

## What's in a plan?

### Coral Kemp and Jennifer Stephenson

*Individual Education Plans* (IEPs) are used as planning tools in many developed countries (Dempsy, 2012). The purpose of the IEP document in the United States, as reported by Christle and Yell (2010), is to both direct and monitor all components of a student's individual program. Because the IEP is enshrined in law in that country, the need for individualised programs for students with disabilities is not debated. What is discussed is the quality of IEP documents and how they are used to guide practice.

What then is a quality Individual Education plan? It is generally accepted as best practice that individual plans for students with disabilities should include:

- A statement of the student's current level of achievement
- Outcomes that are critical and functional
- A statement of outcomes as measurable long term (annual) goals and short term objectives
- A method for collecting data and reporting student progress
- Decision making procedures
- Settings in which the skills are to be taught and practised
- Evidence-based intervention strategies

There is also agreement that the IEP needs to be developed in consultation with families, the student's teacher and, where possible, other professionals involved with the student and the student him/herself (Dempsy, 2012; Stephenson & Carter, 2015).

In Australia, the use of the term *Individual Education Plan* is not universal. Individual programs are variously referred to as *Individual Education Plans* (IEPs), *Individual Learning Plans* (ILPs), *Individual Support Plans* (ISPs), *Negotiated Education Plans* (NEPs), *Personalised Learning Plans* (PLPs), *Individual Transition Plans* (ITPs) and *Behaviour Intervention and Support Plans* (BISPs). However, individual program plans of the type accepted by the international community are not mandated in Australia and education departments have resisted the call for all children with special education needs, regardless of school placement, to have a formal IEP to guide individual program implementation. A review of the use of IEPs with 8 and 9-year-old students in Australian schools by Dempsy (2012) found that, although students receiving special education support were more likely to have IEPs than those not receiving this support, over 50% of students with a disability or medical condition did not have an IEP. Dempsy acknowledged that while having an IEP does not guarantee a quality education program it does provide a record of the planning process and, therefore, has value.

The Disability Standards for Education (2005), require Australian educators to make adjustments for students with disability in consultation with the family and the student. However, there are no clear guidelines as to the form that these adjustments might take, the information that should be used to guide their selection and the skills required by the staff who are developing and implementing them or guiding their implementation. In the 2020 review of the Education component of the Disability Standards (2005), it was noted that there is a lack of information on outcomes, specifically how the achievement of outcomes is monitored. This review also reported a need to amend standards to "include principles on consultation" (Recommendation 2, p. vii). It is unclear exactly what consultation should involve, and often adjustments for a student are generic rather than individual.

Research by Stephenson et al. (2020) into decision making for adjustments in regular schools in NSW found that most schools did have individualised planning for adjustments involving families, but adjustments were often about care,

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safety or participation rather than curriculum or instruction. They found that goals were very general or unclear, making monitoring of progress difficult. On the whole, monitoring was not well executed in schools and there was little information collected on student outcomes.

Unfortunately, despite recommendations from numerous inquiries into the education of students with disabilities, there is no real requirement for a formal written plan let alone a plan that includes clear and measurable objectives based on an assessment of individual student need and accompanied by evidence-based teaching strategies and inbuilt monitoring procedures, all of which are considered to be gold standard components of a quality plan.

It is clear from the research by Dempsey that departments of education across Australia are not doing enough to ensure that students with disabilities and other special needs have individual education plans to guide program implementation. For example, although IEPs were recommended following the 2010 and 2017 parliamentary inquiries into the education of students with disabilities in NSW, the response from the NSW Department of Education (NSW Government, 2011, 2018) to that recommendation has been disappointing.

Unfortunately, it is not just those students who are enrolled in mainstream education classes who do not have IEPs. Of concern are reports from parents indicating that teachers in special education classrooms in mainstream schools either have to be reminded of the need for a parent meeting regarding the development of an IEP for their child; that the first meeting is sometimes not held until well into the school year; or that the objectives included in the IEP are not based on an assessment of need and/or are not referred to in the half yearly or yearly reports to parents.

What then needs to be done to ensure that quality IEPs are developed for all students with disabilities in schools? We propose that departments of education across Australia not only mandate the use of IEPs for all students with disabilities, regardless of placement, but that guidelines are provided for what should be included in IEPs, who should be involved in their development and implementation and systems for measuring outcomes and reporting on progress to parents and other stakeholders. How much easier this would be if every school had at least one qualified special educator with training and experience in IEP development, including the identification of evidence-based interventions!

Let's imagine that we have reached first base and that all of our students with disabilities and other special education needs have an IEP with all the internationally recognised components in place. Although the written plan itself provides a good start, this plan will be worthless unless it is implemented as documented and does not remain a plan on paper only. Its value will also be diminished if it is not used as the basis for data-based decision making and reporting to parents and others providing services to the student. Again, having a qualified special educator on board would contribute to improvement in both the planning and implementation of individual programs.

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