Specialist Service Standards

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Whakatauki

Ma te tauihu o tou waka
E u te waiora
Kia mahue atu
Nga mea whakahirahira
I roto i te koriporipo

May the prow of your canoe
Cleave the waters of life
And leave in its wake
Mighty deeds
About the Specialist Service Standards

The Specialist Service Standards have been developed by specialist service providers, parents, specialists, young people and educators through a process of collaboration and consultation. This process has taken place at all levels and through all the phases of the project, and has been a unique feature of the development of the standards.

The Specialist Service Standards have been developed through a process that reflects the principles of *Te Tiriti o Waitangi*:

- partnership
- protection, and
- participation.

They also align with the New Zealand Disability Strategy and support the concept of a non-disabling society.

The Specialist Service Standards are:

- intended to support children and young people to achieve better outcomes
- based on valued practices identified during the development process
- built around the Ministry of Education, Special Education, Service Pathway: Poutama
- practice standards for all specialists working with children and young people with special education needs.

The Specialist Service Standards comprise:

- Professional Practice Standards – standards that describe quality professional practice
- Management and Organisational Standards – management standards that support professional practice. Policy and procedure form a major component of the Management and Organisational Standards. The development of the policy and procedure may be a function of either governance or management, depending on the Specialist Service Provider.

The Specialist Service Standards apply to all specialist services funded by the Ministry of Education. The following specialists may provide services:

- speech-language therapists
- early intervention teachers
- psychologists
- special education advisors
- teachers with additional specialist tertiary qualifications in learning, vision or hearing (only includes teachers employed through the ORS funding)
- physiotherapists
- occupational therapists
- advisers on deaf children
- conductive education conductors
- sign interpreters
- orientation and mobility specialists
- registered music therapists
- Māori advisors
- Pasifika advisors.
Valued practices

Valued practices identified during the development process

Our way of working reflects the practices valued by parents, educators and specialists, in the development of the Specialist Service Standards Ministry of Education 2006.

Children and young people

We value all children and young people as learners and seek to maximise their potential and participation through:

- valuing their diversity
- valuing their contribution
- providing opportunities
- adapting the curriculum
- promoting a joyful quality of life
- recognising their place within the family.

Access, participation and learning

We recognise and value all children and young people:

- participating in our society
- accessing a range of environments
- being included in an early childhood service or school
- learning through engaging with the curriculum
- accessing support
- having their voices heard
- being who they are.

Parents, families and whānau

We value parents, families and whānau through:

- recognising their expertise and knowledge about their children and young people
- recognising and respecting their priorities and choices
- engaging them in decision-making
- recognising and respecting their differences
- recognising their role in their children and young people’s development and learning.

Specialists

We value specialists who:

- are open, honest and trustworthy
- communicate well, share their knowledge with all participants
- are sensitive, empathetic, respectful and responsive
- are consistent and reliable, yet also flexible
- have integrity and are ethical
- are reflective and accountable.

**Learning environments**

We value learning environments that:

- are socially, emotionally and intellectually stimulating
- have high expectations of children and young people
- adjust goals and expectations as children and young people develop and change
- provide for choices
- welcome and accept children and young people.

**Culture**

We recognise and value the role of culture in the lives of our children and young people, their families and whānau through:

- recognition of Māori as tangata whenua
- sensitivity and responsiveness to diverse cultures
- culturally appropriate, collaborative ways of working
- valuing of diverse communicative cultures e.g. Deaf Culture
- interventions that are culturally and contextually evidence-based for the New Zealand context.

**Services**

We value services that are:

- child and family-centered
- inclusive
- holistic and wrap-around
- collaborative and empowering
- strengths-based
- evidence-based
- ecological
- effective.
Service Pathway: Poutama

- Coordinated & collaborative
- Active participation of children
- Consistent with government strategies
- Evidence-based
- Engaged families/whānau
- Outcome focused
- Ecological approach
- Culturally affirming
- Preventative
- Inclusive

Children & Young People
Families/whānau
Education Providers
Communities
The Specialist Service Standards

Access

Service Expectation – Access

Families and whānau* and educators make informed choices using relevant up-to-date information about the range of services and service providers in their area.

* Denotes words in the Glossary

Professional Practice Standards

Specialists:

A 1 are familiar with information about the organisation and services for children and young people and their families and whānau
A 2 may facilitate access to service where a child or young person is likely to be eligible for such service (both from the Service Provider or services from other providers)
A 3 present information to the children and young people and their families and whānau, concerning services about their needs
A 4 have information that is detailed, comprehensive and current
A 5 have information that outlines clear criteria* for services
A 6 share that information in a way that is easily understood by families and whānau and other referral agencies, for example, health practitioners
A 7 share that information in a way that promotes participation of Māori and Pacific peoples
A 8 share that information in a way that gives options to assist decision-making
A 9 share that information in a way that is culturally appropriate*.

Specialists will:

A 10 be knowledgeable about the referral process, and follow the referral process as developed by management
A 11 work with management to ensure that referral procedures meet professional ethical guidelines.

Management and Organisational Standards

Management supports equity of access by ensuring relevant up-to-date information about the range of local specialist services* for children and young people with special education needs is available:

A 12 in culturally appropriate formats
A 13 to assist parents and caregivers to make informed choices, including choices about culturally relevant service pathways where available
A 14 in a comprehensive and current format with clear criteria for services and the availability of the services
A 15 in a format designed to be easily understood by families and whānau and other referral agencies
A 16 in a format that seeks to promote participation of Māori and Pacific peoples
A 17 in a person's first or preferred language, wherever possible.

Management supports equity of access by ensuring:
A 18 strong relationships and networks are built with Māori, including educational and other social service providers, community organisations, iwi and hapū through “kanohi ki te kanohi” or face-to-face communication
A 19 specialists over time have input into the development of information about the services available.

Management has referral policy or procedure in place to ensure:
A 20 specialists are knowledgeable about the referral procedure
A 21 there are clearly delegated responsibilities within the referral procedure
A 22 management and specialists follow the referral procedures
A 23 referral procedures are easy to action by families and whānau and other referral agencies
A 24 referral procedures are equitable, time-framed*, straightforward and respectful
A 25 informed consent for the referral has been obtained from the parent or legal guardian
A 26 referral procedures are culturally appropriate*
A 27 referrals are acknowledged
A 28 access to service may be facilitated where a child or young person is likely to be eligible for such service.

NB: In some service providers the access tasks are led by management.

**Behaviour Standards**

For comprehensive individual behaviour services, there is an emphasis on finding and objectively identifying the high-priority clients with challenging behaviour. These include:
- children not attending early childhood
- education facilities
- transient children or young people
- children or young people who transfer across sectors
- and across districts, and
- migrant and refugee children and young people.
Engagement

Service Expectation – Engagement

Children and young people, their families and whānau, and educators are welcomed and empowered* as partners in their relationships with specialists and specialist service providers.

* Denotes words in the Glossary

Professional Practice Standards

Specialists will support each child or young person to be valued and respected and their needs acknowledged.

This support means:

E 1 building positive relationships underpins service provision
E 2 initial informed consent* is obtained (informed consent is an ongoing process throughout service provision)
E 3 engagement is culturally appropriate
E 4 where the service provider is unable to provide a service, the reasons are clearly explained and possible options are discussed
E 5 collaborative* teams are developed for the child or young person, family and whānau and service provider roles and responsibilities are clarified, agreed and reviewed as necessary
E 6 if serious risk to the child, young person, family and whānau or service provider becomes apparent, risk management procedures are followed
E 7 all contacts with the child, young person, family or whānau are recorded and retained in the child or young person’s central file, which is updated regularly
E 8 ethnicity and iwi data is on file and cultural support is offered.

Management and Organisational Standards

Management has policy or procedure that ensures:

E 9 safe, respectful and responsive practice
E 10 suitably qualified staff
E 11 regular reviews of policy and procedure.

Management has policy or procedure in line with the Privacy Act (1993) that ensures:

E 12 the processes for collection, storage access and use of information are made clear to the child or young person and their family and whānau
E 13 specialists file all information in the child or young person’s central file ensuring that it is kept secure
E 14 specialists do not remove information about the child or young person from the provider’s premises without the knowledge of the child or young person and their family and whānau.
E 15 specialists do not share information about the child or young person with anyone who is unauthorised to have the information.
Where applicable, policy and/or procedure will need to comply with relevant legislation and codes of ethics. Policy or procedure includes those related to:

- **E 16** initial informed consent
- **E 17** ongoing informed consent
- **E 18** Storage, access and use of information consistent with the Privacy Act (1993) and Public Records Act (2005),
- **E 19** complaints
- **E 20** employment of qualified staff with current practicing certificates where appropriate
- **E 21** provision of culturally respectful and responsive services
- **E 22** collection and recording of ethnicity and iwi affiliation data
- **E 23** case management that enables the building and maintaining of positive relationships with families and whānau
- **E 24** collaborative planning and co-ordination of service
- **E 25** child protection and safety
- **E 26** occupational health and safety
- **E 27** transportation of children or young people and family or whānau members by specialist staff
- **E 28** provision of appropriate working spaces for specialists, including when working with children and young people and their families and whānau.

**NB:** It is recommended that management involve specialist staff in the development and review of the above policy and/or procedure.

**Behaviour Standards**

Referral processes are managed and monitored consistently in each district to ensure equity, quality, safety of clients and staff and timeliness of response. This means that children and young people accepted for service meet the service criteria and are the highest priority for service. This may involve screening of new referrals. Work on screening processes is being developed.
Assessment and Analysis

Service Expectation – Assessment and Analysis

All children and young people have ongoing, systematic and appropriate assessment* which provides a range of data to inform programme planning and decision-making.

* Denotes words in the Glossary

Professional Practice Standards

Specialists support assessment that provides an accurate picture of the child or young person and their progress in their learning environment.

This support means:

A&A 1  the assessment process can be articulated by the specialist and understood by the family and whānau and by the child or young person (where developmentally appropriate)
A&A 2  individual specialist assessments contribute to the ongoing, comprehensive overview of the child or young person
A&A 3  assessment processes are planned, purposeful, systematic, useful, ecological* and collaborative
A&A 4  assessment is underpinned by a strengths-based* perspective
A&A 5  assessment processes are culturally appropriate, and take into account the language background of the child or young person
A&A 6  assessment is undertaken across key settings and ensures a range of sources of information is used. This includes the child or young person’s history, observations, and information from the parents and educators, and the child or young person
A&A 7  assessments look at the child or young person’s functioning across curriculum areas
A&A 8  assessment processes are as unobtrusive as possible
A&A 9  the initial assessment is completed within a timeframe negotiated with the family and whānau and education provider
A&A 10  all assessments are recorded and retained in the child or young person’s central file
A&A 11  assessment is an ongoing process
A&A 12  assessment documentation is shared with the child or young person’s team
A&A 13  assessment reports are clear and concise
A&A 14  specialists use up-to-date assessment methodology and practice.

Specialists support the analysis and synthesis of assessment information and its use to inform all aspects of planning and decision making.

This support:

A&A 15  provides the framework for organising and evaluating the assessment information
A&A 16  takes into account all the data collected from the child or young person and their
team

A&A 17 identifies key factors and how they impact on the child or young person
A&A 18 considers the influence of people and settings on the child or young person
A&A 19 highlights both emerging* and independent skills
A&A 20 provides information on key strengths, interests and activities
A&A 21 is solutions-focused
A&A 22 is recorded
A&A 23 leads to shared hypotheses* that inform planning
A&A 24 takes into account cultural factors relevant to the child or young person and their family and whānau.

Management and Organisational Standards

Management has policy or procedure and contractual arrangements in place that mean:

A&A 25 specialists are skilled in the use of relevant assessment tools and practices
A&A 26 specialists competence is maintained and enhanced through induction
A&A 27 specialists competence is maintained and enhanced through professional development*
A&A 28 specialists competence is maintained and enhanced through performance management
A&A 29 specialists competence is maintained and enhanced through professional supervision and support
A&A 30 assessment tools are current, evidence-based*, appropriate for the New Zealand context and assessment purpose, and meet current practice standards for the relevant professional body
A&A 31 assessment practice is culturally responsive and competent
A&A 32 workload management procedures are documented.

Behaviour standards

Service risk

- Where there are serious safety risks an immediate response (within 24 hours) is required. This is documented in writing, dated and the action recorded against it.
- Where there are serious child care and protection concerns a referral to Child, Youth and Family is made. This is documented in writing, dated and the action recorded against it.
- Where there are serious mental health risks a referral to the child or adolescent community mental health service is required. This is documented in writing, dated and the action recorded against it.
- Where the child or young person poses a serious physical risk to themselves or others, a risk assessment is undertaken with an experienced colleague or supervisor within five working days.
• These risks must be communicated to management and to family and whānau where appropriate. Appropriate specialist support from other agencies may be required.
• An interim plan to manage risk is developed in partnership with families and whānau and providers, documented and distributed to all relevant parties, and implemented.

**Interim support**

Where no serious safety risks have been identified, when a child or young person has been accepted for service, an interim support plan to manage the referral behaviour/s must be developed.

• As part of service negotiation a written interim support plan will be provided within five working days of the initial meeting with the referrer.
• The plan will include identification of the behaviour/s of most concern, identification of the factors that might be triggering or influencing the behaviour/s, identification of what is working well and formulation of an interim hypothesis.
• The plan must clearly describe the agreed management strategies and responsibilities.
• The plan must be monitored and adapted as necessary whilst the comprehensive assessment is undertaken.

An initial written assessment report is completed within 30 working days.

**Assessment includes:**

• information about the child’s or young person’s developmental history and significant key life experiences,
• a review of the child’s or young person’s relevant records,
• information on current developmental functioning across relevant key domains and curriculum areas,
• a clear description of the target behaviours, including the contexts in which they occur and any patterns,
• predisposing factors, including identified medical, physical and mental health factors,
• antecedents and setting events,
• reinforcing consequences,
• preventative factors – resilience, strengths and support systems,
• information on the factors likely to affect positive change – key people (including the child or young person) and relevant systems,
• information on the child’s or young person’s ability to understand instructions and comply with them, and
• motivational factors for the child or young person.

**Analysis**

Assessment information is analysed using an appropriate model or form of analysis. This analysis provides a framework for organising and evaluating assessment information. It suggests possible linkages between factors, generates a shared working hypothesis, and assists in the identification of objective, achievable goals.
Analysis assists in clarifying:

- What is the magnitude of influence held by factors?
- Where to intervene?
- How to intervene?
- Which is the most amenable place to intervene first?
- Who you may need to seek advice from, e.g. cultural support?

Analysis includes identification of:

- the factors that are more amenable to change and the likely magnitude of their influence,
- mismatches between the child’s or young person’s needs, environment, systems and culture,
- the combined influence of all factors (medical, physical, mental health, antecedents, setting events, reinforcing consequences, resilience, strengths and support systems) on the target behaviour,
- possible functions of behaviour,
- priorities for intervention and the most appropriate contexts of where and when to intervene, with a rationale for this, and
- any barriers that may impact on amenability to change or ability to carry out change.

The analysis should be recorded clearly in writing and included in the initial assessment summary (within 30 working days). Any updates of the analysis are required to be recorded systematically in writing.
Programme planning

Service expectation – Programme planning

All children and young people have current documented individual programme plans that contain meaningful learning outcomes and promote achievement.

* Denotes words in the Glossary

Professional Practice Standards

Specialists support the planning of a child or young person’s individual programme across settings.

This support means the programme plan:

PP 1 will be developed through shared planning processes eg IEP, IP
PP 2 evolves out of the assessment and analysis and is referenced to the NZ Curriculum* or Te Marautanga o Aotearoa* for school students and Te Whāriki* for children in early childhood
PP 3 values and expresses family and whānau and/or the child or young person’s priorities
PP 4 supports culturally appropriate and affirming practice
PP 5 is based on a strengths-based framework and is underpinned by evidence-based practice
PP 6 identifies intended outcomes that are specific, measurable, achievable, relevant and reviewed six monthly (or more frequently if required)
PP 7 identifies realistic resources needed to support the programme
PP 8 identifies short and long term goals that take into account the child or young person’s age, interests, learning dispositions* and the family and whānau’s aspirations
PP 9 assists the child or young person to generalise learning, maintain changes and increase independence
PP 10 ensures that the programme is planned to be undertaken in the context of the child or young person’s daily activities
PP 11 supports all team members to have the necessary skills and knowledge to understand, articulate and successfully implement the programme
PP 12 uses non aversive* learning and behaviour management strategies
PP 13 identifies roles and responsibilities – who is to do what and by when and how progress will be recorded
PP 14 supports all team members to share responsibility for the outcomes
PP 15 is responsive to changes in the child or young person and the environment
PP 16 is retained in the child or young person’s central file.

Management and Organisational Standards

Management has policy or procedure that mean specialists support the development of programme plans for children or young people that are:

PP 17 current
PP 18  based on assessment and analysis information
PP 19  individualized
PP 20  outcomes-focused
PP 21  realistic and achievable
PP 22  responsive to the child, young person, family and whānau aspirations
PP 23  developed collaboratively by the child or young person’s team
PP 24  reviewed six-monthly (or more frequently if required) to identify progress towards, or achievement of identified outcomes
PP 25  reviewed to identify barriers
PP 26  clearly and accurately documented and maintained in the child or young person’s central file.

**Behaviour standards**

Programme planning may involve further information gathering and analysis or redefinition of issues may be sought. Changes to the plan are negotiated with all concerned. Potential risks are addressed.

Programme planning involves selecting and negotiating the best fitting intervention for the particular child or young person, their family and whānau situation and desired outcomes.

The intervention plan is clear, outcomes-focused and recorded in writing. Any updates are systematically recorded in writing within the child’s or young person’s individual plan.

Involves:

- motivating (positive and enriching) experiences that are meaningful to children and young people,
- identification of any special learning needs and strategies to promote the child’s or young person’s pro-social responses, sensitivity to social cues, and social skills,
- identification of any special learning needs and strategies to promote achievement,
- identification of strategies for defusing difficult situations, while withdrawing consequences that maintain problem behaviour,
- strategies that address matches or mismatches between the environments and the child or young person,
- strategies to promote maintenance and generalisation of skills over time and to other settings,
- a clearly defined monitoring system including who, how, when and where, and
- plans for any transitions to mitigate stress, maximise continuity of services, minimise interruptions in services and disruption.
Implementation

**Service expectation – Implementation**

All children and young people have regularly monitored individual programmes* that are implemented in the context of daily activities, are age-appropriate, motivating, and meaningful.

* Denotes words in the Glossary

**Professional Practice Standards**

Specialists support the implementation of the programme as stated in the agreed plan or service agreement.

This support means implementation:

I 1 is undertaken in the context of the child or young person’s daily activities
I 2 uses non-aversive learning and behaviour management strategies
I 3 respects the child or young person and maintains their dignity and wellbeing
I 4 supports all team members to have the necessary skills and knowledge to successfully implement the programme
I 5 ensures programme activities are age-appropriate, motivating and meaningful for the child or young person
I 6 includes regular referral to the programme plan
I 7 monitors, reviews and records progress regularly
I 8 adjusts goals and strategies accordingly, in consultation with relevant team members.

**Management and Organisational standards**

Management has policy or procedure to ensure implementation is:

I 9 timely
I 10 evidence-based
I 11 monitored
I 12 supported by specialists.

**Behaviour standards**

- The programme for the child or young person is implemented in accordance with the plan and across settings.
- Barriers to implementation and unintended consequences are identified and addressed as they arise.
- All team members (including the child or young person where developmentally appropriate) understand what is intended and know what to do.
- Any changes are negotiated and all team members are informed, particularly the child or young person, and family and whānau.
- Ongoing monitoring and feedback systems are implemented, which may include self-recording, peer feedback and adult observations.
- Programme integrity is monitored and managed to avoid drift.
- Measures of progress toward the child’s or young person’s identified targets and outcomes are systematically recorded in writing.
Review

Service Expectation – Review

Children and young people have programmes that are current and relevant.

* Denotes words in the Glossary

Professional Practice Standards

Specialists support reviews that are planned and recorded and undertaken at regular and agreed intervals relevant to the child or young person’s needs.

This support means reviews:

R 1 link programme goals with the ongoing monitoring information, and identify next learning steps
R 2 are a collaborative process involving the child or young person, where appropriate, and their team
R 3 identify barriers to achievement and work towards solutions
R 4 provide an opportunity to recognise strengths and celebrate success.

Management and Organisational Standards

Management has policy or procedure to ensure reviews are:

R 5 ongoing
R 6 at agreed intervals of no greater than six months
R 7 evidence-based using ongoing assessment information
R 8 documented and placed in the child or young person’s central file
R 9 collaborative
R 10 used to inform ongoing programming.

Behaviour standards

- Progress towards intended outcomes are recorded and reviewed regularly by the team around the child or young person.
- The programme is refined systematically to reflect the requirements of the child or young person in their current environments and to achieve positive change toward the intended outcomes.
- There may be a return to the assessment and planning phases and new goals may be set.
- At least termly, SE practitioners or identified team members come together to review the progress of the individual behaviour services for a particular child or young person against the targeted behaviours and intended outcomes.
- Where significant risks are identified for the child or young person the frequency of reviews needs to be matched to the level of concern.
- Recommended actions, risks and timeframes are recorded, dated and signed off.
Closure

Service expectation – Closure

Closure* processes are positive for children and young people their families and whānau. Achievements are noted and celebrated and transitions carefully planned.

* Denotes words in the Glossary

Professional Practice Standards

Transitions* should be planned, prepared for and documented.

This means:

C 1 planning is sensitive to the stress on the child or young person, their family and whānau that may be associated with transitions

C 2 transitions are agreed to and documented by the team

C 3 transition planning will involve members of the team into which the child or young person is transitioning

C 4 transitions are a collaborative process that is planned in advance and implemented within an agreed timeframe

C 5 a written summary is shared and discussed at transitions.

Closure should be planned, prepared for and documented.

This means:

C 6 closure plans are agreed to and documented by the team, of which the family and whānau are a critical part

C 7 where appropriate, the child or young person is included in the closure process

C 8 closure is a collaborative process that is planned in advance

C 9 information is provided regarding the process for seeking future support should it be needed

C 10 a written summary of progress made, support provided and strategies found to be effective is completed at closure

C 11 where closure results from the death of the child or young person the closure process will be sensitive to the needs of family and whānau, as well as to other members of the team.

Management and organisational standards

Management has policy or procedure to ensure transitions and closures:

C 12 are timely

C 13 are collaboratively planned and implemented

C 14 record the outcomes of the service provided

C 15 are documented and placed in the child or young person’s central file
C 16 let the child or young person and family and whānau know where the closed file is to be stored and the process for accessing copies of the information in the file, in accordance with the Privacy and Public Records Acts

C 17 provide information about the process for seeking future support

C 18 are sensitive to the needs of family and whānau in times of grief.

NB: In some service providers the transition tasks are led by management and/or teachers.

**Behaviour standards**

- Closure occurs when key outcomes have been achieved.
- Achievements are noted and suggestions for further support, maintenance and generalisation of gains, and possible future options are provided.
- Monitoring and follow-up before significant transitions occurs.
- A written plan with clear goals and support systems is developed before significant transitions, and implemented and monitored before closure.
- Recorded evaluation of the child's or young person's progress toward key outcomes occurs and consideration of the service provided informs practice.
- Transitions across districts are actively facilitated.
Follow-up and Reflection

_Service expectation – Follow-up and reflection_

Feedback and reflection informs future practice and the ongoing development of specialist services.

* Denotes words in the Glossary

**Professional Practice Standards**

Reflective practice is demonstrated throughout service provision.

This means:

F&R 1 regular review of service provision is occurring
F&R 2 barriers to effective service are taken to systematic review and/or supervision.

**Management and organisational standards**

Management has policy or procedure that ensures:

F&R 3 the outcome of the service is evaluated and informs future practice and the ongoing development of the service. This includes undertaking client surveys and the aggregation of review data on outcomes.
Monitoring and review systems

Ensuring the Specialist Service Standards provide nationally consistent quality specialist services requires quality assurance processes. This will be done through monitoring and review. Monitoring will consist of both internal and external processes.

**Internal monitoring**

Internal monitoring is an integral part of the quality assurance process. Internal monitoring enables managers of Specialist Service Providers funded through the Ministry of Education, to assess the quality of the services they deliver and identify areas for further development. This quality assurance cycle is an ongoing process of monitoring, planning, and implementation. Providers of specialist services need to ensure they have a documented process of internal systematic review of their services.

The self-review process will provide data to:

- determine the effectiveness of practices, policies and procedures in making a difference for children and young people with special education needs,
- identify barriers to effective service provision,
- inform future practices, policies and procedures to achieve ongoing quality improvement, and
- inform the external monitoring process.

**External monitoring**

External monitoring provides assurance for the Ministry of Education, as funder, that there is consistent quality across all specialist education services, and the services are provided meet the Specialist Service Standards.

Between February 2010 and July 2013, all 77 Specialist Service Providers will have taken part in the first cycle of external reviews. Lead Reviewers from the Ministry of Education lead the reviews along with teams of reviewers who represent the specialist service providers.

During this first cycle of reviews, advice has been sought from specialist service providers about both the Standards and the current review process. Using this material, a reference group and project team, representative of providers, has developed recommendations about how to refine the existing review process and what amendments need to be made to the Standards.

The revised review process will:

- focus on outcomes for children and young people
- continue to focus on the self review practices providers use to improve and enhance their provision of specialist services.
- continue to be collaborative and transparent in its approach
- retain rigour in the collection and analysis of review information.

**Review of the Specialist Service Standards**

Small changes to the Specialist Service Standards (see above) have been made at the end of the first cycle of reviews, as the result of feedback from specialist service providers and reviewers.
From the feedback received, and the results of the first cycle of reviews, it would appear that the Standards are relevant and are able to be met by all providers.

Following each three yearly external review cycle it is recommended both the Specialist Service Standards and the review process continue to be reviewed.
Glossary

- **Analysis** involves the critical examination of information to lead to understanding and insight. (See synthesis.)
- **Assessment** is the process of obtaining and interpreting information on children’s learning and development by probing, observing, recording, and documenting what children do and how they do it. It includes evaluation of the cultural, social and physical contexts within which learning and development occur. Assessment is cumulative and involves multiple sources of information. Assessment methods must have ecological validity.
- **Closure** occurs for the specialist service provider when the key outcomes of the intervention for the child or young person have been achieved or when there is a transition from one learning environment or team to another. This step of the service pathway involves discussion with the team that supports the child or young person, and for any significant transitions, the new team that will be involved. For transitions, such as from an early childhood education service to school, a plan is developed, written and implemented prior to service closure.
- **Collaboration** means that there is equal partnership between the child or young person, their family, members of the early childhood education or school team and the wider group of specialist practitioners. They value and respect each other’s contribution. They meet together to jointly plan, problem solve, review progress and celebrate success.
- **Criteria** are documented sets of requirements for accessing a service, for example, the Ongoing Resourcing Schemes (ORS) have a published set of criteria.
- **Culture** is a shared system of relationships among people from which they assign meaning to their actions. Metge (1990) describes culture as a system of symbols and meanings, in terms of which a particular group of people make sense of their worlds, communicate with each other, and plan and live their lives. Different cultures have different child-rearing patterns, beliefs, and traditions, and may place value on different knowledge, skills and attitudes.
- **Culturally appropriate practices** are ways of relating to people that promote respect for cultural diversity. Culturally appropriate practice supports a child or young person and their family and whānau’s place and potential within their cultural context. Cultural diversity is not limited to people from other ethnic backgrounds and includes, for example, the Deaf Culture.
- **Disability** is a concept that may be socially constructed in language, attitudes and ideas, and socially created in policy and practice, in ways that either oppress and segregate, or support and include individuals for whom there are barriers to participation.
- **Early Intervention** refers in this document to specialist education services in the early years from birth until a child starts school. It is based on the premise that interventions that begin as early as possible after a need has been identified have the greatest benefits for the child or young person.
- **An ecological approach** to assessment recognises that context, which includes complex social systems and surroundings, impacts on abilities and needs. Ecological assessment includes the study of a child or young person’s physical environment and their interactions with the people in close contact with them, and recognises that interventions involve changes in the entire social system. Ecological approaches emphasise relationships between family, educational and specialist settings. Assessing children in naturally
occurring environments, rather than clinical settings, reflects ecological principles.

- **Emerging skills** are those skills that a child or young person is able to complete partially when they have not yet mastered the whole of the skill. Recognition of emerging skills, during assessment of a child or young person, is useful when planning the next steps to be learned.

- **Empowerment/Whakamana** is one of the four broad principles around which Te Whāriki aims and goals are woven. Empowerment/whakamana contributes towards children and young people, families and whānau becoming independent and able to direct their own lives.

- **Evaluation** is the process of using assessment information and other data to form a judgement about the quality and effectiveness of an individual programme to make decisions about change. It focuses on a child or young person’s progress rather than comparisons with other children or the use of checklists or inventories.

- **Evidence-based approach** incorporates professional knowledge and judgement, children and young people and their families and whānau’s participation and relevant and current research.

- **The term families and whānau** includes the concept of aiga (the Samoan extended family and its support network) as well as similar concepts used by other cultures. In the case of Māori and Pasifika families, specialists may work with grandparents, aunts, uncles, caregivers or brothers and sisters as well as with the child’s parents.

- **Family-focused services** see the child or young person as inseparable from their family. They emphasise empowerment, focusing on family members and the strength of their experiences, to encourage and support the progress of the child or young person.

- **Holistic**: the concept of a child as an integrated being, with all dimensions of their learning and development interconnected and interrelated.

- **A hypothesis** is a set of assumptions regarding the nature of a problem which serves as a tentative explanation.

- **Inclusion** in education is about valuing all students and staff. It involves supporting all children and young people to participate in the cultures, curricula and communities of the early childhood centre or local school. Barriers to learning and participation for all children, irrespective of their ethnicity, culture, disability or any other factor, are actively reduced, so that children feel a sense of belonging and community in their educational context.

- **An individualised plan** is developed and written by a team which will include the child or young person wherever appropriate, their family and whānau, teachers, and relevant specialists. It includes short-and long-term goals that reflect and accommodate the assessed needs and abilities of the child or young person, and expected learning outcomes.

- **An individualised programme** includes strategies for fully including the child or young person in their regular programme, and the specialist services, adapted materials and instructional or assessment methods, required to meet the learning outcomes established in the individualised plan.

- **Informed consent** is an ongoing process in which a person is able to provide consent for specialist activities. Informed consent implies: having enough information to make a decision, the information is understood, the person is able to make a choice, is competent to decide, and is not forced or pushed into deciding (coercion or pressure). A person needs to know what the
choices are, when/how the action is going to happen and what the anticipated outcomes are.

- **Learning Dispositions** are behaviours that are identified by researchers as central to children becoming competent and confident learners and communicators. Learning dispositions acknowledge the significance of children’s beliefs about themselves and their disposition to learn, and the skills and knowledge associated with that. Dispositions associated with Te Whāriki, and used in assessment, include curiosity, trust, perseverance, confidence, and responsibility for fairness. Dispositions integrate and reflect the whole child.

- **A Legal guardian** is the person with the legal right and responsibility to provide for and make decisions about the care (including education and health) of a child or young person. This definition includes the child or young person’s biological or adoptive parents, testamentary guardian, or court-appointed guardian.

- **The New Zealand Curriculum** sets out the Learning Areas and Key Competencies that underpin the curriculum for children and young people in the school sector. It is the official policy for teaching, learning and assessment in New Zealand schools.

- **Non-aversive interventions** usually positively reinforce desired behaviours. Non-aversive interventions do not use real or imagined painful or aversive consequences following behaviour, to reduce the frequency or probability of it recurring.

- **Professional development** describes training courses, readings, and other sources of information that specialists, managers and teachers access to improve their performance or the operation of their service.

- **The Service Pathway** describes the steps or stages of specialist service provision. Progress through the Service Pathway is not necessarily a linear, sequential, or cumulative process. A child or young person, and their family and whānau, may be involved at different times and in different ways with specialist teams.

- **SMART Goals** are goals set for a child or young person that are specific, measurable, achievable, relevant and timely.

- **Specialist Services** are those specialist services funded by the Ministry of Education.

- **Strengths-based assessment and programme planning** focuses on the strengths of the individual, the team for the individual and the environment – the positive foundations which can be built upon to support and maintain change.

- **Synthesis follows analysis**. Synthesis is the process of drawing together the discrete threads of assessment to form a coherent whole. Analysing and synthesising assessment information identifies current skills, key strengths and leads to a shared working hypothesis and identifiable and achievable goals for a child or young person’s learning.

- **Te Marautanga o Aotearoa** is the national curriculum for Māori medium schools.

- **Te Whāriki** is the national curriculum for early childhood education. In Te Whāriki learning is an integrated experience. Skills are interactively synthesised, and dispositions to learn are developed and woven together. The principles, strands, goals and learning outcomes set Te Whāriki curriculum framework. Te Korowai is the guiding principles document for Ngā Kohanga Reo.
- **Tangata whenua** means ‘people of the land’. Tangata whenua are the indigenous people of New Zealand.

- **Teams** are made up of parents (or caregivers in the parental role), families and whānau, educators, specialists and others whose knowledge, expertise, experience and training are required to effectively plan for and support a particular child or young person. Teams may include professionals from other sectors, such as health.

- **Timely/timeframes** Different services may have different timeframes. However, there are good practices that determine when things should happen, e.g. referrals should be acknowledged promptly, an initial assessment timeframe should be negotiated, monitoring and reviewing of progress should happen regularly.

- **Transitions** occur when the child or young person changes setting or experiences a change in circumstances. Transitions may be major ones for the child or young person, such as the change from home to an early childhood education service, or from school to vocational and support services. For many children changes of teacher or classroom may also require careful planning and support.