

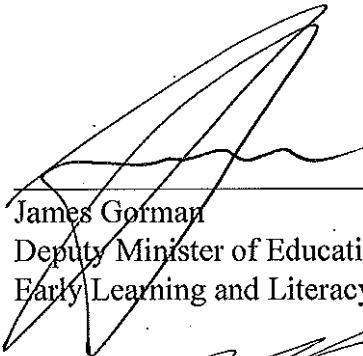
## INTER-MINISTRY PROTOCOLS

---

The Government is committed to making British Columbia the best-educated, most literate jurisdiction on the continent and to promoting the optimal development, health, well being, and achievement of all children and youth across the province.

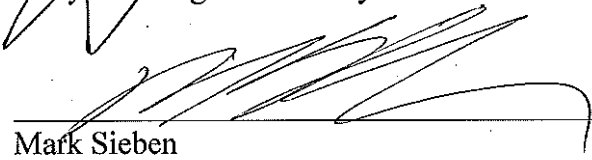
The Ministries of Children and Family Development, Education, Healthy Living and Sport, Health Services, and Public Safety and Solicitor General have developed the following protocols consistent with this commitment. The purpose of these protocols is to guide the coordination and delivery of support services to school-aged children across British Columbia.

These protocols replace the *INTER-MINISTERIAL PROTOCOLS FOR THE PROVISION OF SUPPORT SERVICES TO SCHOOLS* (1989). The attached protocols are hereby approved and agreed to this day of \_\_\_\_.



---

James Gorman  
Deputy Minister of Education and Minister Responsible for  
Early Learning and Literacy



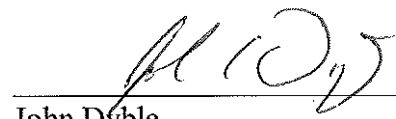
---

Mark Sieben  
Chief Operating Officer, Ministry of Children and Family Development




---

Grant Main  
Deputy Minister of Healthy Living and Sport



---

John Dyble  
Deputy Minister of Health Services



---

David Morhart  
Deputy Solicitor General

## TABLE OF CONTENTS

---

<b><i>INTER-MINISTERIAL PROTOCOLS FOR THE PROVISION OF SUPPORT SERVICES TO SCHOOL-AGED CHILDREN</i></b> .....	<b>1</b>
<b><i>Background</i></b> .....	<b>1</b>
<b><i>Purpose</i></b> .....	<b>1</b>
<b><i>Scope</i></b> .....	<b>1</b>
<b><i>Review</i></b> .....	<b>1</b>
<b><i>Audiological support services</i></b> .....	<b>4</b>
<b><i>General School Health Services</i></b> .....	<b>11</b>
<b><i>School Environment and Health Inspection of Schools</i></b> .....	<b>16</b>
<b><i>Nursing Support Services for children and youth with Special Health Care Needs</i></b> .....	<b>19</b>
<b><i>Speech-Language Pathology Services</i></b> .....	<b>23</b>
<b><i>Educational Programs in Youth Custody Services Centres, the Maples Adolescent Treatment Centre and Court-Ordered Residential Attendance Programs</i></b> .....	<b>28</b>

## INTER-MINISTERIAL PROTOCOLS FOR THE PROVISION OF SUPPORT SERVICES TO SCHOOL-AGED CHILDREN

---

### *BACKGROUND*

---

Services for school-aged children are supported and/or funded by the Ministries of Children and Family Development, Education, Healthy Living and Sport, Health Services and Public Safety and Solicitor General, but are delivered through the Ministry of Children and Family Development regions, Boards of Education and independent school authorities, Health Authorities or by local agencies. At times school-aged children receive services that cross the jurisdiction of more than one Ministry or Ministry-funded service. In these circumstances inter-ministry protocols are required so that services are provided in an accessible, understandable and co-ordinated manner.

### *PURPOSE*

---

These inter-ministry protocols are intended to support and guide the co-ordinated delivery of effective-services to school-aged children by:

- establishing an agreed-upon range of services;
- clarifying the roles and responsibilities;
- establishing a process for the regular review of the protocols; and
- identifying a dispute resolution process.

### *SCOPE*

---

The protocols apply to services, funded and/or delivered by the Government of British Columbia, that support school-aged children at school or in their homes and communities. For the purposes of the protocols, school-aged children are defined in the School Act (Part 1 section 1 (1) and Part 2 section 3 (1) and the *Independent School Act* (Section 1 subsection 2).

### *REVIEW*

---

Each protocol will be reviewed every five years. Any signatory to these protocols can ask for a review of a protocol before the end of the five year term.

## *PRINCIPLES*

---

The following principles have guided the development of the protocols. They are also intended to assist in their implementation, review and resolution of disagreements between Ministries and/or Ministry funded service providers.

### **1. Child Centred Approach**

Support services will be co-ordinated to respond to the strengths and needs of children and youth. Children and youth will be involved in decision making consistent with their developmental abilities.

### **2. Focus on Learning, Health and Development**

Support services will be planned and delivered to optimize the learning, health and development of children and youth.

Services will promote health, be preventative or be provided early in order to increase the likelihood of positive outcomes for children and youth.

Support services will promote inclusion so children and youth with special needs can be fully participating members of their schools and communities.

### **3. Family Focused Approach**

Support services will recognize the key role parents/guardians and families have in optimizing learning, health and development of their children. They will be involved in planning and decision making for their children.

### **4. Respect for Diversity**

Support services will be planned and delivered in a manner that respects community diversity. (e.g., race, ethnicity, gender, age, ability, culture, ancestry, language, religious beliefs, sexual orientation or socio-economic background).

### **5. Co-ordinated and Effective**

Support services, including transitions, will be planned collaboratively and delivered in an integrated manner.

Support services will be planned and implemented based on evidence (knowledge and research).

### **6. Commitment to Collaboration**

Protocol partners or service providers will strive to be collaborative in their provision of services to children and youth.

## **7. Dispute Resolution**

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of these protocols. In accordance with the principles that underpin these protocols, dispute resolution will take place as close as possible to the community where the services are being provided.

Rarely will disagreements need to be raised beyond those outlined in the local agreements. Should dispute resolution become necessary at a regional level, a dispute resolution framework is included within each protocol. The framework is based on the principles of administrative fairness and due process.

---

## PROTOCOL AGREEMENT

---

### **BETWEEN:**

The Ministry of Education, the Ministry of Children and Family Development and the Ministries of Health Services and Healthy Living and Sport (through Health Authorities).

### **REGARDING THE FOLLOWING SERVICES:**

#### *AUDIOLOGICAL SUPPORT SERVICES*

---

##### **I. Background:**

Hearing loss can create a communication barrier and present obstacles to children's opportunities to achieve the goals of education. Comprehensive planning is needed to ensure that children entering school with a pre-identified hearing loss are seamlessly supported from a technical and educational perspective to attain educational goals. While identification of hearing loss is preferable before a child reaches school age, it is imperative that a well integrated approach be in place for identification, assessment, monitoring, and intervention services for school-aged children with hearing loss. Moreover, a well integrated approach to support services for school-aged children requires effective cross-ministry and cross-agency communications systems and cooperation to be in place.

The Ministry of Education, the Ministry of Health Services, the Ministry of Healthy Living and Sport, the Ministry of Children and Family Development, Boards of Education/participating independent school authorities, schools, Health Authorities and parents work collaboratively to raise awareness about the causes and the implications of hearing loss. They work collaboratively to develop and implement support services and education programs that address the social and academic needs of school-aged children with hearing loss. Key service providers involved may include, but are not limited to, audiologists, teachers of the deaf and hard of hearing, speech-language pathologists, specially trained teachers' assistants, and sign-language interpreters.

Equipment and services provided in the home, community, and school need to be co-ordinated to facilitate a seamless service for school-aged children and their families. In regions, the process for how school district/independent school authorities and health authority staff work together to provide audiology services should be collaboratively developed.

'Audiology services' covered in this protocol includes identification, assessment/diagnostic, monitoring, and intervention services where cross-ministry coordination, communication and collaboration are required to ensure a quality service to school-aged children.

As of April 1, 2010, all audiologists must be registered with the *College of Speech and Hearing Professionals in British Columbia*, and will be expected to adhere to their roles and responsibilities as defined in the *Speech and Hearing Health Professions Regulation 413/2008* and the College bylaws.

## **II. Children Served:**

School-aged children who are deaf or hard of hearing enrolled in and attending:

- public schools;
- participating Group 1 and 2 independent school authorities.

## **III. Services Provided:**

Boards of Education, participating independent school authorities, Health Authorities, and the Ministry of Children and Family Development and where applicable, Delegated Aboriginal Child and Family Services Agencies will co-ordinate the following services:

- a regional process for sharing of information and coordination of audiology services that is collaboratively developed, and includes an agreement with respect to assistive listening equipment;
- raise the awareness in all school-aged children and their families about hearing health and healthy lifestyle choices to prevent hearing loss;
- audiology assessment by an audiologist for school-aged children identified as having, or suspected of having, a hearing loss;
- provision of information from audiology assessments to inform the planning of education programs or services in compliance with the *Freedom of Information and Protection of Privacy Act*;
- access for all school-aged children with an educationally significant hearing loss to an education program that addresses their needs;
- access for all school-aged children with an educationally significant hearing loss to amplification and assistive listening equipment as needed;
- training for school personnel in the appropriate use and application of hearing aids and assistive listening equipment; and
- coordination of equipment and services during periods of transition (into school, between schools, and into adult services).

#### **IV. Obligations of each Ministry:**

##### ***The Ministry of Education***

- The Ministry of Education provides services through Boards of Education, participating independent school authorities, and the Provincial Resource Program-Auditory Outreach;
- The Ministry of Education provides supplementary special needs funding and delegates responsibility to Boards of Education/participating independent school authorities for special education supports for school-aged children enrolled in their schools (students) who have educationally significant hearing loss<sup>1</sup>;
- To be eligible for supplemental funding for students who are deaf or hard of hearing, Boards of Education/participating independent school authorities must provide the services of qualified teachers of the deaf and hard of hearing, as outlined in the *Special Education Services: A Manual of Policies, Procedures and Guidelines*;
- The Ministry of Education requires Boards of Education/participating independent school authorities to refer students who may have an educationally significant hearing loss to medical practitioners or audiologists for a needs assessment to determine if they require assistive listening equipment;
- Boards of Education/participating independent school authorities must design an Individual Education Plan (IEP) for students with educationally significant hearing loss as soon as possible after the student is identified as being a student with special needs by the board/participating independent school authority, and must provide learning activities in accordance with the IEP;
- The Ministry of Education provides funding for the acquisition and maintenance of a set list of assistive listening equipment in schools to support students with educationally significant hearing loss in cases where the health authority audiologist's assessment and recommendations confirm the need for equipment. Procedures for this provision are provided in Ministry of Education *Special Education Services: A Manual of Policies, Procedures and Guidelines*. Agreements on how equipment is delivered and fitted will be developed regionally;
- The Ministry of Education will maintain the set list of assistive listening equipment and make this set list available to the health authority audiologist for selection;

---

<sup>1</sup> For the purposes of this protocol, 'educationally significant hearing loss' is defined in the Ministry of Education [\*Special Education Services: A Manual of Policies, Procedures and Guidelines\*](#)

- The *Manual of Policies, Procedures and Guidelines* is kept current, outlining the process for access, maintenance, returns, and liability for assistive listening equipment (often referred to as auditory training equipment);
- Boards of Education/participating independent school authorities will work collaboratively with health authority personnel to support school-aged children with hearing loss; and
- Boards of Education/participating independent school authorities will follow the best practices of the Board of Hearing Aid Dealers for the monitoring of remote microphone hearing assistance technology (link pending).

***The Ministry of Health Services and the Ministry of Healthy Living and Sport***

- The Ministry of Health Services and Ministry of Healthy Living and Sport provide funding and/or policy direction to Health Authorities and delegates responsibility to the Health Authorities for audiology services. Health Authorities will:
  - provide audiology assessment and diagnostic services;
  - provide audiological assessment information as appropriate to designated board of education/participating independent school authority personnel for use in planning support services in accordance with the *Freedom of Information and Protection of Privacy Act*;
  - provide hearing aid selection, fitting, verification, and monitoring services;
  - select assistive listening equipment from a set list of available equipment which is established and maintained by the Ministry of Education;
  - provide assessments, co-ordinate interdisciplinary follow up and cochlear implants through the BC Cochlear Implant program for children requiring and receiving cochlear implants;
  - work collaboratively with school personnel to support school-aged children with hearing loss;
  - work collaboratively with Ministry of Education designated personnel to develop and implement regional or local agreements with Boards of Education/participating independent school authorities with respect to assistive listening equipment; and
  - provide information to school communities regarding the prevention of hearing loss and hearing health promotion.

### ***The Ministry of Children and Family Development***

The Ministry of Children and Family Development (MCFD) provides the following through either the Children in Care Medical Benefits Program, the At Home Program or Provincial Services for the Deaf and Hard of Hearing:

#### *Children in Care Medical Benefits Program and At Home Program:*

- personal amplification devices, based on the results of an audiological assessment, for children in the care of a director under the *Child, Family and Community Services Act*; and for children and youth assessed as eligible for At Home Program Medical Benefits.

#### *Provincial Services for the Deaf and Hard of Hearing:*

- support services for families of school-aged children who are deaf, hard of hearing, or deafblind;
- transition planning for children and youth who are deaf, hard of hearing, or deafblind;
- contract early intervention services for children and youth who are deaf, hard of hearing, or deafblind to support their transition to school;
- residential services for children who must live away from home in order to attend the British Columbia Provincial School for the Deaf;
- public education, information and referral regarding the development of children and youth who are deaf, hard of hearing, or deafblind; and
- information and referral to other services such as mental health, access services and social worker supports.

### **V. Dispute Resolution:**

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of this protocol.

At the regional level, the parties to this protocol should have a process in place to guide resolving conflicts that may occur when providing services for children and families in an integrated manner as articulated in this protocol. The conflict resolution process will adhere to the principle of *Commitment to Collaboration* described in section 6 (p.3) and to the principles of administrative fairness<sup>2</sup> including:

- those affected by a decision should be involved in the making of that decision;
- those affected by a decision should be informed and consulted in a meaningful way and have their point of view listened to and considered; and
- decisions should be made within a timely, fair, and consistent process and be based on relevant facts and without bias.

The regional conflict resolution processes will clearly identify:

- the roles and positions of individuals within each organization who have responsibility for resolving conflicts;
- the steps and stages of the process from informal to formal;
- the timeframes for completing the process; and
- what parties should do if they cannot reach a resolution.

### **Supporting Information:**

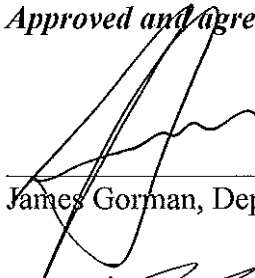
- *Freedom of Information and Protection of Privacy Act*  
[http://www.qp.gov.bc.ca/statreg/stat/f/96165\\_00.htm](http://www.qp.gov.bc.ca/statreg/stat/f/96165_00.htm)
- *School Act*  
[http://www.qp.gov.bc.ca/statreg/stat/S/96412\\_00.htm](http://www.qp.gov.bc.ca/statreg/stat/S/96412_00.htm)
- Ministerial Order 149/89. Support Services for Schools Order.  
<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m149-89.pdf>
- Special Education Services: A Manual of Policies, Procedures and Guidelines  
<http://www.bced.gov.bc.ca/specialed/ppandg.htm>
- College of Speech and Hearing Professionals in British Columbia  
[http://www.health.gov.bc.ca/leg/notice/speech\\_and\\_hearing\\_health\\_professionals.html](http://www.health.gov.bc.ca/leg/notice/speech_and_hearing_health_professionals.html)
- Board of Hearing Aid Dealers (until March 31, 2010)  
[http://www.health.gov.bc.ca/leg/notice/board\\_of\\_hearing.html](http://www.health.gov.bc.ca/leg/notice/board_of_hearing.html)

---

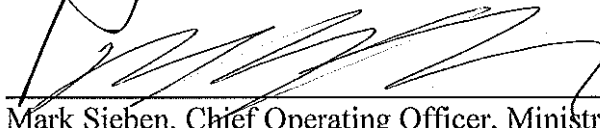
<sup>2</sup> These principles are included in the British Columbia Ombudsperson fairness checklist. A template for dispute resolution is available on the Ministry of Education website – <http://www.bced.gov.bc.ca/specialed/>

- College of Speech and Hearing Professionals of BC  
<http://www.cshhpbcc.org>
- Speech and Hearing Health Professionals Regulation 418/2008  
[www.health.gov.bc.ca/leg/notice/speech\\_and\\_hearing\\_health\\_professionals.html](http://www.health.gov.bc.ca/leg/notice/speech_and_hearing_health_professionals.html)
- Child, Family and Community Service Act  
[http://www.qp.gov.bc.ca/statreg/stat/A/96006\\_01.htm](http://www.qp.gov.bc.ca/statreg/stat/A/96006_01.htm)

Approved and agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.



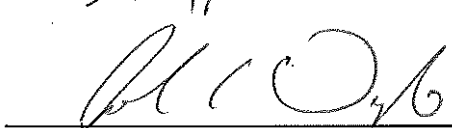
James Gorman, Deputy Minister of Education and Early Learning and Literacy



Mark Sieben, Chief Operating Officer, Ministry of Children and Family Development



Grant Main, Deputy Minister of Healthy Living and Sport



John Dyble, Deputy Minister of Health Services

---

## PROTOCOL AGREEMENT

---

### **BETWEEN:**

The Ministry of Education, and the Ministries of Health Services and Healthy Living and Sport (through Health Authorities).

### **REGARDING THE FOLLOWING SERVICES:**

#### *GENERAL SCHOOL HEALTH SERVICES*

---

### **I. Background:**

Educators and all service providers recognize the strong relationship between a student's health and learning. Schools and qualified health professionals have a collective responsibility for promoting the healthy growth and development, and academic success of school-aged children.

To this end, it is appropriate practice for educators and health professionals to collaborate annually in developing a comprehensive plan for health services for students. Such a plan should include:

- ongoing commitment to ensuring an environment that promotes health and prevents disease or injury;
- identification of school health needs and priorities;
- delivery of services to meet those needs; and
- identification and support of students with health concerns.

Boards of Education and participating independent school authorities will work collaboratively with local health professionals in identifying the specific services to be delivered and included in the annual plan for delivery of health services.

### **II. Children Served:**

School-aged children enrolled in and attending:

- public schools;
- participating Group 1 and Group 2 independent school authorities;
- band schools on First Nations Reserves (at the discretion of band school authorities)

Children and youth educated via home schooling are registered at local schools and informed of access to relevant school health services (e.g. school immunization programs).

### **III. Services Provided:**

Boards of Education, participating independent school authorities, and Health Authorities will co-ordinate the following services:

- provision of health promotion and prevention services in schools to foster healthy school environments;
- documentation of relevant health information in student permanent records, in collaboration with parents/guardians, and consistent with privacy requirements (*Freedom Of Information and Protection of Privacy Act (FOIPPA)*; *School Act*, section 79; *Independent School Regulation*, section 9; *Ministerial Order 14/91 Student Records Disclosure Order*);
- identification of children and youth with life-threatening medical conditions and establishment of safe plans of care;
- consultation with parents or guardians to facilitate the referral of children and youth to health services in the community;
- protection of school communities from communicable diseases through timely notification of identified reportable disease in students or school personnel, and delivery of the provincial Immunization Program for school-aged children (*Public Health Act, Health Act Communicable Disease Regulation*);
- implementation of directives or advice from the Medical Health Officer (*School Act*, sections 90, 91, and 92); and
- screening and/or referral services to address identified health issues in children and youth as early as possible when difficulties could interfere with learning.

### **IV. Obligations of each Ministry:**

#### ***The Ministry of Education***

The Ministry of Education, through Boards of Education and participating independent school authorities will:

- inform parents/guardians of registered students about the provision of school health services including relevant privacy and information sharing in accordance with FOIPPA;
- provide and maintain a designated, private space in each school that can serve as a medical room for Public Health Nurses or other qualified health personnel to carry out their duties;
- establish and maintain policies, procedures, and staff training in order to ensure the safety of children and youth at risk of anaphylaxis and other life-threatening medical

conditions (Anaphylaxis Protection Order (232/07 amended by M234/09), School Act, section 88);

- in collaboration with parents/guardians and health professionals, co-ordinate and facilitate the implementation, maintenance, and regular review of safe plans of care for children and youth with life-threatening medical conditions;
- provide to health professionals access to the health section of the student's Permanent Record in the event of a communicable disease outbreak, and for the provision of school health services such as recording or determining immunization status, life-threatening medical conditions, or other significant health problems (*School Act, section 79; Independent School Regulation, section 9: Ministerial Order 14/91 Student Records Disclosure Order*); and
- monitor the implementation of required health curricula and initiatives.

***The Ministry of Health Services and the Ministry of Healthy Living and Sport***

The Ministry of Health Services and Ministry of Healthy Living and Sport provide funding and/or policy direction to Health Authorities and delegates responsibility to the Health Authorities for general school health services. Health Authorities will:

- provide health professionals to carry out school health promotion and prevention activities, and to support school personnel, parents and students in the establishment of safe plans of care for children and youth with life-threatening medical conditions;
- provide student health information to appropriate school personnel with the consent of the parent/guardian/student if the information is needed for maintenance of the health of a child or youth or for management of health issues that may interfere with a student's learning;
- facilitate referral, transitions and linkages to Nursing Support Services for children and youth with special health care needs, to support healthy participation and inclusion of these children in the school setting. If children and youth no longer require Nursing Support Services, collaborate with parent/guardian and school personnel to ensure development of safe plans of care at school;
- provide health screening programs for children and youth;
- collaborate with school personnel, the British Columbia Centre for Disease Control and other partners to provide policies, standards and guidelines for the investigation of communicable disease outbreaks; and
- provide protection to school-aged children and youth against preventable communicable disease through delivery of the Provincial Immunization Program.

## **V. Dispute Resolution:**

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of this protocol.

At the regional level, the parties to this protocol should have a process in place to guide resolving conflicts that may occur when providing services for children and families in an integrated manner as articulated in this protocol. The conflict resolution process will adhere to the principle of *Commitment to Collaboration* described in section 6 (p.3) and to the principles of administrative fairness<sup>1</sup> including:

- those affected by a decision should be involved in the making of that decision;
- those affected by a decision should be informed and consulted in a meaningful way and have their point of view listened to and considered; and
- decisions should be made within a timely, fair, and consistent process and be based on relevant facts and without bias.

The regional conflict resolution processes will clearly identify:

- the roles and positions of individuals within each organization who have responsibility for resolving conflicts;
- the steps and stages of the process from informal to formal;
- the timeframes for completing the process; and
- what parties should do if they cannot reach a resolution.

### **Supporting Information:**

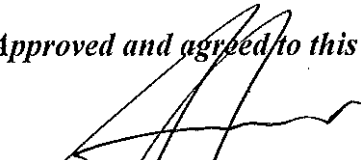
- School Act  
[http://www.qp.gov.bc.ca/statreg/stat/S/96412\\_00.htm](http://www.qp.gov.bc.ca/statreg/stat/S/96412_00.htm)
- Independent School Regulation  
[http://www.bced.gov.bc.ca/legislation/schoollaw/i/bcreg\\_262-89.pdf](http://www.bced.gov.bc.ca/legislation/schoollaw/i/bcreg_262-89.pdf)

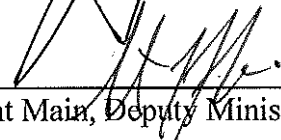
---


<sup>1</sup> These principles are included in the British Columbia Ombudsperson fairness checklist. A template for dispute resolution is available on the Ministry of Education website – <http://www.bced.gov.bc.ca/specialed/>

- Anaphylaxis Protection Order  
<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m232-07.pdf>
- Student Records Disclosure Order  
<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m14-91.pdf>
- Freedom of Information and Protection of Privacy Act  
[http://www.qp.gov.bc.ca/statreg/stat/f/96165\\_00.htm](http://www.qp.gov.bc.ca/statreg/stat/f/96165_00.htm)
- Health Act Communicable Disease Regulation  
[www.bclaws.ca](http://www.bclaws.ca)
- Public Health Act  
[http://www.leg.bc.ca/38th4th/1st\\_read/gov23-1.htm](http://www.leg.bc.ca/38th4th/1st_read/gov23-1.htm)

*Approved and agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.*

  
 \_\_\_\_\_  
 James Gorman, Deputy Minister of Education and Early Learning and Literacy

  
 \_\_\_\_\_  
 Grant Main, Deputy Minister of Healthy Living and Sport

  
 \_\_\_\_\_  
 John Dyble, Deputy Minister of Health Services

---

## PROTOCOL AGREEMENT

---

### **BETWEEN:**

The Ministry of Education and the Ministry of Healthy Living and Sport and the Ministry of Health Services (through Health Authorities).

### **REGARDING THE FOLLOWING SERVICES:**

#### *SCHOOL ENVIRONMENT AND HEALTH INSPECTION OF SCHOOLS*

---

#### **I. Background:**

All public schools are inspected as needed to ensure the health and safety of students and employees.

#### **II. Target:**

All public school buildings

#### **III. Services Provided:**

*This protocol is not intended to include those elements of building inspection which are the legal responsibility of municipal building inspectors or fire marshals.*

Each board of education and school medical officer will co-ordinate the following services:

- inspection of a school following notification of a complaint; and
- implementation of directives or advice from the school medical officer (*School Act, sections 90, Public Health Act*).

#### **IV. Obligations of each Ministry:**

*The Ministry of Education (through Boards of Education) will:*

- remedy, within a reasonable time frame, any deficiencies noted in an inspection report, based on the advice of the school medical officer; and
- raise concerns identified with the health and safety of school buildings with the Medical Health Officer.

## ***The Ministry of Health Services and the Ministry of Healthy Living and Sport***

The Ministry of Health Services and Ministry of Healthy Living and Sport provide funding and/or policy direction to Health Authorities and delegates responsibility to the Health Authorities for health inspection of schools. Health Authorities will:

- assign a school medical officer or designate for each school district;
- respond to concerns regarding the health and safety of a school building raised by the board of education or by the Minister of Healthy Living and Sport; and
- report to the board of education and the Minister of Health Services/Healthy Living and Sport fully and in detail the results of all inspections and any recommendations.

### **V. Dispute Resolution:**

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of this protocol.

At the regional level, the parties to this protocol should have a process in place to guide resolving conflicts that may occur when providing services for children and families in an integrated manner as articulated in this protocol. The conflict resolution process will adhere to the principle of *Commitment to Collaboration* described in section 6 (p.3) and to the principles of administrative fairness<sup>1</sup> including:

- those affected by a decision should be involved in the making of that decision;
- those affected by a decision should be informed and consulted in a meaningful way and have their point of view listened to and considered; and
- decisions should be made within a timely, fair, and consistent process and be based on relevant facts and without bias.

The regional conflict resolution processes will clearly identify:

- the roles and positions of individuals within each organization who have responsibility for resolving conflicts;
- the steps and stages of the process from informal to formal;
- the timeframes for completing the process; and  
what parties should do if they cannot reach a resolution.

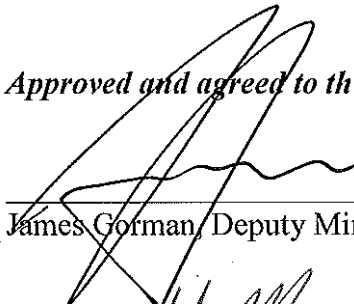
---

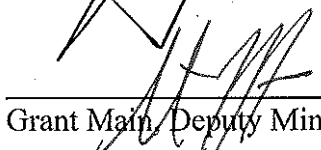
<sup>1</sup> These principles are included in the British Columbia Ombudsperson fairness checklist. A template for dispute resolution is available on the Ministry of Education website – <http://www.bced.gov.bc.ca/specialed/>

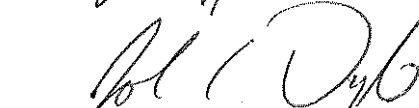
**Supporting Information:**

- Health Act Communicable Disease Regulation  
[www.bclaws.ca](http://www.bclaws.ca)
- Public Health Act  
[http://www.leg.bc.ca/38th4th/1st\\_read/gov23-1.htm](http://www.leg.bc.ca/38th4th/1st_read/gov23-1.htm)
- Food Premise Regulation  
[http://www.hls.gov.bc.ca/protect/ehp\\_foodsafety.html](http://www.hls.gov.bc.ca/protect/ehp_foodsafety.html)
- Food Safety Act  
[http://www.hls.gov.bc.ca/protect/ehp\\_foodsafety.html](http://www.hls.gov.bc.ca/protect/ehp_foodsafety.html)
- Tobacco Control Act  
<http://www.health.gov.bc.ca/tobacco/violations.html>

Approved and agreed to this 7 day of Oct, 2010.

  
James Gorman, Deputy Minister of Education and Early Learning and Literacy

  
Grant Main, Deputy Minister of Healthy Living and Sport

  
John Dyble, Deputy Minister of Health Services

---

## PROTOCOL AGREEMENT

---

### **BETWEEN:**

The Ministry of Education and the Ministry of Children and Family Development.

### **REGARDING THE FOLLOWING SERVICES:**

#### *NURSING SUPPORT SERVICES FOR CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS*

---

### **I. Background:**

Nursing Support Services is part of a range of in-school health support intended to facilitate safe, consistent care and appropriate health support services for children and youth with special health care needs attending public and participating independent schools in British Columbia. The provision of this support promotes active, healthy participation and inclusion of children and youth with special health care needs in the school setting.

Children and youth with special health care needs may require a variety of support services including Nursing Support Services direct and delegated nursing care. Eligibility for Nursing Support Services is based on a nursing assessment.

### **II. Children Served:**

School-aged children with special health care needs who require Nursing Support Services direct or delegated care that are enrolled in and attending:

- public schools;
- participating Group 1 and Group 2 independent school authorities.

### **III. Services Provided:**

Provided that a parent/guardian and, when appropriate, the student, have consented, the Boards of Education, participating independent school authorities, the Ministry of Children and Family Development and where applicable, Delegated Aboriginal Child and Family Services Agencies through regional Health Authorities and contracted nursing agencies will co-ordinate the following services:

- consultation and collaboration among health care providers, educators, parents, students and relevant others concerning service planning, service delivery and monitoring of children and youth with special health care needs;

- nursing assessments of school-aged children with special health care needs to determine their eligibility for Nursing Support Services delegated or direct nursing care;
- individualized school health care plans based on a nursing assessment of the child or youth's health care needs and collaboratively developed with them and their families and involved health care providers, for children eligible for Nursing Support Services delegated or direct care;
- assessment, training, competency checks and monitoring of non-nurse school staff performing delegated nursing tasks when required, and in accordance with the *College of Registered Nurses of BC Practice Standard "Delegating Tasks to Unregulated Care Providers"*; and
- provision of direct nursing care for students identified by Nursing Support Services Coordinators, as having health care needs that are best addressed in this manner.

#### **IV. Obligations of each Ministry:**

##### ***The Ministry of Education***

The Ministry of Education provides supplementary funding for special education through grants to Boards of Education and participating independent school authorities who are responsible for providing education programs for all school-aged children, including those who require Nursing Support Services. This may include providing school personnel to carry out health care support services.

The Ministry of Education through Boards of Education and participating independent school authorities will:

- identify and refer students with special health care issues to Nursing Support Services;
- obtain appropriate training of school personnel from Nursing Support Service Coordinators;
- facilitate appropriate training and monitoring of school personnel by Nursing Support Services Coordinators;
- provide access and space to allow for the safe provision of support services for students with special health care needs; and
- include Nursing Support Coordinators in a student's individual education planning (IEP) process when appropriate.

***The Ministry of Children and Family Development will:***

- contract with Health Authorities and nursing agencies for the delivery of Nursing Support Services, including direct and delegated nursing care for school-aged children who are eligible for Nursing Support Services; and
- provide policy and guidelines for the provision of Nursing Support Services.

**V. Dispute Resolution:**

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of this protocol.

At the regional level, the parties to this protocol should have a process in place to guide resolving conflicts that may occur when providing services for children and families in an integrated manner as articulated in this protocol. The conflict resolution process will adhere to the principle of *Commitment to Collaboration* described in section 6 (p.3) and to the principles of administrative fairness<sup>1</sup> including:

- those affected by a decision should be involved in the making of that decision;
- those affected by a decision should be informed and consulted in a meaningful way and have their point of view listened to and considered; and
- decisions should be made within a timely, fair, and consistent process and be based on relevant facts and without bias.

The regional conflict resolution processes will clearly identify:

- the roles and positions of individuals within each organization who have responsibility for resolving conflicts;
- the steps and stages of the process from informal to formal;
- the timeframes for completing the process; and
- what parties should do if they cannot reach a resolution.

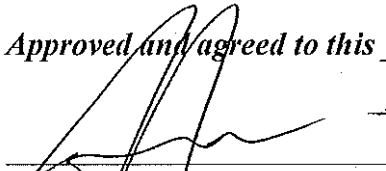
---

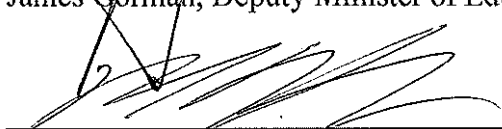
<sup>1</sup> These principles are included in the British Columbia Ombudsperson fairness checklist. A template for dispute resolution is available on the Ministry of Education website – <http://www.bced.gov.bc.ca/specialed/>

**Supporting Information:**

- Practice Standard Delegating Tasks to Unregulated Care Providers  
<http://www.crnbc.ca/downloads/429.pdf>
- Assigning and Delegating to Unregulated Care Providers  
<http://www.crnbc.ca/downloads/98.pdf>

Approved and agreed to this 7 day of OCT., 2010.

  
James Gorman, Deputy Minister of Education and Early Learning and Literacy

  
Mark Sieben, Chief Operating Officer, Ministry of Children and Family Development

---

## PROTOCOL AGREEMENT

---

### **BETWEEN:**

The Ministry of Education, the Ministry of Children and Family Development, and the Ministries of Health Services and Healthy Living and Sport (through Health Authorities).

### **REGARDING THE FOLLOWING SERVICES:**

#### *SPEECH-LANGUAGE PATHOLOGY SERVICES*

---

##### **I. Background:**

Since the early 1970's, speech-language pathology services for school-aged children in public schools have been provided within the school system, as a part of the special education services provided by Boards of Education. In the late 1980's, the provincial government reviewed ministry mandates for providing speech-language pathology services and confirmed that the Ministry of Education and Boards of Education would retain responsibility for speech-language pathology services for children and youth of school age enrolled in public schools.

Speech-language pathology is defined in the *Speech and Hearing Health Professions Regulation 413/2008* as “the health profession in which a person provides, for the purposes of promoting and maintaining communicative health, the services of assessment, treatment, rehabilitation and prevention of speech, language and related communication disorders and conditions, and vocal tract dysfunction, including related feeding and swallowing disorders.”

Ministerial Order 149/89 indicates “A board of a school district shall provide speech-language therapy services for students of school age who attend a school in the district and whose education is adversely affected by oral communication difficulties.” Communication difficulties are referred to in this protocol as communication disorders.

In some circumstances, the Ministry of Children and Family Development provides additional speech-language pathology services for school-aged children who qualify for such programs as Autism Funding or the At Home Program.

Speech-language pathology services for children younger than school age fall within the mandate of the Ministry of Children and Family Development and the Ministry of Healthy Living and Sport and are provided by speech/language pathologists working throughout the province in public health centres and contracted community agencies. To avoid disruption, services need to be organized as to promote joint planning, collaboration, and sharing of information when these children make the transition to school.

In some cases, communities may elect to consolidate resources provided by the Ministry of Children and Family Development, Boards of Education, participating independent school authorities, and regional Health Authorities, establishing local agreements for community speech-language pathology positions.

As of April 1, 2010, speech-language pathologists must be registered with the *College of Speech and Hearing Professionals in British Columbia*, and will be expected to adhere to their roles and responsibilities as defined in the *Speech and Hearing Health Professions Regulation 413/2008* and the College Bylaws.

## **II. Children Served:**

School-aged children with suspected or confirmed communication disorders enrolled in and attending:

- public schools;
- participating Group 1 and Group 2 independent school authorities;
- band schools on First Nations Reserves (at the discretion of Band School authorities).

## **III. Services Provided:**

Boards of Education, participating independent school authorities, regional Health Authorities, the Ministry of Children and Family Development, and where applicable, Delegated Aboriginal Child and Family Services Agencies will co-ordinate the following services:

- joint planning and collaboration among educators, parents, and speech-language pathologists during periods of transition (into school, between schools, and into adult services);
- identification and assessment of communication disorders;
- consultation and collaboration among educators, parents, and relevant others concerning the identification, assessment, service planning, service delivery and monitoring, and evaluation of services for children and youth with communication disorders;
- provision of training and support to school staff, parents and caregivers to foster the attainment of students' communication goals through classroom activities and in other environments;
- provision of ongoing individualized therapy or group therapy for children and youth identified as having communication disorders that are best addressed in this manner;
- planning and monitoring of tasks assigned to teaching assistants or paraprofessionals to support children and youth with communication disorders; and

- communication and collaboration between school and community service providers to support consistent plans of therapy across settings.

#### **IV. Obligations of each Ministry:**

##### **Shared Planning**

Policies and guidelines of all three ministries will encourage shared planning and a collaborative and co-ordinated approach that supports the needs of school-aged children. Privacy and information sharing policies for assessment, planning and intervention are in accordance with the *Freedom of Information and Protection of Privacy Act (FOIPOP)* and the *School Act, section 79*.

##### ***The Ministry of Education:***

- provides funds to Boards of Education and participating group 1 and 2 independent school authorities as part of the per pupil allotment, to support the provision of speech-language services; and
- has legislation, policy and guidelines regarding Boards of Educations' provision of speech language pathology services through Ministerial Order and the *Special Education Service: A Manual of Policies, Procedures and Guidelines*.

##### ***The Ministry of Children and Family Development:***

- contracts the delivery of the Early Intervention Therapy Program and has policy and guidelines for the provision of these services, including speech-language pathology services for children younger than school age with special needs and individualized transition plans for children entering school (*Early Intervention Therapy Program Guidelines*); and
- provides funds for specialized therapies which may include speech-language pathology services for school-aged children who are eligible for Autism Funding, the Community Brain Injury Program and/or the At Home Program School Aged Extended Therapies, in addition to those available through Boards of Education and participating independent school authorities.

##### ***The Ministry of Health Services and the Ministry of Healthy Living and Sport:***

- provide funding and/or policy direction to Health Authorities and delegates responsibility to the Health Authorities for speech and language services. Health Authorities will:
- provide public health speech-language pathology services, and individualized transition plans for children entering school. These plans will be developed in consultation with parents, educators and school-based speech-language pathologists.

## V. Dispute Resolution:

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of this protocol.

At the regional level, the parties to this protocol should have a process in place to guide resolving conflicts that may occur when providing services for children and families in an integrated manner as articulated in this protocol. The conflict resolution process will adhere to the principle of *Commitment to Collaboration* described in section 6 (p.3) and to the principles of administrative fairness<sup>1</sup> including:

- those affected by a decision should be involved in the making of that decision;
- those affected by a decision should be informed and consulted in a meaningful way and have their point of view listened to and considered; and
- decisions should be made within a timely, fair, and consistent process and be based on relevant facts and without bias.

The regional conflict resolution processes will clearly identify:

- the roles and positions of individuals within each organization who have responsibility for resolving conflicts;
- the steps and stages of the process from informal to formal;
- the timeframes for completing the process; and
- what parties should do if they cannot reach a resolution.

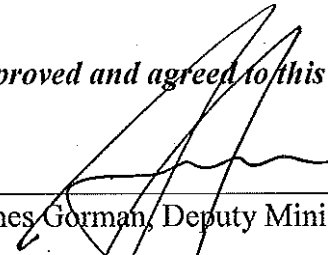
---

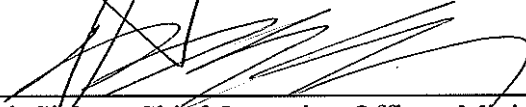
<sup>1</sup> 1These principles are included in the British Columbia Ombudsperson fairness checklist. A template for dispute resolution is available on the Ministry of Education website – <http://www.bced.gov.bc.ca/specialed/>


**Supporting Information:**

- *Freedom of Information and Protection of Privacy Act*  
[http://www.qp.gov.bc.ca/statreg/stat/f/96165\\_00.htm](http://www.qp.gov.bc.ca/statreg/stat/f/96165_00.htm)
- *School Act*  
[http://www.qp.gov.bc.ca/statreg/stat/S/96412\\_00.htm](http://www.qp.gov.bc.ca/statreg/stat/S/96412_00.htm)
- Ministerial Order 149/89. Support Services for Schools Order.  
<http://www.bced.gov.bc.ca/legislation/schoollaw/e/m149-89.pdf>
- Special Education Services: A Manual of Policies, Procedures and Guidelines  
<http://www.bced.gov.bc.ca/specialed/ppandg/toc.htm>
- Speech and Hearing Health Professionals Regulation 413/2008  
[www.health.gov.bc.ca/leg/notice/speech\\_and\\_hearing\\_health\\_professionals.html](http://www.health.gov.bc.ca/leg/notice/speech_and_hearing_health_professionals.html)
- Ministry of Children and Family Development: Programs for children and youth with special needs  
[http://www.mcf.gov.bc.ca/spec\\_needs/](http://www.mcf.gov.bc.ca/spec_needs/)

Approved and agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

  
\_\_\_\_\_  
James Gorman, Deputy Minister of Education and Early Learning and Literacy

  
\_\_\_\_\_  
Mark Sieben, Chief Operating Officer, Ministry of Children and Family Development

  
\_\_\_\_\_  
Grant Main, Deputy Minister of Healthy Living and Sport

  
\_\_\_\_\_  
John Dyble, Deputy Minister of Health Services

---

## PROTOCOL AGREEMENT

---

### **BETWEEN:**

Ministry of Education and Ministry of Children and Family Development.

### **REGARDING THE FOLLOWING SERVICES:**

*EDUCATIONAL PROGRAMS IN YOUTH CUSTODY SERVICES CENTRES, THE MAPLES ADOLESCENT TREATMENT CENTRE AND COURT-ORDERED RESIDENTIAL ATTENDANCE PROGRAMS*

---

### **I. Background:**

Throughout the province, the Ministry of Children and Family Development establishes programs to serve the non-educational needs of school-aged students. Some of these take place in residential settings, including youth custody services centres, the Maples Adolescent Treatment Centre and court-ordered residential attendance programs. The Ministry of Education is required by its mandate to provide educational programs for students in these settings.

### **II. Target Population:**

Children and youth of school age in youth custody services centres, the Maples Adolescent Treatment Centre and court-ordered residential attendance programs.

### **III. Services Provided:**

- assessment;
- accommodation for instruction;
- therapy, counseling and rehabilitation; and
- instruction in accordance with the standards of the public school system, with adaptations to meet the requirements of the residential environment or special learning needs of the student.

#### **IV. Obligations of each Ministry:**

##### **A. Establishment of a new program or expansion/reduction of an existing program**

###### *Ministry of Children and Family Development*

- This Protocol Agreement is a revision of the original 1987 Protocol Agreement. Upon its execution, this Protocol Agreement is intended to replace the 1987 protocol agreement;
- Prior to establishing, expanding or reducing any program in a custodial or residential setting, the Ministry of Children and Family Development will consult with the Ministry of Education regarding any plans for development or significant changes to the facilities or operations of these programs. This consultation will occur as soon as planning for new or changes to existing facilities or programs are under way and should include information about location, projected capacity, timing, and nature of the population to be served. Potential impact on the educational program and resource requirements should be determined collaboratively;
- The superintendent (or designate) of the board of education which will be ultimately responsible for the supervision and delivery of the instructional program will be informed by the involved executive director (or designate) of the intention of the Ministry of Children and Family Development to establish, expand or reduce the custody services centre(s) or residential program(s) within the board's boundaries; and
- The respective superintendent (or designate) will be afforded the opportunity to review the proposal and to comment, orally or in writing, to the Ministry of Children and Family Development. Sufficient lead time will be provided to enable budgeting and staff recruitment procedures to meet the requirements of educational mandates.

###### *Ministry of Education*

- The Ministry of Education will, by an order of the Minister, establish a provincial resource program (a "school") and arrange for its operation through the appropriate board of education to provide educational programs to persons of school age in every youth custody services centre and in court-ordered residential attendance programs, and ensure an educational program and/or assessment and consultation in the development of an educational program is made available to young persons of school age in the Maples Adolescent Treatment Centre.

## **B. Operation of ongoing programs**

### ***Ministry of Children and Family Development***

- The Ministry of Children and Family Development will be responsible for provision and maintenance of appropriate classroom space and other suitable school facilities, furniture and fixtures, and will provide access to equipment and machinery that otherwise would be in place for youth custody services centres, the Maples Adolescent Treatment Centre or court-ordered attendance programs and is considered necessary to deliver an appropriate educational program;
- The Ministry of Children and Family Development will be responsible for providing any materials that would normally be provided by a parent in a public school;
- The Ministry of Children and Family Development will be responsible for the health and safety of the students on site and, within the limits of its operational responsibility, the health and safety of educational staff;
- The Ministry of Children and Family Development will be responsible for the provision of necessary measures of security, including any extraordinary behaviour management or control measures required;
- The Ministry of Children and Family Development will be responsible for the prompt notification to school officials of all students eligible for the educational program, and provision of pertinent information about each student necessary to deliver an effective, and where necessary, individual education program;
- The Ministry of Children and Family Development will be responsible for the provision of summer services, which may include requests of Boards of Education that they provide summer programs on a fee for service basis through agreements with the Ministry for Children and Family Development;
- The Ministry of Children and Family Development will be responsible for ensuring policy and procedures are in place to maintain liaison and coordination with the educational program; and
- The Ministry of Children and Family Development will be responsible for the solicitation, screening and training of volunteers, who may be made available to the education program at the discretion of the board of education.

### *Ministry of Education*

- The Ministry of Education will be responsible through local Boards of Education for the development and delivery of educational programs, in accordance with the School Act, related Regulations and Ministerial Orders. Costs of instructional personnel, educational equipment and materials, professional development of teaching staff, and staff and student travel necessary to carry out the instructional program will be the responsibility of the Ministry of Education;
- The Ministry of Education will provide funding to the Ministry of Children and Family Development for summer programs, consistent with the Memorandum of Understanding between the Ministry of Education and the Ministry of Children and Family Development dated May 10, 2004;
- The Ministry of Education, through local Boards of Education, will assure that a high standard of educational assessment is carried out upon entry to youth custody services centres, the Maples Adolescent Treatment Centre and court-ordered residential attendance programs, and that counseling and educational planning based on that assessment takes place for the duration of the placement, including consultation with schools regarding school-based strategies and support;
- The Ministry of Education, through local Boards of Education, will assure that an evaluation of the effectiveness of the educational programs is carried out on a regular basis to ensure programs continually examine, improve and report on their growth and achievement in relation to the Goals of Education, the Principles of Learning, the Attributes of the Public School System and select features of quality schools agreed upon by educational partners;
- The local board of education will register promptly all students legally required, otherwise compelled, or interested in attending school while in youth custody services centres, the Maples Adolescent Treatment Centre and court-ordered residential attendance programs;
- The local board of education will be responsible for administration and will arrange for the assignment, supervision and evaluation of its employees as required by the School Act;
- The local board of education will be responsible for liaison and coordination with schools from which the youth originated or to which the youth may be released, including transition planning and monitoring;
- The instructional program shall operate in accordance with the School Calendar Regulation that regulates the minimum number of hours and days of instruction in educational programs that a board of education must offer to students each year;

- Levels of instructional services will be determined by the ratio of one teacher for every eight (8) beds, including beds for remanded youths. The ratio will be calculated according to the Ministry of Children and Family Development rated operational resource capacity of the youth custody services centre and each court-ordered attendance program;
- Levels of instructional services for the Maples Adolescent Treatment Center will be based on previously established staffing levels and the estimated total annual enrolment in the educational program in the preceding school year;
- The school district administrator or the school district superintendent (or designate) responsible, will afford the director of the youth custody services centre or manager of the Maples Adolescent Treatment Centre or manager of the court-ordered attendance program an opportunity to review and comment on the budget submissions for the program;
- In the preparation of any budget submissions for the school program, the director of the youth custody services centre or manager of the Maples Adolescent Treatment Centre or manager of the court-ordered attendance program will be afforded an opportunity to review the budget proposals and to comment, orally or in writing, to the school district administrator and/or the school district superintendent responsible for the school program; and
- A comprehensive, individualized educational assessment will be carried out and an Individualized Educational Plan, where required, will be developed within ten (10) school days of each youth's entry to the educational program.

#### **V. Dispute Resolution:**

Disagreements among protocol partners or service providers, should any occur, will whenever possible be addressed early and informally to preserve respectful working relationships and ensure that services are provided in keeping with the goals of this protocol.

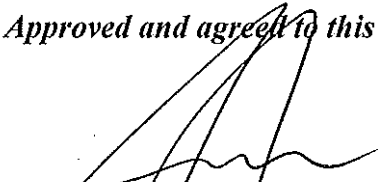
At the regional level, the parties to this protocol should have a process in place to guide resolving conflicts that may occur when providing services for children and families in an integrated manner as articulated in this protocol. The conflict resolution process will adhere to the principle of *Commitment to Collaboration* described in section 6 (p.3) and to the principles of administrative fairness<sup>7</sup> including:


- those affected by a decision should be involved in the making of that decision;
- those affected by a decision should be informed and consulted in a meaningful way and have their point of view listened to and considered; and
- decisions should be made within a timely, fair, and consistent process and be based on relevant facts and without bias.

The regional conflict resolution processes will clearly identify:

- the roles and positions of individuals within each organization who have responsibility for resolving conflicts;
- the steps and stages of the process from informal to formal;
- the timeframes for completing the process; and
- what parties should do if they cannot reach a resolution.

*Approved and agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.*

  
\_\_\_\_\_  
James Gorman, Deputy Minister of Education and Early Learning and Literacy

  
\_\_\_\_\_  
Mark Sieben, Chief Operating Officer, Ministry of Children and Family Development

<sup>7</sup> These principles are included in the British Columbia Ombudsperson fairness checklist. A template for dispute resolution is available on the Ministry of Education website – <http://www.bced.gov.bc.ca/specialed/>