

## Enhancing Opportunities through Full-Service School Divisions

Implications for the Staffing of Professional Student Support Services

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Student Support Services Branch Early Learning & Child Care Branch

#### Statement of Purpose

This document provides the researched context, from jurisdictions throughout the world as well as professional associations, for the staffing profile ratios that are included in the 2009-2010 Funding Guide.

The transition from identifying individual students as the cost-drivers within a school division to the supports (i.e.,: staffing ratios) has been a work-in-progress since 2006 that has been led by Student Support Services with on-going involvement from Education Finance & Facilities and Early Learning & Child Care branches.

The document is further intended to facilitate continued discussion regarding enhancing opportunities for children and youth through full service school divisions.

The primary institutions that have traditionally carried the responsibilities for raising and teaching children – families and schools – cannot fulfill their obligations without immediate and intensive assistance. We must call on schools and community institutions to come together in an organized movement to help young people gain equal opportunities to grow into responsible adults. Schools have to become places where all children can learn. (Dryfoos, in Smith, p. 1, 2004)

# **Contents**

Introduction	1
Full-Service Schools	2
What are full-service schools?	2 3 4
Why are school-based support services desirable?	5 7 8
Professional Student Support Services	8
What are professional student support services?	8 8 8
Toward Providing Adequate Professional Student Support	
Services	10
What are the issues associated with staffing professional student support services?	10
What are the implications for early childhood care and education?	12 13
Conclusion	19
Appendices  Appendix I: Recommended Staffing Ratios from Professional Associations and Authors  Appendix II: Saskatchewan Staffing Ratios for 2008/09  Appendix III: Canadian Staffing Profiles	20 23 24
References	29

## Introduction

Full-service schooling is a concept that promotes the importance of addressing the academic and non-academic needs of children in an effort to overcome barriers to successful learning. The literature contains references to this model of service delivery in many countries around the world, most notably in the United States, Australia, Canada, and the United Kingdom. Many related terms and concepts have been associated with the notion of full-service schools, including: community schools, integrated service delivery, wraparound, extended schools, and school-linked services. While there may be slight variations in the definitions of these related terms, they all support bringing together human services in a coordinated manner to provide strong and seamless supports for children and their families.

The concept of full-service schools is one of the models being explored by school systems nationwide to provide a collaborative school and community approach to solving the problems of our changing society. (Calfee, Wittwer & Meredith, 1998, p. xi)

Within the Saskatchewan context, full-service schools are related to the concept of School PLUS, a provincial policy direction that envisions every school actively involved in "improving student outcomes through the delivery of a strong learning program and serving as a centre for social, health and other services for children and their families" (Saskatchewan Ministry of Education website).

One aspect of full-service schools is student and teacher access to professional student support services (e.g., student support services teachers, psychologists, social workers, occupational and physical therapists, speech and language pathologists, translators, additional language specialists and school settlement workers). School divisions have been employing and using professional support staff (sometimes referred to as pupil services staff or related services staff) for a number of years to address the non-academic needs of students, with and without special needs. Few policymakers, administrators, and teachers would dispute the need for staff specialists working in schools to address the complex social, health-related, language learning and emotional needs of children and youth. The question remains, however, how does a Board know whether they are providing adequate professional support staff?

## **Full-Service Schools**

## What are full-service schools?

Full-service schools combine quality education and support services in response to the learning, health, and social needs of children and their families. They promote service integration between education, health, and social services in an effort to provide seamless services within a school building or near-by community location. Those who advocate for full-service schools recognize "the need for both prevention and early intervention within the school setting, and of collaborative and integrated service response across schools and human services" (Commonwealth of Australia, 2001, p. 11). Joy Dryfoos, a renowned researcher and advocate of full-service schools, describes them as "one-stop centers where the educational, physical, psychological and social requirements of students and their families are addressed in a rational, holistic fashion" (in Wilkin, White & Kinder, 2003, p. 17). The Florida Department of Education provides the following comprehensive definition:

A full-service school integrates education, medical, social and/or human services that are beneficial to meeting the needs of children and youth and their families on school grounds or in locations which are easily accessible. A full-service school provides the types of prevention, treatment and support services children and families need to succeed.... services are high quality and comprehensive and are built on interagency partnerships which have evolved from cooperative ventures to intensive collaborative arrangements.... (in Smith, 2004)

Full-service schools represent a purposeful shift away from the provision of separate and fragmented programs and services delivered by agencies, institutions, and/or individuals working in isolation from others, toward schools becoming centers or hubs for the delivery of a variety of support services, in addition to performing their traditional educational role.

## What are the features of full-service schools?

There is no one model or blueprint of a full-service school; in fact it has been argued, "diversity and fluidity surrounding the concept represents a major strength" (Wilkin, White & Kinder, 2003, p. 14). Indeed, full-service schools do not all look the same. They may, for example, have different governance structures, funding arrangements, service offerings, staff positions, and community/ministerial partners. This being said, there are some common features of successful models of full-service schools. In a topical brief provided through the website of the Council for Exceptional Children (CEC, 2002), a number of the common features of full-service schools are identified below.

Vision: Full-service schools present a shared vision about improving long-term conditions for children and families.

Accessible, child-centered services: Full-service schools help children and families solve immediate problems and develop the capacity to avoid future crises. They also provide quality services that are readily accessible to children and their families.

**Integrated services:** Full-service schools reflect the entire continuum of services from systems of prevention, to systems of early intervention (early-after-onset), to systems of care for the treatment of severe and chronic problems.

**Collaboration:** At the core of full-service schools are collaborative partnerships and relationships in delivering integrated services. Integration is not merely about the merger of service systems, but rather their increased collaboration in working toward a common goal.

Culturally affirming services: Full-service schools are committed to affirming the cultural diversity of children and families.

**Shared funding responsibility:** While the school is generally the practical focal point for coordination of services of in full-service schools, funding issues are considered to be a joint endeavor between partners.

# What is the rationale for establishing full-service schools?

There are three significant reasons why the current delivery system of support services to children and families needs to change:

- 1. Social welfare systems have not been entirely successful in helping families who struggle with complex challenges of today's society, including settlement and social integration needs;
- 2. Schools require greater assistance in meeting the full range of learning, social, emotional, and health needs of their students; and
- 3. Support services are essential to ensuring all children have equal opportunity to learn and become productive and healthy citizens of the community and the world.

Social welfare systems have not been entirely successful in helping families who struggle with complex challenges of today's society, including settlement and social integration needs. Ongoing societal changes have resulted in a need for a more effective and efficient approach to the delivery of essential services. Many of the institutions and organizations responsible for the delivery of human services operate in silos with little inter-group communication. Their services do not typically provide holistic and flexible responses to the interconnected nature of complex social problems. Parents can become confused and frustrated with the bureaucratic structures and conflicting policies of these separate entities. In some instances, parents are required to take time away from work to travel to different locations in order to access services. Full-service schools have the potential to maximize resources, provide preventative as well as crisis oriented services, and enhance collaboration among the human service providers.

Schools require greater assistance in meeting the full range of learning, social, emotional, and health needs of their students. There are increasing numbers of children and youth coming to school with a myriad of risk factors that impede learning, such as: child abuse and neglect, poverty, violence, criminal involvement, poor health and nutrition, hunger, teen pregnancy and early sexual encounters, alcohol and drug abuse, family dysfunction, and mental health issues. Furthermore, children and youth with special needs are particularly vulnerable to failure at school and in life as they face the added challenges associated with their exceptionalities. There is clear recognition that schools must find ways to address the social, emotional, and health needs of children as preconditions to learning. In fact, full-service schools in the UK (known as extended schools) are based on the philosophical foundation that addressing the social well-being of children and families promotes educational achievement (Wilkin et al., 2003, p. iv).

The concept of a full-service school is based on the bold philosophy that schools can produce academic literacy only when students are ready and able to learn. Success in school is directly related to family environment and to students' physical and mental health. If we are to reach the goals of school reform — to maximize every student's learning potential — then we must identify the problems our students face, and we must become proactive participants in the solutions, not promoters of quick fixes. We must explore less costly and more efficient ways of 'doing business'. We may not be able to work any harder, but we can work smarter. (Calfee, et al., 1998, p. 21)

Support services are essential to ensuring all children have equal opportunity to learn and become productive and healthy citizens of the community and the world. Children who face many of life's difficult challenges are not provided with the same opportunities to grow and learn in our schools. Kronick (2002) suggests that meeting the ecological needs of children and their families has the potential to diminish the "inequities that exist between the haves and the have-nots" (p. 3). Dryfoos (in Smith, 2004) concurs that schools and community institutions must come together to provide young people with "equal opportunities to grow into responsible adults." Full-service schools hold the promise of providing all students with opportunities to maximize their educational achievement and to enhance their well-being and future life chances.

Support services must be offered for these children to have any chance at all for learning. To not provide these services yields the onerous option of the creation and continuation of a permanent underclass. (Kronick, 2002, p. 5)

## What are the benefits of full-service schools?

While much of the literature speaks to the promise that full-service schools hold, there is limited large-scale and rigorous evaluation of full-service schools (Wilkin et al., 2002, p. v). Nonetheless, various researchers cite a number of benefits for a) children and youth, b) schools, c) community, and d) support service providers. These are listed below.

## Benefits for Children and Youth

- Improved attendance (AR-SIG, 2008; Dryfoos & Maguire, 2002; McCord et al., in CEC, 2002; The Scottish Office, 1998; Dryfoos, 1995)
- Improved early intervention (Flaherty, Weist & Warner, in CEC 2002; The Scottish Office, 1998)
- Improved employment prospects (The Scottish Office, 1998)
- Improved academic performance (AR-SIG, 2008; Dryfoss & Maguire, 2002)
- Reduction in high-risk behaviors e.g., substance abuse, teen pregnancy, disruptive behavior (AR-SIG, 2008; Dryfoss & Maguire, 2002; Zabin, Hirsch, Smith, Streett & Hardy, in CEC, 2002; The Scottish Office, 1998; Dryfoos, 1995)
- Reduction in suspensions (Dryfoos & Maguire, 2002)
- Lower incidence of child abuse and neglect (AR-SIG, 2008)

## Benefits for Schools

- More expert services that support the work of teachers (AR-SIG 2008; The Scottish Office, 1998)
- Increased communication between home and school (The Scottish Office, 1998)
- Increased parent involvement (AR-SIG, 2008; Dryfoos & Maguire, 2002; The Scottish Office, 1998)

## Benefits to the Community

- Reduction in crime and violence in the community (AR-SIG, 2008; Dryfoos & Maguire, 2002; The Scottish Office, 1998)
- Improved family functioning (Dryfoos & Maguire, 2002; The Scottish Office, 1998)
- Better access to resources and services (Dryfoos & Maguire, 2002: The Scottish Office, 1998)
- Increased community engagement (AR-SIG, 2008; The Scottish Office, 1998)

## Benefits to Support Service Institutions and Agencies

- More effective and efficient service provision (The Scottish Office, 1998)
- More efficient use of resources (The Scottish Office, 1998)
- Improved communication between service providers (The Scottish Office, 1998)
- Reduction in wait time for services (The Scottish Office, 1998)

## Why are school-based support services desirable?

While some full-service schools provide access to services offsite, there are a number of advantages to using schools as the central site for service delivery. First and foremost, schools are where the children are and where they spend most of their days (DeBeer & Gairey, 2008; Carleson, in Wilkin et al., 2003; CEC, 2002; Kronick, 2002). Secondly, families can access comprehensive services at a "one-stop" centre located within the community. Lastly, schools have an infrastructure that lends itself to multi-agency collaboration and community development, including: a) a building that can be made available beyond the school day; b) leadership experience and authority to develop partnerships, manage budgets, and hire and train staff; and c) an emphasis on community and family involvement (Raham, in Wilkin et al., 2003, p. 15). DeBeer and Gairey (2008) state that "school based, rather than clinic based treatments have a far greater rate These authors believe that board-hired professionals versus of success" (p. 4). contracting for support services are preferable for two reasons: a) the professionals will have a greater understanding of school culture, and b) the professionals can be accessed throughout the full school year by staff. Some researchers also contend that providing services within schools for all students is less likely to be stigmatizing for children with special needs (Harbin, McWilliam & Gallagher, in MCFD, 2004; Koppich & Kirst, in CEC, 2002). In their report on Ontario's service delivery, DeBeer and Gairey (2008) go so far as to suggest that the Ministry of Education ought to consider taking full responsibility for all of children's services "leaving community based services for adults" (p. 39).

This being said, it may not always be possible to deliver all necessary services from a school site. When this is the case, school-based services, combined with a referral process for community services, may be the next best option.

## What are the approaches to full-service schooling?

There is no one blueprint or correct model for successful full-service schools (Calefee, Wittwer & Meredith, 1998). Specific programs/services and how they operate depend on the unique partnerships and needs of the community. While the USA models tend to focus on socio-economic services (e.g., social work, counseling, crisis intervention), the UK models appear to adopt an educationally focused approach (e.g., family literacy, computer classes) (Wilkin et al., 2003, p. v). Some full-service schools are "smaller-scale extensions or additions to the traditional remit of individual schools," while others attempt larger-scale reorganization or reconceptualization of an integrated system of comprehensive services (ibid).

# Professional Student Support Services

## What are professional student support services?

For the past number of years, boards have employed (or shared with another board) various professional student support services (PSSS) in recognition of the many complex needs of children and youth in schools. These professional positions vary from school division to school division, but often include such positions as: student support services teachers, psychologists, social workers, occupational and physical therapists, speech and language pathologists, translators, additional language specialists, school settlement workers, behavior interventionists, and nurses.

# What is the value added by professional student support services?

As one aspect of full-service schools, PSSS are a valuable resource to meeting the needs of children, as well as supporting staff that work with these children. In fact, success within full-service schools requires supports for both students and teachers (Porter, 2008). As discussed in the previous section, professional student support services are essential to meeting the complex needs and challenges faced by some students. Classroom teachers also require the support of other professionals who possess specialized knowledge and skills to assist in the development, implementation, and monitoring of effective intervention plans. There appears to be no question that this specialized staff adds value to full-service schools.

# What are the service delivery models used by professional student support services?

PSSS have the capacity to provide a full range of preventative, consultative, intervention, and assessment services. They typically carry out their duties through a combination of three basic models of service delivery.

#### Direct Service

The professional works directly with an individual or a group of students in the teaching of specific skills and/or providing treatment interventions.

#### Consultative Service

The professional provides information, recommendations, and/or specific intervention plans to others (e.g., classroom teachers, assistants, parents) who may be responsible for implementing the treatment. Consultative information may include information on how to: a) adapt the curriculum, b) modify instructional or assessment methods, c) use technical devices, or d) implement specific intervention strategies.

#### Collaborative Service

The professional, as a member of a multi-disciplinary team, shares ideas and collaborates in the development of plans to meet students' needs. The team may include classroom teachers (as well as parents) working with other professionals from a variety of disciplines. The collaborative process is fundamental to the concept of integrated services.

# Toward Providing Adequate Professional Student Support Services

# What are the issues associated with staffing professional student support services?

The literature contains significant reference to a number of issues related to the staffing of PSSS, namely: a) under-funding for such positions, b) demanding caseloads, and c) recruitment and retention difficulties. Each of these issues is interconnected: For example, if the funding does not provide for an adequate number of staff positions, then the existing staff must carry larger caseloads. These in turn causes retention and recruitment difficulties.

## **Under-Funding**

Lack of funding is a common theme in the literature pertaining to inclusive education and student support services (DeBeer & Gairey, 2008; Crawford, 2005). DeBeer and Gairey (2008) found that the respondents in their study expressed concerns regarding the underfunding of support personnel, suggesting that it has "rendered many school boards unable to effectively address the range of complex students' needs" (p. 38). Mackenzie (in DeBeer & Gairey, 2008) suggests that when boards are faced with challenging budget decisions, support staff is often viewed as expendable.

When boards' funding flexibility is reduced ... school board management looks for flexibility in other areas. And all too often, the path of least resistance and with least political visibility is to cut back support staff. (Mackenzie, in DeBeer & Gairey, 2008, p. 38)

Pollard (2006) contends that funding for PSSS positions is often based on past practice and availability of budget, rather than on standards that reflect quality service and

positive student outcomes. DeBeer and Gairey (2008) advocate for "dedicated, predictable, stable and sufficient" funds directed toward professional support services (p. 26).

#### **Demanding Caseloads**

A number of professional associations express concern regarding the demanding caseloads that are often required of the personnel who work in support service areas. Stewart (2006) found that the respondents in her study (professionals who work in the related service areas) indicated that the most common workload issue is large caseloads. Issues associated with large caseloads include: reduced quality of service, limited service delivery options, staff stress and burnout, increased sickness levels, and retention/recruitment difficulties.

Job satisfaction is related to the opportunity to provide quality care. An emphasis on quantity versus quality reduces job satisfaction. There appears to be a correlation between high caseloads and lower perceptions of job satisfaction... (Stewart, 2006, p. 59)

There is significant agreement in the literature that a number of factors need to be considered in assigning and managing caseloads. Some of these factors include: various characteristics of the child (e.g., severity of the disability, age of the child, specific needs), family characteristics, service model and methods used in treatment, skill/experience of the therapist, travel requirement, and documentation requirements (Pollard, 2006, p. 17-19; Stewart, 2006, p.49).

Caseload/workload management is used to prevent staff overload and dissatisfaction, and to prevent students from receiving poor quality service. Caseload/workload assignment and management is about "balancing quality interventions with cost effectiveness" (Parker-Taillon & Associates, 2005, p. 7). Three professional associations — Canadian Association of Occupational Therapists, Canadian Physiotherapists Association, and the Canadian Association of Speech-Language Pathologists and Audiologists — are currently partnering on the development of a caseload management tool which is due to be completed in 2011. Parker-Taillon & Associates (2005) suggest that caseload management tools are beneficial in that they may assist in: a) clarifying a reasonable workload, b) setting priorities, c) creating greater fairness and equity in workload distribution between staff members, d) providing clear service expectations, e) predicting staffing levels and setting budgets, and f) recruitment and retention of staff (p. 6).

## Recruitment and Retention Difficulties

There is reference in the literature to the shortage of professional support staff in many school divisions across Canada, with the most pronounced concerns in rural and remote areas (Crawford, 2005). MacKay (2006) reports on the shortage of professional services in his study of New Brunswick, with particular recruitment and retention problems in rural communities (p. 222). He writes that "wait times to see some professionals are reported to be long: some report waiting periods of six months to three years" (p. 222). A document prepared by the Saskatchewan Association of Speech-Language Pathologists and Audiologists (2007) suggests that the main barriers to recruitment and retention of speech and language pathologists include: a) low salaries, b) large caseload sizes, c) lack of resources, d) lack of continuing education opportunities and funding, and e) professional isolation. This document further suggests that long term vacancies result in the following effects: a) increased caseload size, b) decrease in quality of service, c) reduced or denied services to eligible candidates, d) reduced job satisfaction, and e) fewer opportunities for collaboration and professional peer support. This information is likely applicable to other professional support positions.

# What are the implications for early childhood care and education?

There is a growing body of knowledge regarding the benefits to children of investing in the early years.

Evidence from the fields of physiology, nutrition, health, sociology, psychology, and education continues to accumulate, indicating that the early years are crucial in the formation of intelligence, personality, and social behavior. Children are born with physical, social, and psychological capacities, which allow them to communicate, learn, and develop. If these capacities are not recognized and supported, they will wither rather than flourish. (Evans, Myers & Ilfeld, 2000, p. 5)

The literature contains a number of references with respect to the return on investments in early childhood. For example, the Committee for Economic Development and two business organizations (The Business Roundtable and Corporate Voices for Working Families) stated that early childhood education provides a return of \$4 to \$7 for every \$1 invested (Calman and Tarr-Whelan, 2005, p. 16). Calman and Tarr-Whelan (2005)

identify a number of short and long term economic benefits to taxpayers and the community if quality early education is provided to all children. These authors state that

Every dollar invested in quality early care and education saves taxpayers up to \$13.00 in future costs. (Calman & Tarr-Whelan, 2005, p. 2)

The following quotation captures the essence of the benefits to children and society as whole if quality early childhood education is provided:

Society benefits economically from its investment in child care and development through increased economic productivity over the child's lifetime, increased employment options for caregivers to earn and learn, and by the saving of social costs in such areas as school enrollment, repetition, and drop-out rates (children who receive appropriate early attention are more apt to enroll in school, are less likely to repeat grades, and less likely to drop out). In some instances there are also savings in terms of reduced juvenile delinquency and reduced use of drugs. (Evans, Myers & Ilfeld, 2000, p. 8)

Supporting early care and education requires adequate staffing allotments including the provision of professional student support services. Evans, Myers and Ilfeld (2000) acknowledge that "younger children require higher adult-child ratios" (p. 318). Furthermore, these staff members must have appropriate training in the field of early childhood education.

# What are the implications for immigrant and refugee students and families?

The Federal government is moving toward "an annual immigration target that will equal 1% of the Canadian population" (Cook, 2006, p. 5). Data collected from the past five years indicates that approximately 40% of all immigrants to Canada are children and youth (0-24) (ibid). Saskatchewan is experiencing an increasing number of immigrant and refugee students and families. This population represents a growing pressure on the education system to provide supports to meet their diverse and complex academic, as well as broader psychosocial and basic needs.

How our educational institutions receive, treat, and teach children of immigrants not only affects [sic] immigrant families but will determine our country's long-term economic and social well-being. (GCIR, 2006, p. 85)

The public education system is often considered the primary and initial source of support for immigrant and refugee children and families. In their research report, Lo, Aniself, Vasu, Preston, and Wang (2009), envision public schools as local and regional hubs that offer support for "vulnerable groups who are often both socially and physically isolated" (p. 58). These researchers argue for a public infrastructure that includes comprehensive and interdependent supports ranging from basic needs, to health, to education, to recreation, as a means to reducing social inequalities.

The school – an institution universally recognized as the centre of a community – is the best place to act as a central (and a multiple-) point of entry to the world of health, education and support services for immigrant families with young children. (Immigration Children)

Andrew Duffy (2003) points out that while schools hold the promise of giving immigrant and refugee students an equal chance to succeed, the unique needs of many of these students and their families present challenges for school divisions. Some immigrant and refugee students arrive in Canada with limited formal schooling and little or no knowledge of English/French; illiterate in their first language; living in poverty; psychological and emotional issues associated with war or political unrest; and separation from family members. Furthermore, they face a number of barriers to accessing necessary supports – lack of awareness of services, social isolation, limited economic resources, confusion related to bureaucratic processes, geographic constraints, and racism (Stewart, n.d.).

Consider their challenge. These students must adjust to a new country while learning English quickly enough to finish high school and compete with native English speakers for places in university, college or the workplace. ... [It can be] compared to a horse race in which immigrant students are initially set well behind, and must challenge for the lead by the time they reach the finish line. (Duffy, 2003, p. 2)

The hardships experienced by immigrant and refugee children and families are further complicated by the fact that school divisions across Canada are challenged to provide services and supports well beyond traditional schooling expectations. Cook's (2006) research outlined a number of challenges identified by Canadian school divisions in their efforts to serve the needs of immigrant and refugee students. In essence, these challenges include acquiring the resources and supports: (a) to assist students in learning the language, developing the skills and knowledge required for graduation, and meeting their psychosocial and basic needs; and (b) to support teachers in their work with these students through the provision of additional training, appropriate materials, intervention programs, and support services necessary for this unique population. A number of authors (Cook, 2006; GCIR, 2006; Kugler, 2009) also speak to the importance of engaging immigrant and refugee parents in the education of their children.

If the school can build trusting partnerships with parents and extended families, helping them adjust to their new lives and strengthening them in their roles as caregivers and family leaders, students will benefit. (Kugler, 2009, p. 13)

A number of important support provisions are necessary to address the needs of immigrant and refugee students if they are going to become productive and contributing members of the Canadian society:

## Specialized Staff

Examples include: settlement workers, English-as-an-Additional Language teachers, English-as-an-Additional Language coordinators/specialists, social workers, counsellors, psychologists, speech and language professionals, and cultural liaison workers.

## Academic Programming Supports

• Examples include: bilingual tutoring and/or bilingual ESL programs; intensive assistance in language development, literacy/numeracy skills, and academic skills/knowledge; and early intervention programs.

#### Materials

 Examples include: multilingual resources; language benchmarks and other assessment tools; tracking systems to follow newcomers throughout their schooling; and newcomers guides to understanding the education system.

#### Other Supports

• Examples include: after-school programs; reception centres; translation and interpretation services; parent outreach programs (e.g., family literacy, parenting); ongoing professional development for staff; enhancement to pre-service teacher education programs; location of services at convenient sites; forming partnerships with immigrant-serving organizations; and mental health services.

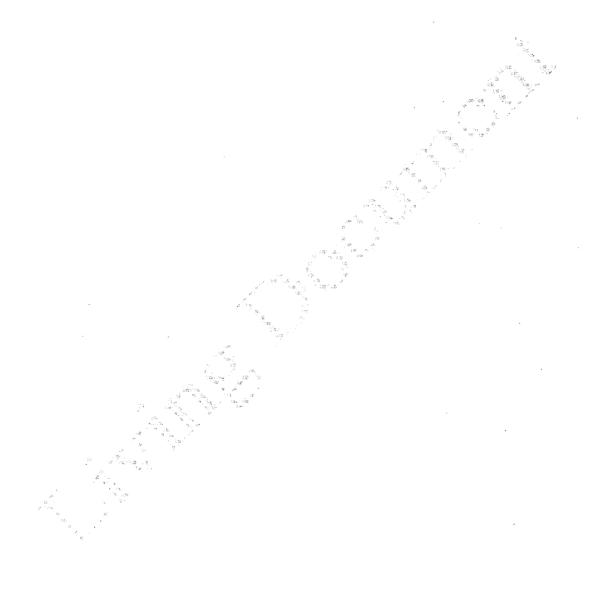
# What is considered adequate professional student support services?

While there is a significant amount of literature regarding the importance of support services personnel to meeting the needs of children, there appears to be little information or evidence pertaining to what constitutes adequate staffing levels for these support positions. Pollard (2006) suggests, "current staffing ratios are based more on historical staffing patterns and available resources rather than actual...[student] needs, leaving the potential for under-service, suboptimal outcomes and increased staff stress and frustration" (p. 19). It appears that most jurisdictions that use staffing guidelines and ratios have based them on professional judgment. In the absence of conclusive evidence, this is perhaps a good first step, with recognition that more evidence-based research is needed in this area.

MacKay (2006) is one author who advocates for increasing support personnel, and toward this end, he recommends specific staffing ratios. In his review of New Brunswick's inclusive education system, he states that more resources are required to attract, retain, and increase the numbers of professional service providers. While he acknowledges the costs associated with increasing staffing ratios, he maintains that it is imperative to provide adequate resources to deliver adequate integrated services in an inclusive education environment (p. 224).

While there is a paucity of evidence that unequivocally justifies particular staffing ratios, it seems reasonable to begin the work of establishing optimal staffing levels that ensure quality service and healthy working environments. The chart below provides a proposed six-year plan for creating population-based staffing ratios for professional student support services (e.g., 1 professional for every 1000 students). The proposed ratios are based on total student population because many of the issues that students face are not associated with an exceptionality; population-based ratios also represent equitable access to services for all students (DeBeer & Gairey, 2008, p. 8 & p. 36). Due to limited information, targets for ratios are not suggested for all possible staffing categories.

The staffing ratios should be viewed as standards for optimal staffing levels considered necessary for the provision of quality service, rather than a means to avoiding poor quality service. The proposed ratios will need to be continually monitored, reviewed, and adapted to ensure relevance and effectiveness, based on a number of key indicators such as student outcomes, wait lists, and parent and staff satisfaction.



# Proposed Staffing Ratios and Implementation Plan for Increasing Professional Student Support Services

	Year 7	Grades 4-12		1:200	1:500	1:300	1:2000	1:1000	1:2000	1:4000	1:8000				
	Y	Early Entrance, PreK, K, Grades 1-3		1:100		1:100	1:1000	1:750	1:500	1:2500	1:5000				
	: 5	Grades 4-12	1:2000	1:240		1:280	1:2000	1:1000	1:2000	1:4000	1:8000	00			-
	Year 5	Early Entrance, PreK, K, Grades 1-3	1:1500	1:135		1:80	1:1000	1:750	1:1000	1:3000	0009:1	1:9000	1:5000	1:5000	
1	Year 3	Grades 4-12		1:270		1.240	1;2000	1:1000	1:2000	1:4000	1:8000			1:5	
	Ye	Early Entrance, PreK, K, Grades 1-3		1:160		1:65	1:1500	1:750	1:1500	1:3500	1:7000		· · · · · · · · · · · · · · · · · · ·		
	Year 1	Grades 4-12	1.2000	1:300		1:200	1:2000	1:1000	1.2000	1:4000	1:8000	1:10000			
	Ye	Early Entrance, PreK, K, Grades 1-3	102	1:200		1:50	1:2000	1:750	1.2000	1:4	1.5	1:1			
			Coordinators and Consultants	Student Support Services Teachers	English as an Additional Language Teachers	Education/Teacher Assistants	Psychologists	Social Workers / Counsellors	Speech-Language Pathologists	Occupational Therapists	Physical Therapists	Addictions Counsellors	Nurses	Settlement	Workers

Note: Ratios are based on MacKay (2006) and others (see Appendix 1) combined with information on current provincial ratios (see Appendix II).

Enhancing Opportunities through Full-Service School Divisions

## **Conclusion**

The proposed staffing ratios and corresponding implementation plan is to be considered a starting point toward establishing adequate staffing levels for student support personnel required to promote successful inclusive education. This plan is intended to initiate the dialogue that will lead school divisions toward successful development of full-service schools.

Other considerations for future action in relation to the proposed staffing plan include:

- 1. A committee should be established to determine the extent of shortages of support personnel based on existing and desired wait times. This information should be used to quantify the needed human resources. The staffing ratio chart should be expanded over time to include other essential professional positions.
- 2. Ratios should be refined through a collaborative interprofessional process, as well as through the use of quality indicators such as: student outcomes, wait time, and parent and staff satisfaction.
- 3. The staffing ratios should be supported by caseload guidelines that consider various contextual factors (e.g., student and family characteristics, travel requirements, skill and experience of the professional, and service delivery options). The caseload management tool currently being developed by three Canadian professional associations Canadian Association of Occupational Therapists, Canadian Physiotherapists Association, and the Canadian Association of Speech-Language Pathologists and Audiologists should prove to be a valuable resource for this purpose.
- 4. School divisions may choose to start enhancing the staffing ratios in the positions that are considered of greatest importance to the district. Following the advice of Wayne MacKay (2006) any changes to the proposed ratios "should always result in improved ratios" (p. 240).

# **Appendix I:**

# **Recommended Staffing Ratios from Professional Associations and Authors**

Position	Proposed Ratios	Source of Recommendation
Resource Teachers	1:30 identified special needs students (excluding students on accommodated plans)	Thorburn, 2005, p. 33
	1:200 (K- 8) within 1 yr 1:300 (Gr 9-12) within 3 yrs 1:180 (K-8) within 4 yrs 1:275 (9-12) within 6 yrs	MacKay, 2006, p. 240
	11:275 (712) Widini 6 yis 11:1000 (1:91)	Teacher Allocation Commission, 2007, p. 96 & 141
	5:1000 (1:200) 1:14 students as determined by the incidence rate (7% of student	MacKey and Associates (Andrew, 2003, p. 11) Andrew, 2003, p. 20
	population); intended for core (high needs) plus 1:500 students enrolled; intended for general (lower needs)	
	7:1000 (1:143) (noncategorical special education plus categorical special education for documented cases)	Sparkes & Williams, 2000, p. 63
Psychologists	1:2000	Thorburn, 2005, p. 33
	1:1500 within 2 yr 1:1000 within 5 yrs	MacKay, 2006, p. 225
	1:1000	American School Health Association (American Counseling Association website)
	1:1000	National Association of School Psychologists (MacKay, 2006, p. 224; Stuberg & Schafer, 2000, p. 128; Feinberg, Nuijens & Canter, 2005)
	1:1000	New Brunswick Association of Psychology and Psychometrists in Schools (MacKay, 2006, p. 167)
Counsellors	1:700 (K-12) within 3 yrs 1:500 (K-12) within 6 yrs	MacKay, 2006, p. 241
	1:250	American School Health Association (American Counseling Association website)
	1:250	American School Counselor Association (Carrel, n.d.)
	1:333 (K-Level 111)	Teacher Allocation Commission, 2007, p. 112
1883   1974 - 1984   1984 1984   1984   1984   1984   1984   1984   1984   1984   1984   1984   1984   1984   1984   1984   1984   1984	1:400 1:500 elementary schools	Andrew, 2003, p. 21 Pacquette, W. (Andrew, 2003, p. 15)
	1:250 junior and senior high schools 1:500	Sparkes & Williams, 2000, p. 63
	92507.5 1.300	Dealton of Hilland, 2000, p. 05

Speech-Language	1:300	Thorburn, 2005, p. 33
Pathologists	1:3000 within 1 yr 1:2500 within 3 yrs 1:2000 within 5 yrs	MacKay, 2006, p. 225
	1:1000	MacKay, 2006, p. 257
	1:1560	Department of Health & Wellness under QLA, New Brunswick (MacKay, 2006, p. 224)
	1:40 (caseload)	American Speech and Hearing Association (DeBeer & Gairey, 2008, p. 36)
er entre Ver gez	1:1500	Ontario Association for Families and Children with Communication Disorders (DeBeer & Gairey, 2008, p. 36; MacKay, 2006, p. 171)
	1:2250	Recommended by DeBeer & Gairey as a more realistic ratio from that provided by the OAFCCD and representative of better serviced boards (DeBeer & Gairey, 2008, p. 36)
	1:20 - 30 caseload for young children 1:31 - 40 caseload for children aged six and over	Canadian Association of Speech-Language Pathologists and Audiologists (CASLPA, 2003, p. 15 & 24)
Audiologist	1:12,000 (preschool – Gr 12)	American Speech and Hearing Association (supported by the Educational Audiologists Association) (Stuberg & Schafer, 2000, p. 28)
Occupational/ Physical Therapists	1:300	Thorburn, 2005, p. 33
	1:1000 1:40 - 45 (caseload)  Currently developing an interprofessional caseload management	MacKay, 2006, p. 257 American Physical Therapy Association (Stuberg & Schafer, 2000, p. 128) Canadian Association of Occupational Therapists, Canadian Physiotherapy
	tool	Association, & Canadian Association of Speech-Language Pathologists and Audiologists (funded by Health Canada) (Canadian Physiotherapy Association website)
Social Workers	1 per Division 1:400	Thorburn, 2005, p. 33 American School Health Association
	1:400	(American Counseling Association website)  School Social Work Association of America (DeBeer & Gairey, 2008, p. 20)
	1:3500 within 2 yrs 1:3000 within 5 yrs	MacKay, 2006, p. 225
	1:3000	School Social Workers Association of America (MacKay, 2006, p. 224)
	1:2000 (no special concentration) 1:1500 (poverty concentration) 1:1000 (special education concentration) 1:800 (special education & poverty	National Council of State Consultants for School Social Workers (Stuberg & Schafer, 2000, p. 189)

Nurses	1:3000 within 2 yrs 1:2000 within 5 yrs	MacKay, 2006, p. 225
	1:750 (general population) 1:225 (mainstreamed population) 1:125 (students who are severely chronically ill)	National Association of School Nurses (Feinberg, Nuijens & Canter, 2005)
ESL Teachers	0.5:15 (1:30) ESL registered students	Teacher Allocation Commission, 2007, p. 116
Instructional Education Officer (senior level manager of instruction)	1:5000 3:5000 - 20,000 4:20,000 - 30,000 5:30,000 - 40,000	Teacher Allocation Commission, 2007, p. 126 & 145
Teacher Specialists (to support music, phys.ed., fine arts, French, literacy/numeracy)	1:125 plus 0.5 for any size of K = 6 school (elementary) 1:175 (Grades 7 to Level III)  1 reading and early literacy program	Teacher Allocation Commission, 2007, p. 105, 109 & 142 L.  Sparkes & Williams, 2000, p. 63
	specialist per district	Sparkes & Williams, 2000, p. 05
Learning Resource Specialists (teacher- librarians)	1:500 (K to Level III)	Teacher Allocation Commission, 2007, p. 112
	1.50 for schools greater than 800 students 1.0 for schools between 400-799 1.0 for schools between 300-399 0.5 for schools between 200-299 0.5 for schools less than 200 (shared among 2 or more schools)	Andrew, 2003, p. 20
	1:1000	Sparkes & Williams, 2000, p. 63
Support for Parenting and Pregnant Teens	1:15 students as determined by incidence rate (2% of high school female population)	Andrew, 2003, p. 21

# **Appendix II:**

## Saskatchewan Provincial Staffing Ratios for

**2008/09** (based on 162,927 enrolment)

Position	2008/09 FTE	Ratio
Coordinators and Consultants	80	1:2037
Student Support Services Teachers	965	1:169
English as an Additional Language Teachers	74	1:2202
Education/Teacher Assistants	3,478	1:47
Psychologists	69	1:2361
Social Workers/Counsellors	220	1:741
Speech-Language Pathologists	104	1:1567
Occupational Therapists	19	1:8575
Physical Therapists	1	1: 162927
Addictions Counsellors		
Nurses	11	1:14812
Settlement Workers		

## **Appendix III:**

## **Canadian Staffing Profiles**

The chart below indicates staffing ratios and similar information from Canadian provinces, other than Saskatchewan. This information was obtained primarily through provincial Ministry of Education websites, and sources are indicated below. It should be noted that each province reports data differently with respect to staffing profiles which makes comparisons difficult and likely inaccurate.

Where possible staffing ratios were extrapolated from the total student enrolment as provided by the particular Ministry. This data should be interpreted cautiously as it may be inaccurate due to misinterpretation and/or limited data.

*		9 ************************************	
Province	Position	Staffing Information	Source
British Columbia	Education Assistants  Coordinators  Consultants	Number of classes with assigned EAs = 16,351 (Total classes = 68,357)  Ratios extrapolated from total enrolment of 587,819 for 2007/08  Total recorded as 123 (1:4779)  Total recorded as 47 (1:12,507)	BC Ministry Website: "Overview of Class Size and Composition in BC Public Schools 2008/09"  BC Ministry Website: "Summary of Key Information 2007/08"
	Testing and Assessment Professionals Helping Teachers	Total recorded as 93 (1:6320)  Total recorded as 84 (1:6998)	·
Alberta	Support Staff (examples include guidance counselors, librarians, ECS coordinators, work experience coordinators)	Total recorded as 1,071 (not FTEs)	Alb. Ministry Website: Alberta Teaching Certification Statistics
Manitoba	Clinicians	Total recorded as 5.5% of the total teaching force in 2007/08 (only head count of total educators was provided, which was 13,772; this equates to 757.46 clinicians)	Man. Ministry Website: "A Statistical Profile of Education in Manitoba Sept. 2003 to June 2008"
	Consultants	Total recorded as 1.6% of total teaching force in 2007/08 (only head count of total educators was provided, which was 13,772; this equates to 220.35 consultants)	

Ontario		Ratios extrapolated from total enrolment of 2,118,927 for 2005/06	Ont. Ministry Website: School Board Profiles, 2005/06
	Paraprofessionals (includes audio visual technicians, classroom computer technicians, education assistants, education resource technicians, interveners, laboratory technicians, oral interpreters, orientation and mobility personnel & transcribers)	Total recorded as 23,484.80 (1:90)	All the second s
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Consultants (not specified)	Total recorded as 1,086.80 (1:1950)	
	Other Professional Staff (includes attendance counselors, audiologists, childcare workers, guidance counselors, librarians, occupational therapists, physiotherapists, psychologists, psychometrists, social workers & speech language pathologists)	Total recorded as 3,825.70 (1:554)	
Nova Scotia	School level support	Ratios extrapolated from total enrolment of 135,303 for 2007/08  Total recorded as 4,764.2 (1:28)	NS Ministry Website: Statistical Summary, 2007/08
	positions (support positions assigned to schools or having school responsibilities)		
	System Consultants	Total recorded as 150 (1:902)	Teacher Allocation Commission, 2007, p. 40
	Reading Readiness Specialists	1:100 pupils in Grade One	Thorburn, 2005, p. 9
	Resource Teachers	1:25 students identified with special needs	

New Brunswick		Ratios extrapolated from total enrolment of 108,407 for 2008/09	NB Ministry Website: "Summary Statistics 2008/09"
	Guidance Counsellors	Total recorded as 158.6 (1:684)	
	Resource Teachers	Total recorded as 487.50 (1:222)	
	Other Special Needs	Total recorded as 19 (1:5706)	
	Psychologists &	Total recorded as 53.9 (1:2011)	
	School Learning	Total recorded as 94.5 (1:1147)	A second
	Specialists	Total recorded as 1.0 (1:108,407)	
	Social Workers	Total recorded as 2,390 (1:45)	(B) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S
	Teacher Assistants & Student Attendants	, , , , , , , , , , , , , , , , , , , ,	Ex 18 18 18 18 18 18 18 18 18 18 18 18 18
	Intervention	Total recorded as 127.8 (1:848)	
	Workers	1	
Prince Edward Island	Special Education/Resource	1:14 students identified with core (high) needs plus	PEI Ministry Website: Minister's Directive No.
	Teachers	1:500 every student enrolled; general (lower) needs	MD 2008-03
	Guidance	1:400	
	Counsellors	1:16 students as determined by incidence	
	Reading Recovery Teachers	rate (25% of Grade One population with reading difficulties)	
		1.115 students as determined by incidence	
	Support for Parenting and Pregnant Teens	rate (2% of high school female students)	
Newfoundland and Labrador		Ratios extrapolated from total enrolment of 72,084 for 2007/08	NFL Ministry Website, Education Statistics – Elementary-Secondary,
	Special Education Teachers	Total recorded as 552 (1:131)	2007-08
	Teachers for Severely Mentally Handicapped	Total recorded as 128 (1:563)	
	Teachers for Severely Physically Disabled	Total recorded as 172 (1:419)	

	Itinerant Teachers for the Hearing Impaired	Total recorded as 17 (1:4240)	
	Itinerant Teachers for the Visually Impaired	Total recorded as 10 (1:7208)	
	Guidance Counsellors	Total recorded as 173 (1:417)	
	Educational Psychologists	Total recorded as 37 (1:1948)	The state of the s
	Speech Pathologists	Total recorded as 45 (1:1602)	Teacher Allocation
	ESL Teachers	Total recorded as 6 (1:12,014)	Commission, 2007, p. 94; Thorburn, 2005, p. 3;
	Student Assistants	Total recorded as 647 (1:111)	Thornton, 2005, p. 3
	Non-categorical Special Education Teachers	7:1000 students (1:143)	Thornton, 2005, p. 3
	Categorical Special Education Teachers	0.50:1 - 2 students meeting criteria 0.75:3 students meeting criteria 1.00:4 - 6 students meeting criteria with	Thornton, 2005, p. 3; Thorburn, 2005, p. 4
		each additional multiple of 6 receiving 1 unit	Thornton, 2005, p. 3
	Counsellors	1:500	Thornton, 2005, p. 3
	Educational Psychologists	1:5000	
	Speech Language Pathologists	1:3500	
Northwest Territories		Information is based on provincial funding formulas for 2008/09	NWT Ministry website, "2008-2009 School
	School Community Counsellors	School FTE x 0.0032	Funding Framework: Finance and Administration Manual
	School Support Consultants	Full table provided on pg 4/8 of the report (depends on number of communities e.g., 1.5:400 students in 1 community and 2.25:400 students in 15 communities)	
	Inclusive School Consultants	Full table provided on pg 1/4 of the report (depends on number of communities e.g., 1:100 students in 1 community and 1.25:100 students in 8 communities)	
		Full table provided on pg 1/4 of the report (e.g., 1:150; 2:350, 3:550)	

	Program Support Teachers  Counsellors  Education  Assistants/Aborigina Language  Specialists	0.25 per community  0.5:0.5 - 25 FTE students 1:26 - 50 FTE students 1.5:51 - 75 FTE students 1.5 + (FTE - 75) x 0.009:more than 75 students	<u>-</u>
Yukon		Ratios extrapolated from total enrolment of 5104 for 2007/08	YK Ministry website, "Annual Report 2007-08 Academic Year"
and the second s	Remedial Tutors	Total recorded as 25.3 (1:202)	
	Education Assistants	Total recorded as 117.7 (1:43)	(4) (2) (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4

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