



Organization of Educational Services for At-Risk  
Students and Students With Handicaps, Social  
Maladjustments or Learning Difficulties

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## Introduction

In 2000, the Ministère de l'Éducation adopted the Policy on Special Education *Adapting Our Schools to the Needs of All Students*. This policy underscores the importance of prevention, which consists in creating an environment that is conducive to learning and in detecting difficulties and intervening as soon as they appear. In an effort to implement this approach, the Ministère introduced the notion of at-risk students and abolished the declaration of students as having social maladjustments or learning difficulties. This was done to ensure that all students who experience difficulties in their schooling will be given proper support, without necessarily being labelled as having handicap, social maladjustments or learning difficulties.

The policy states that the organization of educational services be student-centred and that it be based on an individualized evaluation of their needs and abilities. This represents a considerable challenge calling for a renewed vision of the organization of services for at-risk students and students with handicaps, social maladjustments or learning difficulties. If such an approach is to be implemented, the rules that govern the funding of services must not be seen as an obstacle, but rather as a support to the organization of services.

This document suggests an integrated approach to the organization and funding of such services. It takes into account the latest developments in these areas, including the new teachers' collective agreement. Its main objective is to provide educators (administrators, managers, teachers, student services personnel, etc.) with an unequivocal understanding of the concepts and mechanisms that underlie the organization of services.

The first part of the document describes the individualized approach in the context of services organized to promote the success of all students. This is followed by the underlying principles of this approach, which are outlined in legislation and in ministerial orientations.

The second part of the document deals with the main funding methods that make it possible to organize student-centred services. Information is provided on the declaration of enrollments and the different financial allocations made by the Ministère de l'Éducation, du Loisir et du Sport (MELS). The last part of the document sets out the definitions used in the annual validation of the declaration of students with handicaps or students with severe behavioural disorders.

This document updates and replaces the document entitled *Students With Handicaps, Social Maladjustments or Learning Difficulties: Definitions* (2000).

# 1

## 1. Organization of Services

### 1.1. The Individualized Approach

The individualized approach recommended by the MELS is not new since a number of sections in the *Education Act*, the Policy on Special Education, student services programs, the Québec Education Program and now the teachers' collective agreement specify that the school must base the organization of services on this approach.

Implementing the individualized approach requires that all educators, administrators and other stakeholders adjust their practices. In line with the educational practices that apply to all students (i.e. differentiated learning, guidance and support, regulation and teamwork), the school principal, together with teachers and other educators such as student services personnel, is responsible for meeting the educational needs of each student in his or her care. It is up to the school team to identify these needs and to devise the necessary measures, since the school team is better acquainted with the students and the environment in which they are being educated.

The response to each student's needs must be based on an evaluation that makes it possible to recognize his or her difficulties, strengths and abilities. Once educators fully understand the student's situation and its impact on the student's learning, the evaluation will be useful for identifying ways of helping students to overcome their difficulties, to capitalize on their strengths and to make progress. Implementation of preventive

measures or adapted educational services should not be based on the fact that a student belongs to a particular special needs category nor on the funding methods used by the MELS, but on an evaluation of each student's needs and abilities. The organization of services must occur in this context, regardless of whether the student experiences occasional, more significant or permanent difficulties, whether he or she is considered to be at-risk, whether he or she is a special-needs student, or whether he or she is handicapped.

For example, let's take the situation of three handicapped elementary-school students who are in the same special needs category and for whom the school board receives the same amount of funding. Following the evaluation of the situation of each student, educators might consider different measures for each student depending on his or her needs and abilities. Each student is unique, with his or her own personality, strengths and difficulties, and develops by interacting with his or her family and school environment. It is therefore possible that the first will receive services in a regular class while also benefiting from the appropriate support measures. The second student might be enrolled in a special class in a regular school and the third might be referred to a special school that offers very specialized services because it was shown that this was the best way to help the student learn and become socialized. If we agree that the same type of handicapped student could have his or her needs met in different ways, this is even more true of at-risk or special-needs students.

According to the local policy for the organization of services for students with handicaps, social maladjustments or learning difficulties, school personnel must plan graduated measures to meet the needs of these students, keeping in mind that adapted educational services must be envisaged before employing more specialized services:

- For some students, preventive measures or more specific interventions implemented by the teacher in conjunction with the parents, in a regular classroom setting, could be sufficient and allow them to make progress in the areas of learning and socialization.
- For other students, a set of coordinated actions could be planned by the cycle-team,<sup>1</sup> the parents and the students themselves when preventive measures and more specific interventions are not sufficient to help the students make progress in the areas of learning and socialization. An individualized education plan could then be drawn up in such cases. However, in accordance with section 96.14 of the *Education Act*, an individualized education plan should be established to meet the needs of students with handicaps, social maladjustments or learning difficulties.
- In other cases, an evaluation of the student's situation may show that preventive or remedial<sup>2</sup> measures implemented by the teacher or other personnel and measures that have been carried out over a significant period of time are not sufficient. For such students who have persistent difficulties, an individualized education plan should be established in accordance with section 96.14 of the *Education Act*. The measures identified in the plan could be implemented for varying amounts of time and at varying intervals. The individualized education plan should therefore be reviewed at some point in time.

1. As specified in the reference framework *Individualized Education Plan: Helping Students Achieve Success*, "a cycle team is made up of teachers and professionals who are collectively responsible for students' learning for the duration of a cycle. It consists of cycle teachers, specialized teachers and complementary services staff." Ministère de l'Éducation, 2004, p. 41.

2. According to the *Dictionnaire actuel de l'éducation* (3<sup>rd</sup> edition), remedial measures consist of pedagogical approaches developed by teachers to help students learn (p. 1176).

3. Excerpts of the *Education Act* are presented in this section. Please see the official document for the complete text of each section quoted.

## 1.2. Framework for the organization of services

Over the years, the legislation and ministerial orientations have set out ways of ensuring an individualized approach to the organization of services, so that the needs and abilities of each student can be taken into account.

### 1.2.1. THE *EDUCATION ACT*<sup>3</sup>

In 1998, the Québec government amended the *Education Act* with a view to giving schools more autonomy. The responsibilities and duties of schools are aimed at ensuring that decisions are made as close as possible to the heart of the action. The school principal has both pedagogical and administrative duties and obligations. In addition, through the governing board, parents are given more powers with regard to the organization of educational services in the school. These changes have had an impact on the approach to special education and the organization of services for at-risk students and students with handicaps, social maladjustments or learning difficulties.

#### Students' rights

The *Education Act* stipulates that each student has the right to receive "preschool education services and elementary and secondary school services..." Students are "also entitled to other educational services, student services and special education services... within the scope of the programs offered by the school board..." (section 1).

#### Teachers' obligations

"The teacher is entitled... to select methods of instruction corresponding to the requirements and objectives fixed for each group or for each student entrusted to his care..." (section 19). Teachers also have responsibilities towards special-needs students in the same way as towards all students entrusted to their care. Among other things, the teacher is obligated to "... contribute to the intellectual and overall personal development of each student entrusted to his care..." (section 22).

### **Organization of services and the school's responsibility**

The school principal "... shall ensure that educational services provided at the school meet the proper standards of quality..." and "... is the academic and administrative director of the school..." (section 96.12). In the case of a handicapped student or a student with a social maladjustment or a learning disability, "the principal, with the assistance of the student's parents, of the staff providing services to the student, and of the student himself,... shall establish an individualized education plan adapted to the needs of the student" (section 96.14). This is a way to coordinate measures aimed at meeting the needs of students with handicaps or social maladjustments or learning difficulties. Furthermore, "after consulting with the school staff, the principal shall inform the school board... of the needs of the school in respect of each staff category and of the professional needs of the staff" (section 96.20). The school is also responsible for making judicious and effective use of the available resources (sections 96.23 and 96.24) and to render account of the results obtained, particularly through its success plan (section 83).

In such a context, the school principal should promote a participative management approach and invite all concerned to work together in finding solutions that will make it possible to organize services in a way that better meets the needs of the school's students. In this regard, the new teachers' collective agreement provides for the implementation of a school committee for at-risk students and students with handicaps, social maladjustments or learning difficulties, which involves teachers in the process of identifying the school's needs and organizing services for such students. This committee should promote greater commitment and increased responsibility on the part of all concerned.

### **Organization of services and responsibilities of the school board**

The school board has an obligation to "... adapt the educational services provided to a handicapped student or a student with a social maladjustment or a learning disability according to the student's needs and in keeping with the student's abilities as evaluated by the school board..." (section 234). The school

board must also adopt "... a policy concerning the organization of educational services for such students to ensure the harmonious integration of each student into a regular class or group and into school activities if it has been established on the basis of the evaluation of the student's abilities and needs that such integration would facilitate the student's learning and social integration and would not impose an excessive constraint or significantly undermine the rights of the other students. The policy shall include:

- procedures for evaluating... students... ; such procedures shall provide for the participation of the parents... and of the students themselves... ;
- methods for integrating those students into regular classes or groups and into regular school activities as well as the support services required for their integration... ;
- terms and conditions for grouping those students in specialized schools, classes or groups;
- methods for preparing and evaluating the individualized education plans intended for such students" (section 235).

Lastly, the school board must ensure "... that the persons who come under its jurisdiction are provided the educational services to which they are entitled..." (section 208). The school board must also "... allocate among its schools... in an equitable manner and in consideration of social and economic disparities and of the needs expressed by the institutions, the operating subsidies granted by the Minister..." (section 275).

The teachers' collective agreement provides for the implementation of a parity committee within the school board for at-risk students and students with handicaps, social maladjustments or learning difficulties. This committee's principal mandate is to make recommendations on the distribution of the available resources as regards the organization of educational services for such students. This approach shows a concern for greater transparency and fosters accountability with respect to the management of resources allocated for at-risk students and students with handicaps, social maladjustments or learning difficulties.

### 1.2.2. THE POLICY ON SPECIAL EDUCATION

In 2000, the Ministère de l'Éducation adopted its new special education policy *Adapting Our Schools to the Needs of All Students*, which emphasizes the success of all students.

Accepting that educational success has different meanings depending on the abilities and needs of different students, and adopting methods that favour their success are the elements of the basic orientation of the policy that have a major impact on the organization of services offered by school boards and schools.

The policy centres on six lines of action:

- Recognizing the importance of prevention and early intervention
- Making the adaptation of educational services a priority for all those working with students with special needs
- Placing the organization of educational services at the service of students with special needs, by basing it on the individual evaluation of their abilities and needs, by ensuring that these are provided in the most natural environment for the students, as close as possible to their place of residence, and by favouring the students' integration into regular classes
- Creating a true educational community, starting with the child and the parents and continuing with outside partners and community organizations
- Devoting particular attention to at-risk students
- Developing methods for evaluating students' educational success in terms of knowledge, social development and qualifications, assessing the quality of services and reporting results

### 1.2.3. THE QUÉBEC EDUCATION PROGRAM

The Québec Education Program (QEP) applies to all students, and the instructional practices it sets out should make it possible to meet a variety of needs, while taking individual differences into account.

One of the challenges that this program poses to educators is to prepare young people who are different to live in a world that is constantly changing:

“Educators have to deal with the difficulty of providing guidance and support for an increasingly diverse group of students: those who are highly motivated and those who want to drop out, those who live in stable, intellectually stimulating families and those who have experienced frequent readjustments or very difficult times. There are students living in particular situations, such as some Aboriginal students, and there are recent immigrants who must adjust to a new context. And there are young people who must learn to overcome learning difficulties or handicaps.”<sup>4</sup>

In order to meet this challenge more effectively, the QEP suggests that the renewal of practices be based on approaches that, without being exclusive, are recognized as being consistent with the orientations of the education reform.

- **Differentiation:** “In addition to graduating the requirements of learning and evaluation situations to ensure the development of the competencies during the cycle, teachers should organize their teaching in a way that takes into account the students' previous learning, individual cognitive styles and interests so as to provide the most favourable conditions for learning. Thus teachers should adapt their teaching strategies, their ways of having students work together and the design of their learning and evaluation situations in order to take individual differences into account as far as possible in the class setting. This approach to teaching is known as differentiated instruction.”

4. *Québec Education Program, Secondary Cycle Two, Chapter 1, p. 6* (On-line version, September 2006).

“Teachers who practise differentiated instruction understand the dynamics at work in their classes and are sensitive to the diversity of the students in them. This means they use a broad range of strategies and take advantage of interactions that occur naturally in the class. The parameters used to graduate the level of complexity of the situations can also be used to differentiate the situations in class.”<sup>5</sup>

- **Guidance and support:** “Competencies are not taught in the traditional sense of the term; rather, it is the students that develop them. They develop them more effectively if they receive support and are given regular opportunities to use them—in other words, if they receive guidance and support. ... The practice of guidance and support concerns all educators in the school. The students need to see that the adults in the school are attentive to their progress and are working together consistently with them. The Québec Education Program, combined with the complementary educational services programs, is in this regard a tool that promotes the harmonization and consistency of educational actions.”<sup>6</sup>
- **Regulation:** “Competencies are progressive, comprehensive and integrated. A great variety of information is needed in order to identify where students are making progress and where they are not. This information can be used to make individual or collective adjustments, but it can also provide encouragement by validating students’ major or minor progress and teachers’ pedagogical success in the course of action.”<sup>7</sup>
- **Teamwork:** “While school personnel as individuals are responsible for their professional actions, they are also expected to construct shared representations and to work together on problems to be solved, situations to be dealt with, objectives to be attained, means to be used and projects to be carried out. All of them—administrators, teachers, complementary educational services personnel and support staff—must work together to create optimal teaching-learning conditions. In so doing, they have to go beyond individual competencies and create collective competency.”<sup>8</sup>

#### 1.2.4. COMPLEMENTARY EDUCATIONAL SERVICES PROGRAMS

In its 2002 document entitled *Complementary Educational Services: Essential to Success*, the Ministère de l’Éducation specifies that:

“In addition to sharing responsibilities, working in genuine collaboration and implementing a renewed process of organization of the services, the school system has to adopt certain principles: services adapted to students’ characteristics and needs, organization based on needs rather than services, the concept of education through the development of subject-specific and cross-curricular competencies, closer links between instructional activities and activities in complementary educational services, through the shared use of the broad areas of learning...”

In accordance with section 224 of the *Education Act*, school boards have a responsibility to establish a program for each of the complementary education services set out in the basic school regulation. These services are:

- support services
- assistance services
- student life services
- promotion and prevention services

#### 1.2.5. POLICY ON THE EVALUATION OF LEARNING EVALUATION FOR BETTER LEARNING

In light of Québec’s education system, which strives to provide equal opportunities and to ensure success for all students, the Policy on the Evaluation of Learning emphasizes two types of values: fundamental values such as justice, equality and equity, and instrumental values, such as coherence, rigour and openness.

5. *Ibid.*, p. 30.  
6. *Ibid.*, p. 27.  
7. *Ibid.*, p. 32.  
8. *Ibid.*, p. 32.



- *Justice* requires that the evaluation of learning take place in keeping with the statutes and regulations and that students have the right to retake examinations and lodge appeals.
- *Equality* requires that all students have an equal opportunity to demonstrate what they have learned.
- *Equity* requires that the individual characteristics of certain students or the common traits of certain groups be taken into account in order to avoid increasing existing differences.
- *Coherence* means that evaluation must be directly tied to learning.
- *Rigour* is reflected in evaluation that is concerned with accuracy and precision so that decisions may be taken that will help the student progress and will officially recognize learning.
- *Openness* requires that evaluation standards and conditions be known and understood by the student and his or her parents.

In keeping with these values, which are in constant interaction, schools and school boards ensure that each student is able to demonstrate the development of his or her competencies. In situations where differentiation<sup>9</sup> in evaluation is necessary, this decision must be made within the scope of an individualized education plan, in conjunction with the student, his or her parents and the educators concerned.

9. *Evaluation of Learning at the Secondary Level: Framework* (preliminary version, 2006), p. 27-37

# 2

## Funding and Enrollments



### 2.1. Available Financial Resources

In order to allow the school boards to organize instructional, complementary and special education services, the MELS grants them different allocations determined on the basis of the annual budgetary rules. These rules are aimed at ensuring an equitable distribution of resources among the various institutions. They set out the methods for calculating funding and are used to generate an overall budget envelope for individual school boards, thus giving them the greatest possible latitude for meeting their students' needs. This mechanism is designed solely to calculate the allocation amounts; it should not be used to determine how the individual school boards and schools will use these sums in providing services for their students. Above all, it is not aimed at establishing a direct link between belonging to a special-needs category and the nature or frequency of the services to be provided to a given student.

Funding for these services is ensured mainly by basic allocations and additional allocations; the different funding methods are described in a detailed manner in the annual budgetary rules, which are available on the MELS Web site at the following address: [www.mels.gouv.qc.ca/dgfe/Regles/reg\\_cs/index.html](http://www.mels.gouv.qc.ca/dgfe/Regles/reg_cs/index.html). The 2006-2007 budgetary rules contain information on:

#### BASIC ALLOCATIONS

- The allocations are determined on the basis of student enrollment in the different levels of education (preschool, elementary and secondary school) as of September 30 of the current year. Among other things, these allocations take into account certain measures stemming from the Plan of Action *Early Steps Toward Success* of the Policy on Special Education, including those that call for a decrease in the number of students per class at the preschool level and in elementary Cycle One.
- The basic allocations are higher for handicapped students, students with severe behavioural disorders and students covered by an agreement between the MELS and the Ministère de la Santé et des Services sociaux (MSSS).<sup>10</sup> These additional sums are granted to school boards depending on the number of handicapped students and students with severe behavioural disorders, in order to take into account the extent of these students' needs and the scope of the services to be implemented by school boards and schools.
- The basic allocations allow the school boards to meet the needs of all students in terms of teaching, teaching support, complementary educational services and professional development.

10. Code 13 is used exclusively to designate students covered by an agreement between the MELS and the MSSS. By virtue of the provisions of the *Youth Protection Act* or the *Young Offenders Act*, such students have been admitted to a rehabilitation centre, in accordance with an agreement between a school board and a youth centre.

- The basic allocations also include other budgetary envelopes, the amount of which is specific to each school board, and which take into account additional services to be provided to special-needs students as well as the poverty index, namely:
  - additional support for students with social maladjustments or learning difficulties
  - additional support for students with social maladjustments or learning difficulties from disadvantaged areas
  - the addition of resources (as set out in the agreement on the teachers' collective agreement) for at-risk students and students with handicaps, social maladjustments or learning difficulties, which is spread out over three years, i.e. 2006-2007, 2007-2008 and 2008-2009.

#### **ADDITIONAL ALLOCATIONS**

Additional allocations are granted to meet specific needs, including those of at-risk students and students with handicaps, social maladjustments or learning difficulties, to deal with special situations identified by schools and school boards, and to offer services deemed to be a priority by the MELS. These services include regional and supraregional support services and expertise services in special education. Some allocations are intended for all students, while others are specifically intended for at-risk students and students with handicaps, social maladjustments or learning difficulties.

#### **Additional allocations granted *a priori* to the school system are for:**

- the *New Approaches, New Solutions* Intervention Strategy
- the support measure for the integration of handicapped students into regular classes

#### **Additional allocations granted *a posteriori* to the school system are for:**

- daycare services
- *Supporting Montréal Schools*
- tuition fees for private schools or other schools outside Québec
- *Homework Assistance Program*

11. The declaration of enrollments to be provided under a MELS-MSSS education agreement is validated separately. More detailed information in this regard is provided annually by each regional office.

- *Wellness-Oriented School Program*
- the acquisition of furniture, equipment and tools adapted to the needs of handicapped students
- improved access to new information and communications technologies (ICT) for handicapped students
- the addition of resources for regional and supraregional education mandates for handicapped students
- Program to Support Research and Development in Special Education (action research and ICT projects)

## **2.2. Annual Declaration of Enrollments and Validation**

For general education in the youth sector, school boards make a declaration of enrollments in their schools as of September 30 of each year. To that end, different types of information about the situation and characteristics of each student as of September 30 are submitted to the MELS. This information makes it possible to monitor changes in enrollments and provide a snapshot of the Québec education system. For example, this information may indicate that as of September 30, a given student is either a regular student, that he or she has an individualized education plan or that he or she has a handicap. It is also used to determine most of the basic allocations granted to school boards. Since this declaration has a direct impact on funding, the MELS carries out an annual administrative check in this regard.

It is in this context that the declaration concerning handicapped students and students with severe behavioural disorders is validated by the MELS on an annual basis<sup>11</sup>. The MELS provides higher basic allocations for students deemed to have handicaps or severe behavioural disorder. This validation is aimed at ensuring that the declaration concerning these students meets the ministerial criteria.

## STUDENTS WITH HANDICAPS AND STUDENTS WITH SEVERE BEHAVIOURAL DISORDERS: DEFINITIONS

For a student to be considered as having a severe behavioural disorder or a handicap, three elements must be present:

1. First, a **diagnosis** by qualified personnel. The diagnosis defines the disability or the nature of the disorder.<sup>12</sup>
2. Next, the **disabilities and limitations** hinder or prevent the student from learning the content of the Québec Education Program or developing autonomy and achieving social integration.

The criteria used by the MELS in its annual validation of the declaration of enrollments to assess these two conditions are described in the following pages. The most commonly observed examples of these limitations in terms of the student's ability to function in school are also presented.

3. Finally, **support measures** must be taken to reduce the disadvantages created by a disability or a serious disorder, in order to enable the student to function at school despite his or her disability or difficulties.

*Support measures must be designed to reflect the student's needs and limitations and determined in the process of drawing up the individualized education plan. These measures may be related to instructional approaches, programs of study, material or technical aids. As well, the student must be provided with additional services, which may take different forms. In a variety of situations, these services are provided, in whole or in part, by professional personnel. The fact that a student has been assigned to a class with a reduced number of students may be taken into account by the MELS in the annual validation and in the evaluation of the services provided to that student. These additional services are provided on a sustained or regular basis, in accordance with the students' needs*

### ***Sustained support***

*Sustained support involves services provided for several hours each day. In addition, a staff member must be available at all times in the school, to intervene in unexpected situations. Sustained support must be provided to students with severe behavioural disorders, moderate to severe intellectual impairments, profound intellectual impairments, severe motor impairments, pervasive developmental disorders or psychopathological disorders.*

### ***Regular support***

*Regular support involves frequent assistance at certain times during the day or week. This type of support consists of a minimum of several hours of help per week. Students with mild motor impairments, organic impairments, language disorders, and hearing or visual impairments, must be provided minimally with regular support.*

12. Reports submitted for annual validation must have been written in the 12 months preceding September 30 of the current year. Older reports may be considered in exceptional cases; however, a letter of justification is necessary in this case.

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p style="text-align: center;"><b>14</b> Severe behavioural disorders</p>	<p style="text-align: center;">Students are deemed to have a severe behavioural disorder when:</p> <ul style="list-style-type: none"> <li>• they have been evaluated by a <b>multidisciplinary team</b>, composed of at least one of the following professionals: a <b>psychologist</b>, a <b>psycho-educator</b> or a <b>social worker</b></li> <li>• their overall functional evaluation deals with <b>all of their academic, psychological, psychosocial information</b> or other relevant types of information: <ul style="list-style-type: none"> <li>- this <b>evaluation</b> is carried out using systematic observation techniques and standardized tests, including a <b>standardized behaviour rating scale</b></li> <li>- the results on the standardized rating scale show that these students <b>fall at least two standard deviations from the mean for their age group</b></li> </ul> </li> </ul>	<p>they exhibit <b>aggressive or destructive behaviour of an antisocial nature</b> and this behaviour is:</p> <ul style="list-style-type: none"> <li>• very <b>intense</b></li> <li>• very <b>frequent</b></li> <li>• <b>constant</b>, meaning that it occurs in different situations (i.e. in the classroom, at school, within the family)</li> <li>• <b>persistent</b> (over several years) despite the sustained support measures with which they have been provided</li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Difficulty carrying out normal school tasks</li> <li>• High risk of experiencing major academic delays; lack of motivation</li> </ul> <p><b>In terms of the student's ability to function:</b></p> <ul style="list-style-type: none"> <li>• Verbal or physical aggression towards school personnel, classmates or other people</li> <li>• Threats towards school staff or other students (beyond verbal abuse)</li> <li>• Very low frustration threshold; impulsiveness</li> <li>• Irresponsible behaviour: <ul style="list-style-type: none"> <li>- putting the physical safety of others in danger by throwing objects or in other ways</li> <li>- damaging their surroundings significantly or committing acts of vandalism</li> <li>- abusing drugs to the point of endangering their health, their psychological stability or their life in society and the safety of others</li> </ul> </li> <li>• Constant challenging of authority: <ul style="list-style-type: none"> <li>- frequently, persistently and stubbornly refusing to follow instructions and rules</li> </ul> </li> </ul>
<b>Support measures: sustained support</b>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p>23  <b>Profound intellectual impairments</b></p>	<p>Students are deemed to have a profound intellectual impairment when:</p> <ul style="list-style-type: none"> <li>• they have been diagnosed by a <b>psychologist or a guidance counsellor</b> working with a multidisciplinary team</li> <li>• an evaluation of their <b>cognitive functioning</b> using standardized tests shows an intellectual or development quotient <b>below 20 to 25</b></li> <li>• an evaluation of their <b>adaptive behaviour</b> reveals that they have disabilities</li> </ul>	<p>Students are deemed to have a profound intellectual impairment when:</p> <ul style="list-style-type: none"> <li>• they display <b>major limitations in the area of cognitive development, making attainment of the objectives of the Québec Education Program impossible</b> and requiring the use of an adapted program</li> <li>• they display <b>manifestly limited perceptual, motor and communication skills</b>, requiring individualized methods of evaluation and stimulation or the use of technical aids</li> <li>• they display very low functional abilities in the area of <b>personal and social autonomy</b></li> <li>• they may have related impairments</li> </ul>	<p><b>In terms of learning :</b></p> <ul style="list-style-type: none"> <li>• Limited learning achieved mainly through manipulation, exploration, trial and error and association</li> <li>• Difficulties related to speech, often not acquired</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Emotional difficulties: great difficulty expressing emotions, explaining a request, expressing a need or making a choice</li> <li>• Social difficulties: rather limited interaction with others that is difficult to understand and rarely the result of their initiative; extremely limited social skills and likelihood of exhibiting inappropriate behaviour</li> <li>• Motor and physical difficulties: <ul style="list-style-type: none"> <li>- possibility hypotonia, hypertonia or spasticity</li> <li>- involuntary movements</li> <li>- lack of manual dexterity</li> <li>- poor coordination making even the most basic functional gestures difficult</li> <li>- often in poor health</li> </ul> </li> </ul>
<p><b>Support measures: sustained support</b></p>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p style="text-align: center;"><b>24</b> Moderate to severe intellectual impairments</p>	<p>Students are deemed to have a moderate to severe intellectual impairment when:</p> <ul style="list-style-type: none"> <li>• they have been diagnosed by a <b>psychologist or a guidance counsellor</b> working with a multidisciplinary team</li> <li>• an evaluation of their <b>cognitive functioning</b> using standardized tests shows an intellectual or development quotient <b>between 20 to 25 and 50 to 55</b></li> <li>• an evaluation of their <b>adaptive behaviour</b> reveals that they have disabilities</li> </ul>	<ul style="list-style-type: none"> <li>• they display <b>limitations in the area of cognitive development restricting the ability to learn with respect to certain objectives of the Québec Education Program</b> and requiring an adapted pedagogy or program</li> <li>• their functional abilities in the area of <b>personal and social autonomy</b> result in: <ul style="list-style-type: none"> <li>- a <b>need for assistance</b> in new activities</li> <li>- or a <b>need for instruction in basic autonomy</b></li> </ul> </li> <li>• they have more or less marked difficulties in <b>sensory, motor and communication development</b></li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Difficulty processing a large amount of complex information</li> <li>• Difficulty in finding and selecting information</li> <li>• Difficulty in using what they have learned in a new situation; limited ability to generalize and transfer what they have learned</li> <li>• Communication and language difficulties: poor elocution, limited vocabulary and frequent use of telegraphic phrases</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Motor and sensory difficulties in the areas of gross motor skills, fine motor skills, eye-motor coordination, balance, posture and body image</li> </ul>
<b>Support measures: sustained support</b>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p><b>33</b> Mild motor impairments</p>	<p>Students are deemed to have a mild motor impairment when:</p> <ul style="list-style-type: none"> <li>they have been diagnosed by a <b>general practitioner</b> or a <b>medical specialist</b></li> <li>a neuromotor examination shows that they have one or more nervous, muscular or osteoarticular disorders that affect their <b>movements</b></li> </ul> <p>The main <b>motor impairments</b> are:</p> <ul style="list-style-type: none"> <li><b>neurological:</b> <ul style="list-style-type: none"> <li>Friedreich's ataxia</li> <li>paraplegia and tetraplegia</li> <li>cerebral motor deficiency</li> <li>cranial trauma</li> <li>uncontrolled epilepsy</li> <li>etc.</li> </ul> </li> <li><b>muscular:</b> <ul style="list-style-type: none"> <li>muscular dystrophy,</li> <li>etc.</li> </ul> </li> <li><b>osteoarticular:</b> <ul style="list-style-type: none"> <li>congenital malformations</li> <li>spina bifida,</li> <li>amputations,</li> <li>juvenile rhumatoid arthritis</li> <li>etc.</li> </ul> </li> </ul>	<p>Students are deemed to have a mild motor impairment when:</p> <ul style="list-style-type: none"> <li>their ability to carry out <b>everyday activities</b> is <b>significantly and persistently</b> limited</li> <li>a functional evaluation shows that, <b>even with technological aids</b>, they have one or more of the following characteristics: <ul style="list-style-type: none"> <li>difficulty carrying out tasks involving <b>grasping</b> (manual dexterity)</li> <li>difficulty carrying out <b>daily activities</b> (personal hygiene, eating)</li> <li>limitations in <b>mobility</b> hindering their ability to get around</li> </ul> </li> <li>these characteristics may be accompanied by <b>difficulty in learning to communicate</b></li> </ul>	<p><b>Examples of generally observed academic difficulties</b></p> <p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>Motor difficulties that have an impact on the performance of learning-related tasks, such as: <ul style="list-style-type: none"> <li>writing, drawing, handling small rulers, handling measuring instruments, performing certain physical education activities, playing a musical instrument, etc.</li> </ul> </li> <li>Major difficulties with articular movements that have an impact on all school-related activities and that can involve using alternative means of communication</li> <li>Learning difficulties caused by cognitive disorders resulting from cerebral lesions</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>Difficulty carrying out everyday activities such as: <ul style="list-style-type: none"> <li>getting around at school, getting dressed, eating, using the washroom, going to school, etc.</li> </ul> </li> </ul>
<p>Support measures: regular support</p>			



Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p style="text-align: center;"><b>33</b> Organic impairments</p>	<p style="text-align: center;">Students are deemed to have an organic impairment when:</p> <ul style="list-style-type: none"> <li>• they have been diagnosed by a <b>general practitioner</b> or a <b>medical specialist</b></li> <li>• the evaluation shows that one or more of the <b>vital systems</b> (e.g. respiratory, circulatory, genito-urinary system) are affected by problems resulting in <b>permanent organic disorders and have a serious impact on their ability to function in school</b></li> <li>• The <b>main chronic diseases</b> are: <ul style="list-style-type: none"> <li>- cystic fibrosis</li> <li>- leukemia</li> <li>- hemophilia</li> <li>- kidney disease</li> <li>- asthma</li> <li>- insulin-dependent diabetes</li> <li>- major pulmonary diseases</li> <li>- acute and prolonged inflammatory bowel diseases</li> <li>- etc.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• a <b>permanent organic impairment seriously and persistently</b> limits their ability to carry out daily tasks</li> <li>• they exhibit one of the following characteristics: <ul style="list-style-type: none"> <li>- <b>a need for special care integrated into their daily schedule</b></li> <li>- <b>learning difficulties</b> because of medical treatment</li> <li>- <b>difficulty accessing certain places</b> because of the nature of the disease</li> <li>- <b>academic delays</b></li> </ul> </li> <li>• despite <b>medical supervision</b>, they are <b>unable to function normally</b></li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Difficulties that have an impact on the performance of learning-related tasks, such as: <ul style="list-style-type: none"> <li>- completing schoolwork because of a lack of physical endurance or limited ability to concentrate; performing certain physical education activities; etc.</li> </ul> </li> <li>• Cognitive impairments that result in academic difficulties or delays</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Special care integrated into the daily schedule (e.g. frequent medication, insulin and monitoring, nursing care)</li> <li>• Difficulty observing a regular schedule</li> <li>• Frequent absences, sometimes for prolonged periods</li> </ul>
<b>Support measures: regular support</b>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p style="text-align: center;">Students are deemed to have a language disorder when:</p> <p><b>34</b> Language disorders</p> <ul style="list-style-type: none"> <li>• an <b>evaluation</b> has been carried out by a <b>speech-language pathologist</b> working with a multidisciplinary team, using systematic observation techniques and appropriate tests</li> <li>• the evaluation reveals <b>major difficulties</b> in the areas of: <ul style="list-style-type: none"> <li>- <b>language development</b></li> <li>- <b>verbal expression</b></li> <li>- <b>cognitive verbal functions</b></li> </ul> </li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>- <b>moderate to severe</b> difficulties in the area of <b>verbal comprehension</b><sup>13</sup></li> </ul> <ul style="list-style-type: none"> <li>• and it is concluded that the student has severe dysphasia, severe primary language disorder, severe mixed language disorders or severe verbal dyspraxia</li> </ul> <p><b>Other necessary criteria</b> include:</p> <ul style="list-style-type: none"> <li>• the persistence of serious difficulties <b>beyond the age of five</b></li> <li>• <b>regular monitoring by a speech-language pathologist</b> for at least six months prior to the diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>• they exhibit <b>severe limitations</b> with regard to: <ul style="list-style-type: none"> <li>- <b>verbal interactions</b>, both in terms of expression and comprehension</li> <li>- <b>socialization</b></li> <li>- <b>learning at school</b></li> </ul> </li> <li>• the <b>persistence and severity</b> of the disorder prevents them from carrying out school tasks normally assigned to other students of the same age</li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Very limited vocabulary, both in terms of expression and comprehension</li> <li>• Pronounced difficulties in expressing and understanding sentences, both spoken and written: agrammaticality, inability to place words in the correct order, inability to understand or use complex sentences, etc.</li> <li>• Pronounced difficulties in learning new concepts (space, time, duration, quantity, quality)</li> <li>• Pronounced oral and written communication difficulties: type of discourse, aim of communication, etc.</li> <li>• Very pronounced difficulties in reflecting on language</li> <li>• Pronounced reading difficulties, in particular with regard to strategies for recognizing and identifying words</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Behavioural and interpersonal difficulties when they feel they have not been understood or that they do not understand</li> <li>• Difficulties in terms of autonomy and the sense of space and time</li> <li>• Difficulties taking into account verbal information in different situations</li> </ul>	
<b>Support measures: regular support</b>			

13. A moderate impairment with regard to verbal comprehension would be considered if the evaluation concluded that the student had severe verbal dyspraxia.

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p style="text-align: center;"><b>36</b> Severe motor impairments</p>	<p style="text-align: center;">Students are deemed to have a severe motor impairment when:</p> <ul style="list-style-type: none"> <li>• they have been diagnosed by a <b>general practitioner</b> or a <b>medical specialist</b></li> <li>• a neuromotor examination shows that they have one or more nervous, muscular or osteoarticular disorders that affect their <b>movements</b></li> </ul> <p>The main <b>motor impairments</b> are:</p> <ul style="list-style-type: none"> <li>• <b>neurological:</b> <ul style="list-style-type: none"> <li>- Friedreich's ataxia</li> <li>- paraplegia and tetraplegia</li> <li>- cerebral motor deficiency</li> <li>- cranial trauma</li> <li>- uncontrolled epilepsy</li> <li>- etc.</li> </ul> </li> <li>• <b>muscular:</b> <ul style="list-style-type: none"> <li>- muscular dystrophy</li> <li>- etc.</li> </ul> </li> <li>• <b>osteoarticular</b> <ul style="list-style-type: none"> <li>- congenital malformations</li> <li>- spina bifida</li> <li>- amputations</li> <li>- juvenile rheumatoid arthritis</li> <li>- etc.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• their ability to carry out <b>everyday activities</b> is <b>extremely and persistently</b> limited</li> <li>• a functional evaluation shows that, <b>even with technological aids</b>, they have one or more of the following characteristics: <ul style="list-style-type: none"> <li>- <b>severe functional</b> limitations in carrying out everyday activities</li> <li>- difficulty carrying out <b>daily activities</b></li> <li>- <b>significant</b> limitations in <b>mobility</b></li> </ul> </li> <li>• these characteristics may be accompanied by <b>severe</b> limitations in their ability <b>to communicate</b></li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Motor difficulties that have a major impact on learning-related tasks or that make their performance impossible: <ul style="list-style-type: none"> <li>- writing, drawing, handling small rulers, handling measuring instruments, performing certain physical education activities, playing a musical instrument, etc.</li> </ul> </li> <li>• Major difficulties with articular movements that have an impact on all school-related activities and that can involve using alternative means of communication</li> <li>• Learning difficulties caused by cognitive disorders resulting from cerebral lesions</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Major difficulties in carrying out everyday activities such as: <ul style="list-style-type: none"> <li>- getting around at school, getting dressed, eating, using the washroom, going to school, etc.</li> </ul> </li> </ul>
<b>Support measures: sustained support</b>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p>42 Visual impairments</p>	<p>Students are deemed visually impaired when:</p> <ul style="list-style-type: none"> <li>• they have been diagnosed by an <b>ophthalmologist</b> or an <b>optometrist</b></li> <li>• the eye test determines that <b>each eye</b> <ul style="list-style-type: none"> <li>- has a visual acuity of no more than 6/21 or a visual field of less than 60° in the 90° and 180° meridians,</li> <li>- with correction by means of appropriate ophthalmic lenses other than special optical devices and supplements of more than +4.00 dioptres</li> </ul> </li> </ul>	<p><b>even with technical aids</b>, they display one or more of the following characteristics:</p> <ul style="list-style-type: none"> <li>• <b>limitations</b> with respect to <b>communication</b></li> <li>• <b>limitations</b> with respect to participation in <b>everyday activities</b> and with respect to <b>mobility</b></li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Difficulties in seeing written content, making it necessary to use substitute codes or adapted materials (e.g. large print or Braille, tactile art) and specialized equipment (e.g. magnifying glass, computer with Braille display)</li> <li>• Difficulties in understanding certain concepts and forming mental images</li> <li>• Difficulties grasping mathematical or scientific concepts with tactile exploration</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Difficulties related to locomotion, getting around and certain everyday activities</li> <li>• Difficulties relating to others: difficulties in grasping social conventions learned through imitation, in approaching young people of their own age, and in interpreting nonverbal communication</li> </ul>
<p>Support measures: regular support</p>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p data-bbox="506 321 640 423">44 Hearing impairments</p>	<p data-bbox="831 266 1337 293">Students are deemed hearing impaired when:</p> <ul data-bbox="674 321 1073 688" style="list-style-type: none"> <li>• they have been diagnosed by an <b>audiologist</b></li> <li>• a standard audiometric evaluation: <ul data-bbox="701 435 1073 688" style="list-style-type: none"> <li>- reveals an average hearing threshold <b>greater than 25 decibels</b> for pure tone stimuli of 500, 1000 and 2000 hertz, in the better ear</li> <li>- and takes into account auditory discrimination and sound intolerance threshold</li> </ul> </li> </ul>	<p data-bbox="1100 321 1493 412"><b>despite technical aids</b>, they display one or more of the following characteristics:</p> <ul data-bbox="1100 423 1493 553" style="list-style-type: none"> <li>• <b>limitations in learning</b> and in the use of <b>oral and written communication</b></li> <li>• <b>problems in cognitive development</b> and <b>oral language development</b></li> </ul>	<p data-bbox="1528 321 1745 349"><b>In terms of learning:</b></p> <ul data-bbox="1528 354 1927 922" style="list-style-type: none"> <li>• Language acquisition delays in terms of expression and comprehension</li> <li>• Difficulties in receiving or conveying a message effectively</li> <li>• Delay in general knowledge development</li> <li>• Difficulties in learning how to read and write: <ul data-bbox="1556 672 1927 850" style="list-style-type: none"> <li>- abstraction and inference</li> <li>- linguistic concepts and vocabulary</li> <li>- sentence structure</li> <li>- mastery of the concepts of time, space and quantity</li> </ul> </li> <li>• Use of lip-reading or sign language</li> </ul> <p data-bbox="1528 933 1885 992"><b>In terms of the student's ability to function in school:</b></p> <ul data-bbox="1528 997 1927 1256" style="list-style-type: none"> <li>• Difficulties on a personal and interpersonal level: frequent frustration, isolation, difficulty in making friends</li> <li>• Difficulties in understanding and interacting with others during group discussions and in working in a team</li> </ul>
<p data-bbox="785 1446 1150 1474">Support measures: regular support</p>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p>50 Pervasive developmental disorders</p>	<p>Students are deemed to have a pervasive developmental disorder when:</p> <ul style="list-style-type: none"> <li>they have been diagnosed by a <b>psychiatrist or a child psychiatrist working with a multidisciplinary team</b></li> <li>or</li> <li>by a <b>physician</b> (general practitioner or a pediatrician) <b>working with a multidisciplinary team</b> and whose expertise in evaluating pervasive developmental disorders is recognized by the health and social services network</li> <li>their overall functional evaluation on the basis of systematic observation techniques and standardized tests results in one of the following diagnoses: <ul style="list-style-type: none"> <li>- autism</li> <li>- Rett's syndrome</li> <li>- childhood disintegrative disorder</li> <li>- Asperger's syndrome</li> <li>- nonspecific pervasive developmental disorder</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>they exhibit <b>major limitations</b> with regard to <b>one or more</b> of the following: <ul style="list-style-type: none"> <li>- <b>communication</b></li> <li>- <b>socialization</b></li> <li>- <b>learning at school</b></li> </ul> </li> <li>the <b>persistence and severity</b> of the disorder prevents them from carrying out school tasks normally assigned to other students of the same age</li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>Pronounced difficulties in acquiring learning concepts</li> <li>Major communication difficulties, both with regard to oral and written language: type of discourse, aim of communication, etc.; difficulty understanding the context and recognizing nonverbal clues</li> <li>Very pronounced difficulties in reflecting on language</li> <li>Difficulties in planning and organizing time, space or work</li> <li>Few strategies for solving problems</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>Major difficulties in making friends and integrating into a group</li> <li>Difficulties in adapting to change and novelty</li> <li>Fearfulness, oppositional behaviour or fits in ordinary situations</li> <li>Cognitive rigidity, mannerisms, stereotyped gestures</li> </ul>
<p>Support measures: sustained support</p>			

Code	Diagnostic evaluation and conclusions drawn by a professional	Limitations or disabilities	Examples of generally observed academic difficulties
<p style="text-align: center;"><b>53</b> <b>Psychopathological disorders</b></p>	<p style="text-align: center;">Students are deemed to have a psychopathological disorder when:</p> <ul style="list-style-type: none"> <li>• they have been diagnosed, in accordance with the <b>multi-axial classification</b> of the <i>Diagnostic and Statistical Manual of Mental Disorders</i> (DSM-IV-TR), by one of the following professionals: <ul style="list-style-type: none"> <li>– a <b>psychiatrist or a child psychiatrist who works with a multidisciplinary team</b> or</li> <li>– a <b>physician</b> (general practitioner or pediatrician) <b>who works with a multidisciplinary team</b> and whose expertise in evaluating psychopathological disorders is recognized by the health and social services network</li> </ul> </li> <li>• a <b>systematic and overall multi-axial assessment</b> was carried out by the <b>multidisciplinary team</b></li> <li>• the systematic and overall multi-axial assessment includes the following axes: <ul style="list-style-type: none"> <li>– clinical disorders</li> <li>– personality disorders and mental retardation</li> <li>– general medical conditions</li> <li>– psychosocial and environmental problems</li> <li>– level of functioning</li> </ul>           and the information derived from all of these axes shows a <b>severe disturbance of functioning</b> </li> </ul>	<ul style="list-style-type: none"> <li>• they suffer from <b>major emotional, cognitive or relationship dysfunction</b> because of the <b>intensity</b> of their disorders</li> <li>• in spite of the support provided, their disorders: <ul style="list-style-type: none"> <li>– lead to marked difficulties in <b>adapting to school life</b></li> <li>– are of such <b>severity</b> that they <b>prevent the students from performing tasks normally carried out by students of the same age</b></li> <li>– require a <b>number of individualized adaptations</b> to learning and evaluation situations</li> </ul> </li> <li>• they are unable to <b>devote the required number of hours to regular school activities</b></li> </ul>	<p><b>In terms of learning:</b></p> <ul style="list-style-type: none"> <li>• Strong likelihood of experiencing learning difficulties or academic delays</li> <li>• Variable ability to engage in learning (e.g. depending on the time of day or from one week to the next)</li> </ul> <p><b>In terms of the student's ability to function in school:</b></p> <ul style="list-style-type: none"> <li>• Behaviour that can harm their physical or psychological well-being, or that of others</li> <li>• Difficulty relating to others: risk of being marginalized or isolated</li> <li>• Difficulty in temporarily adhering to a normal school schedule</li> <li>• Absenteeism resulting from psychopathological disorders or hospitalization</li> </ul>
<b>Support measures: sustained support</b>			

Code	
99 <sup>14</sup>	<p>Code 99 is assigned exceptionally to students when:</p> <ul style="list-style-type: none"> <li>• an overall functional evaluation shows that they have an impairment or a severe disorder, especially in light of their young age</li> <li>• their limitations are severe enough as to prevent them from functioning normally in the school environment</li> <li>• they require sustained support</li> </ul> <p>If they were confirmed, the conclusions drawn by professionals would correspond to another code. This code is assigned temporarily until the conclusions of the evaluation are clarified.</p> <p>It may also be assigned to a student under the following three conditions:</p> <ul style="list-style-type: none"> <li>• the diagnostic evaluation leads to the conclusion that the student has a special and extremely rare disorder</li> <li>• the limitations are so severe that they prevent the student from performing age-appropriate tasks in that particular school</li> <li>• the services provided involve sustained support</li> </ul>

14. Code 99 may be given to students who have special needs and who follow an individualized education plan in certain hospital centres that have been previously identified to play this role by virtue of a mental health mandate.



# At-Risk Students, Students With Learning Difficulties and Students With Behavioural Disorders

## EXPLANATORY NOTE

The 2005-2010 teachers' collective agreement, ratified in 2006, includes new provisions concerning at-risk students and students with handicaps, social maladjustments or learning difficulties.

This appendix examines what is meant by the term "at-risk student," and presents the definitions of the terms "students with learning difficulties" and "students with behavioural disorders," which can be found in Appendix XIX of the agreement.

The purpose of this appendix is to make all definitions regarding students with handicaps, social maladjustments or learning difficulties, as well as "at-risk students," available in one document.

## WHAT IS MEANT BY THE TERM "AT-RISK STUDENT"

The term "at-risk student" refers to students at the preschool, elementary and secondary levels who present certain vulnerability factors that may affect their learning or behaviour, and who may therefore be at risk, especially of falling behind either academically or socially, unless there is timely intervention.

Particular attention should be given to at-risk students to determine the appropriate corrective or preventive measures to be taken.

At-risk students are not included in the "students with handicaps, social maladjustments or learning difficulties" category.

## STUDENTS WITH LEARNING DIFFICULTIES

Students with learning difficulties:

- a) at the elementary level:
  - are those for whom an analysis of their situation shows that the remedial measures implemented by the teacher or by others for a significant period of time have not helped the student progress sufficiently in his or her learning to meet the minimum requirements of the Québec Education Program for the successful completion of a cycle in language of instruction or in mathematics.
- b) at the secondary level:
  - are those for whom an analysis of their situation shows that the remedial measures implemented by the teacher or by others for a significant period of time have not helped the student progress sufficiently in his or her learning to meet the minimum requirements of the Québec Education Program for the successful completion of a cycle in language of instruction or in mathematics.

## STUDENTS WITH BEHAVIOURAL DISORDERS

Students with behavioural disorders have undergone psychosocial evaluations given by qualified personnel and by the persons concerned using observation techniques or systematic analysis, and these evaluations show that the students suffer from a major deficit in their ability to adapt, as manifested in significant difficulties interacting with one or more elements of their school, social or family environment.

These difficulties may include:

- Overreactions to environmental stimuli (unjustified words or acts involving aggression, intimidation and destruction, and persistent refusals of appropriate disciplinary measures)
- Underreactions to environmental stimuli (excessive fear of people and of new situations, abnormal passivity, dependency and reclusiveness)

Difficulties interacting with the environment are considered significant and require special educational services when they adversely affect the development of young people with disorders or that of those around them, despite the ordinary support measures taken on their behalf.

Students with behavioural disorders often have learning difficulties due to a low level of determination in the completion of tasks or reduced levels of attentiveness and concentration.

