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Failing to respond to redirection, correction, proximity, or other universal interventions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Perseveration, compulsive thoughts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Suicidal ideations and/or behaviours <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Inappropriate sexual comments <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Negative reaction to praise or positive reinforcement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Emotional dysregulation <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Self-injurious behaviour <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Inappropriate sexual behaviour <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Frustration or confusion <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>														
Unable to get along with peers or adults <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Tactile defensive <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>														
Continual non-compliance/defiance <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Difficulty inhibiting behaviours; is impulsive <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>														
Encourages others to participate in anti-social or inappropriate behaviour <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					Increased severity in behaviours related to changes in prescriptions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>														
Intimidates others to participate in anti-social or inappropriate behaviour <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																			

The scale of 1 to 5 is: 1 being less likely and 5 being the most intense.

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