

## **LDAO Public Policy Manual 2002**

### **Section C: Early Identification and Screening**

The policies in this part relate to identification of infants and children who have or are suspected of having learning disabilities. Policies address the identification of pre-school aged children and formal procedures for identification of children in the public school system and the need to track children who have been identified as being at risk.

The Learning Disabilities Association was involved in a research project called Promoting Early Intervention. As part of this project, LDAO has:

- developed a new definition of learning disabilities,
- identified a screening process for kindergarten age children,
- piloted a series of interventions for children who are seen as being at risk for school failure,
- introduced a revised assessment protocol for diagnosing learning disabilities in accordance with the new definition,
- developed and piloted a series of programming initiatives for the primary grades,
- made recommendations to all parties involved in the training of teachers in the pre- and inservice programmes, AQ courses and the accreditation and recertification process by the Ontario College of Teachers,
- and promoted much greater public awareness of the field of learning disabilities.

Some of the materials developed through this project have been included in this manual. Others are available on the LDAO website, [www.ldao.on.ca](http://www.ldao.on.ca) or may be obtained directly from the LDAO office or the Association's local chapters.

### **Policies**

C1 Province-Wide Screening for Early and On-Going Identification

C2 Model for Early Identification

C3 Screening Prior to School Entry

C4 Early Identification and Treatment of Auditory and Language Learning Disabilities

C5 Parental Involvement in School Board "Early Identification" Programs

C6 Screening in the Primary Grades

C7 Intervention in the Primary Grades

C8 Use of Early Identification, Developmental Programming and Later Assessment Information to Design Programs

C9 Appropriate Use of Information

C10 Tracking of Students with Learning Disabilities

C11 Junior and Senior Kindergarten

C12 'Whole Person' Approach to Intervention

### **Policy C1 – Province-Wide Screening for Early and On-Going Identification**

LDAO advocates that the Ministry of Education develop and mandate that all school boards undertake a consistent province-wide non-categorical screening program for the early identification of children at

risk for school failure. Following the implementation and evaluation of interventions based on the results of the screening, some children may later need to be referred for further screening, assessment and the identification of a learning disability or some other condition which interferes with learning.

#### Rationale

While the formal identification of children with learning disabilities is only made in school age children, there are early developmental markers which can be used to identify children in the pre-school period who are at high risk for school failure, future learning difficulties or disabilities. Children who show delays in achieving earlier milestones, particularly in the area of language development, are at significantly higher risk of future learning difficulties. Early identification and screening programs should always be supplemented by specific strategies that can help to eliminate or reduce the risk of future disabilities.

More specifically, in the pre-school period, children who show poor phonological awareness have been shown to be at high risk for future reading disabilities. The value of specific intervention strategies has been clearly demonstrated in the case of children with poor phonological awareness. Early intervention strategies have been shown to improve children's phonological skills and have a positive outcome on their future reading achievement.

Children who have suffered illnesses with neurological sequelae or other illnesses that affect development, such as recurrent otitis media, are also known to be at high risk for future learning disabilities. A documented family history of specific learning difficulties, particularly in reading and spelling, may also be used as an early marker of possible future learning difficulties.

#### References

- Education Act, s8
- Windsor Early Identification Project, 1976
- "For the love of learning", Report of the Royal Commission on Learning, 1995
- Special Education Information Handbook, 1984
- Brief on future amendments to Bill 82, LDAO, 1986
- Comments on "For the Love of Learning" , LDAO, 1995
- Comments on future amendments to revised Special Education Information Handbook, LDAO, 1998
- Promoting Early Intervention materials, LDAO, 2001
- See also: Policy C6

## Policy C2 – Model for Early and On-going Identification

LDAO advocates that the Ontario government, i.e., the Ministries of Education, Health and Community and Social Services adopt a consistent developmental model for the identification of learning disabilities based on neuro-psychological and psycho-educational theories of child development supplemented by information from all relevant disciplines rather than a purely medical model.

#### Rationale

Early identification of individuals with learning disabilities is crucial to early intervention. Early identification is more likely to occur through a broad based neuro-psychological and psycho-educational model rather than a purely medical model.

Identification of learning disabilities as an observable variation in neurological function may in some instances be possible through the use of CAT and PET scans, electronic electroencephalograms, and magnetic resonance imaging (MRI). However, such testing is not routine or readily available. Further, although several genetic markers for learning disabilities have been identified, genetic testing for these markers is rarely performed. Testing generally occurs only in unusual circumstances, such as a family tendency to have a fragile X chromosome.

As such, at this time the most reliable means of early identification of learning disabilities is to compare the child's development with the established milestones for the child's chronological age, paying particular attention to areas that are significantly either above or below the chronological norm. Wide discrepancies may indicate either a learning disability or giftedness. It is important to recognise that learning disabilities and giftedness may occur in the same child.

The "soft neurological" signs of learning disabilities usually manifest themselves as a delay in developmental functions, such as speech, language use and motor functions. Where such signs are identified, the first step is to rule out any physical reasons for such delays, such as hearing or visual impairment. The next step is to consider the possibility of learning disabilities.

If a learning disability is suspected, the child should be referred for formal diagnostic testing by a developmental paediatrician, paediatric neurologist and/or psychologist. Typically, such diagnostic testing is not carried out in children under the age of seven.

#### **References**

- "Please Doctor... if someone should mention learning disabilities: a manual for physician"; Resnick, M. and Mahoney, W., LDAC, 1986
- Prevention Policy Statements, LDAC Policy Manual, 1994
- Promoting Early Intervention materials, LDAO, 2001

### **Policy C3 – Screening Prior to School Entry**

LDAO advocates the screening of newborns, infants and preschoolers for signs of any significant central nervous system dysfunction which may lead to a subsequent diagnosis of learning disabilities.

#### **Rationale**

One means of identifying possible learning disabilities is through the identification of central nervous system dysfunction. As such, routine testing for such dysfunction is one way of facilitating early identification of individuals who have or are at risk of having learning disabilities. Early identification is important as research indicates that the ability to influence the central nervous system is greatest very early in life when the child's brain and the central nervous system are still developing.

Such screening should be carried out by appropriate professionals (including obstetricians, pediatricians, family doctors, psychologists and neurologists) to identify the earliest signs of learning disability. Where a dysfunction has been identified, the identifying professional should instruct the parents and/or caregivers in appropriate measures that may lessen the effect of the dysfunction. For example, some pediatricians and child development clinics teach parents to play games with their premature infants to stimulate development and lessen the risks associated with prematurity.

Where there is a family history of learning disabilities, parents and health professionals in contact with the child should watch carefully for signs of emerging learning disabilities. Where learning disabilities are linked with a particular medical condition, such as language learning disabilities existing concurrently with otitis media, screening for indicators of learning disabilities should occur as a matter of course if the linked medical condition develops.

#### **References**

- "Please Doctor!...if someone should mention learning disabilities: a handbook for physicians"; Resnick, M and Mahoney,W, LDAC, 1986
  - Prevention Policy Statements, LDAC Policy Manual, 1994
  - Promoting Early Intervention materials, LDAO, 2001
- See also: Policy C6

## **Policy C4 – Early Identification and Treatment of Auditory and Language Learning Disabilities**

LDAO advocates that the Ministries of Education, Health and Community and Social Services invest the necessary resources in the development of intervention and treatment programs for auditory and language learning disabilities in preschool and primary-aged children, similar to those currently provided for deaf and hard-of-hearing children.

### **Rationale**

Language competency is fundamental to human relationships, interactions and learning; services provided for children who are deaf or hard of hearing recognize this fact. In early 1998, the Government of Ontario allocated an additional ten million dollars for pre-school speech and language programming, directed primarily to children who are deaf, hard-of-hearing or have physically based speech and/or language deficits. However, most children with significant central auditory processing deficits arising from learning disabilities do not meet the criteria for these programs and are thus denied necessary speech and language programming. LDAO advocates that services must be provided for all children at risk for poor language development, regardless of the cause.

Further, health and education professionals (including pediatricians, family physicians, audiologists, speech and language pathologists, public health nurses, early childhood educators, day care workers and social workers) must be aware of learning disabilities to ensure timely referrals for identification, diagnosis and intervention.

LDAO further advocates that the Ministries of Education, Health and Community and Social Services and the medical profession, as a priority, develop tools and processes for diagnosing actual or potential auditory and language learning disabilities and the requisite interventions in young children. These should be able to differentiate between auditory and language learning disabilities and attention deficit disorders and non-verbal forms of learning disabilities. Methods of intervention and/or treatment for these conditions should also be developed and implemented.

One such intervention advocated by LDAO is the development of enriched pre-school language development programs for children identified as having or being at risk of having auditory and/or language learning disabilities. Such programs should be funded by Ministry of Education and the Ministries of Health and Community and Social Services.

### **References**

- “Making Services Work For People”, MCSS, 1997
- Response to OSLA Report, LDAO, 1997
- Response to “Making Services Work for People”, LDAO, 1997
- Promoting Early Intervention materials, LDAO, 2001

## **Policy C5 – Parental Involvement in School Board “Early Identification” Programs**

LDAO advocates that schools and school boards be required to involve parents in kindergarten and primary grade level early identification and screening programs. LDAO further advocates that all parents be provided with information about their school board’s early identification and screening programs, the parents’ guide to special education (including information on SEAC), and information about alternative programming and support services provided by the relevant school board at the time that their child is first enrolled.

### **Rationale**

Ministry of Education mandates screening programs (called “early identification” programs) to assess the developmental levels of children in kindergarten and the primary grades. The purpose of this

screening is to enable teachers to provide instruction geared to the children's individual needs and to identify and observe those students who are considered "at risk" for school failure and future problems.

It is important that parents be involved in this process to ensure that they understand:

- the purpose of the screening to avoid feeling threatened (for example, by the suggestion that there is something "wrong" with their child)
- the findings of the screening, the meaning of the term "at risk", and their child's strengths and needs and in what way, if any, their child is different from his or her peers
- what action the school will take to help the child in his or her areas of difficulty and enrich the child in areas of special talent or ability
- what actions the parents can take to reinforce the efforts of the school through activities at home and in the community
- what supports their child needs (including emotional, social, academic and/or physical support)
- how best to foster a positive self-image in their child
- what behaviour is beyond the child's control to facilitate appropriate discipline

#### **References**

Education Act, s8(3)(a)

Curriculum Guide to Junior and Senior Kindergarten Programming, Ministry of Education, 1998

Response to the Ministry of Education Curriculum Guide to Junior and Senior Kindergarten Programming, LDAO, 1998

Promoting Early Intervention materials, LDAO, 2001

See also: Policies I2, I3, I4

## **Policy C6 – Screening in the Primary Grades**

LDAO advocates that the Ministry of Education mandate systematic on-going primary grade level screening and follow up interventions for all students who were identified through the school board's early identification program as being "at risk" for academic underachievement or failure and who have not adequately benefited from the intervention that was implemented following the early screening. The presumed reason for the observed ongoing difficulties, e.g., socio-economic, cultural, linguistic or other environmental factors or psychological or physical difficulties should not influence the implementation of these steps.

#### **Rationale**

Students are often identified in the primary grades as being "at risk" without any clarification of the reasons for this identification. Frequently, there is no follow up intervention. Once identified as being at risk, students are expected to fail and often receive little or no ongoing assessment or support to identify and ameliorate the reasons for their difficulties. As a result, they may make little progress in improving their academic progress and achievement.

#### **References**

"Please Doctor!...if someone should mention learning disabilities: a handbook for physicians"; Resnick, M. and Mahoney, W., LDAC, 1986

Prevention Policy Statements, LDAC Policy Manual, 1994

Ypsilanti Head Start Project Report

Learning Opportunities Grant description, funding formula, Ministry of Education, 1998  
Promoting Early Intervention materials, LDAO, 2001

## **Policy C7 – Intervention in the Primary Grades**

LDAO advocates that intervention and support for students who have been identified through the school board's early identification program as having or being at risk for having learning disabilities be implemented as early as possible in the primary grades.

### **Rationale**

It is LDAO policy that early identification and early intervention are both fundamental to addressing the needs of students who have learning disabilities. It is important that a student who has identified or suspected needs be given appropriate compensatory programming as soon as that identification occurs and in particular before he or she has been allowed to suffer academic failure. It is crucial, both for academic success and to foster positive self-esteem, that students not be left to fail repeatedly or be two or more years behind academically before remediation and/or special education programs and services are provided.

### **References**

“Please Doctor...if someone should mention learning disabilities: a handbook for physicians”; Resnick, M. and Mahoney, W., LDAC, 1986  
Prevention Policy Statements, LDAC Policy Manual, 1994  
Promoting Early Intervention materials, LDAO, 2001

## **Policy C8 – Use of Early Identification, Developmental Programming and Later Assessment Information to Design Programs**

LDAO advocates that information obtained from both early screening and subsequent assessments be used to design individualized instructional programs that alleviate the student's needs and develop the student's strengths.

### **Rationale**

Screening and assessment information are relevant to designing compensatory instructional programming. Both strengths and needs must be addressed to enable the child to reach his/her potential. Programs should include long and short-term goals, skill development, set out the resources needed and strategies to be used and establish methods of evaluation which will be applied.

### **References**

Education Act, s8(3)  
Regulation 181/98  
Funding formulae, Ministry of Education, 1998  
Promoting Early Intervention materials, LDAO, 2001

## **Policy C9 – Appropriate Use of Information**

LDAO advocates that information gathered about a student during screening, early identification and subsequent assessments be used solely for the purposes for which it was obtained, that is to facilitate and design the appropriate intervention strategies to assist the student in developing his or her potential.

### **Rationale**

The purpose of undertaking identification and assessment of a student must be to benefit that student. Information gathered in this way must not be used to stereotype the student and/or his or her family or as a means of the school or the school board abrogating their responsibility to provide that student with an education.

### **References**

Response to the consultation on the new provincial report card, LDAO, 1998  
Response to the consultation on the Ontario Education Number, LDAO, 1998  
Response to the consultation on Form 14, LDAO, 1998  
Promoting Early Intervention materials, LDAO, 2001

## **Policy C10 – Tracking of Students With Learning Disabilities**

LDAO advocates that the Ministry of Education mandate a process for “tracking” students with learning disabilities to ensure that all information regarding that student’s strengths and needs, programming requirements (including the student’s IEP) and necessary accommodations is provided in a systematic way to those individuals (including teachers, guidance counsellors and other school staff) with primary responsibility for the student’s education and transition to the next level of the educational system. Such tracking should commence when the student is identified as being at risk for having learning disabilities and continue until the student has left the public school system.

### **Rationale**

At this time, there is no “cure” for learning disabilities. A student identified as having learning disabilities will likely require some support or assistance throughout his or her academic career. As such, it is imperative that those individuals responsible for the education of a student be made aware:

- that the student has been identified as having learning disabilities
- what programming decisions have been made, as set out in the student’s IEP
- what interventions have (and have not) been successful in the past

Cumulative records must be maintained by a student’s current educators and a systematic transfer of such information to each new educator (including, as appropriate, teachers, guidance counsellors and other school personnel) must occur to ensure that the student’s needs are met and his or her progress monitored throughout his or her academic career.

Such transfer of information is of particular importance given that regular class placement is the most common placement for exceptional students, including students with learning disabilities. As such, continuity of placement (that is, with the same teacher) is unlikely to occur from one year to the next.

While the above information may be contained in the student’s OSR, a formal system of informing educators is more likely to ensure continuity of appropriate programming.

### **References**

Regulation 181/98  
Memo on integration from Jill Hutcheon, Ministry of Education, 9 June 1994  
Funding formulae, Ministry of Education, 1998  
Promoting Early Intervention materials, LDAO, 2001

## **Policy C11 – Junior and Senior Kindergarten**

LDAO advocates the provision of junior and senior kindergarten programs for all four and five year-old children, with children to be enrolled in such programs at the discretion of the parents.

### **Rationale**

Research shows that early education programs for young children may offer significant benefits for future educational achievement. Potential benefits include:

- an opportunity to enhance young children's intellectual, physical and social development by providing appropriate stimulation
- increased opportunities for early identification of children at risk of future educational problems whether as a result of environmental or physiological factors (including hearing or vision impairment, learning disabilities or delayed language development)
- increased opportunities for early identification of students with advanced development in one or more areas

### **References**

"The Psychology of the Child"; Piaget, J. and Inhelder, B., Basic Books, 1969

"Educational Care: a system for understanding and helping children with learning problems at home and in school"; Levine, M., Educators Publishing Service Inc., 1994

Promoting Early Intervention materials, LDAO, 2001

## **Policy C12 – ‘Whole Person’ Approach to Intervention**

LDAO advocates that in designing appropriate programming for a student with learning disabilities, a ‘whole person’ approach must be applied. That is, all the strengths and needs of the student (academic, intellectual, behavioural, social, emotional, physical and life skills) must be taken into account.

### **Rationale**

The effect of having learning disabilities often extends beyond the simple “area of deficit”. In addition, different students, even those identified as having the same or similar learning disabilities, may have different programming requirements as a result of factors other than the learning disability. Addressing only one aspect of a student’s needs (for example, remedial reading programming) without considering the student’s strengths and needs as a whole is of little long term value.

### **References**

LDAO Mission Statement

Learning and Employment Assessment Profile (“LEAP”), LDAO, 1998

Promoting Early Intervention materials, LDAO, 2001