

Alternative Curriculum Expectations and Assessment Companion Tool (ACE-ACT)

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Background

Data collected by the Ministry of Education as part of the Assessing Achievement in Alternative Areas (A4) project indicate that 0.9% of students enrolled in elementary and secondary schools in the province are not accessing Ontario curriculum and are exempted from standardized provincial tests. This represents approximately 17,000 students in the province. The study also revealed a lack of consistency in the use of assessment methods for these students. Additionally, boards of education were not collecting board-wide data on the achievement of these students (only 15.9% of boards reported collecting this data).

The Project

In June 2008, the Barrie region began to collaborate on a project to address these issues. Following discussions held by the superintendents, a working committee was formed, comprised of representatives from each of the 11 boards of education in the region. The working committee was comprised of board special education consultants and administrators, a language class teacher, a speech and language pathologist, and a researcher. This committee's mandate was to develop a tool to enable boards to monitor the progress of the students whose progress was not tracked using the usual data collection methods (i.e., CASI, EQAO, etc.). The working committee addressed the issue of data collection and it was determined that a data collection tool would not be sufficient until there was consistency across the region regarding what data to collect. A curriculum document containing expectations was required as well. Because oral language is the foundation for all skill development, it was decided that the project would start with an oral language curriculum.

The committee then worked collaboratively over the next several months to develop the Alternate Curriculum Expectations (ACE) document, a set of curriculum expectations that outline the development of oral language from birth to age 4, and the Assessment Companion Tool (ACT), which allows teachers to measure student achievement of the expectations as outlined in the ACE document. The assessment tool is designed to work in tandem with the curriculum expectations and to provide classroom teachers with a method to measure the developmental growth of a student in the area of oral language.

The ACE and ACT documents focus on student development and achievement in oral language rather than on disability and give teachers a measure for analyzing student achievement. As well, this assessment method also offers teachers a progressive tool for monitoring student skill acquisition and allows teachers to set specific and measurable performance tasks for individual students. It is not designed to replace other assessment methods but rather, to be used in combination with those methods to increase student achievement.

The curriculum expectations are outlined in 10 developmental levels. While the levels progress developmentally, students do not have to master the expectations in order. Students do not have to complete all the expectations within a level before progressing to a developmentally higher level. The assessment tool is designed to be sufficiently detailed to give teachers excellent data on the progress of a student, and it can be used for diagnostic, formative, or summative assessment. It may be used individually or as a whole-class assessment. The documents can also be used to design, monitor, or assess IEP-based goals and can better inform parents about the progress of their children.

The Pilot Study



With the document completed in draft form, the working group members selected teachers from each of their boards, in both mainstream and small-class settings, to pilot the use of the curriculum document and assessment tool with appropriate students in their classes during the fall and winter of the 2009–2010 school year. The intent of the pilot was multi-faceted. The teachers selected received in-service, common to all boards involved, on the use of the documents and were asked to develop student IEPs in the area of oral language

using expectations from the ACE document. IEPs from the previous year (prior to the use of ACE) will be compared to those written with the assistance of the documents to evaluate whether teachers were better able to select appropriate student goals and write them in measurable, specific terms. Report cards from both before and after the use of ACE were also gathered to evaluate whether teachers were better able to write meaningful report card comments in parent-friendly terms. Parents were also surveyed to find out whether they were better able to understand the progress that their child was making, as reported on the report card. Teachers were surveyed prior to the study regarding tools available to them to program for students and to report on progress to parents, and they will be surveyed at the end of the project to see if the ACE-ACT documents have assisted them.

All data from the project will be analyzed by June 2010. It is anticipated that all 11 boards will institute this common curriculum and assessment tool for use by their teachers for the next school year.

The Ministry and the A4 Pilot Project

During the fall of 2009, the Ministry announced funding for projects in the area of Assessing Achievement in Alternative Areas (A4). The Barrie region has used this project to enhance its ongoing ACE-ACT project. Data analysis for the project will be supported by a researcher as well as by the project lead. Further funds will be used to create a platform to support data that teachers of students on alternative curriculum will input into a centralized data collection tool, enabling board administrators to analyze data related to student progress.

Collaboration

One of the key lessons from this project was the value of the collaborative processes developed by the boards in the Barrie region. The input from the various disciplines on the committee was invaluable in the development of the project. The participation of every board in the region allowed relationships to develop across disciplines and provided opportunities for the various members to consult with each other and discuss issues not related to alternative curriculum. A strong collaborative relationship has been developed and continues to be fostered through networking opportunities and other shared projects. ●

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Knowledge Exchange at the Mental Health Commission of Canada

Peter Levesque

Knowledge exchange, knowledge mobilization, knowledge transfer, evidence-based practice, dissemination—there are over 100 related terms in current use to describe the explicit process of going from what we know to what we do. Articles have been written about what each term means. Examples have been given of people and organizations using them. Yet there is still confusion about what knowledge exchange is and why it is important.

When I was asked to write about knowledge exchange at the Mental Health Commission of Canada (Commission), my immediate answer was yes. It was yes because I respect the knowledge exchange work of the Council of Ontario Directors of Education. Your perspectives and efforts are important, have lasting impact, and influence the work of so many other sectors of our society and economy. Over the past five years, the work of the CODE Special Education Project has demonstrated the power of knowledge exchange and, when done well, its potential to fundamentally change how we do business. Many of the components of the Knowledge Exchange Strategy of the Mental Health Commission of Canada are similar to the components of the process that were used in the CODE Special Education Project.

This article will provide you with some background about the Commission, about the emerging Knowledge Exchange (KE) strategy, and why KE is an important part of the infrastructure needed for improvement in all sectors. You will find many parallels to the capacity-building activities that have been part of the CODE Special Education Project over the past five years.

Background

The proposal to create the Commission was first made by the Standing Senate Committee on Social Affairs, Science and Technology in November 2005. Almost two years earlier, in February 2003, the Committee, under the leadership of Senator Michael Kirby, had undertaken the first-ever national study of mental health, mental illness and addiction.

The Government of Canada announced funding for the Commission in its March 2007 budget and indicated that the mandate and structure of the Commission would be closely based on the proposal contained in the Senate Committee report. This report included a recommendation that the Commission “create an Internet-based, pan-Canadian Knowledge Exchange Centre to allow governments, service providers, researchers and the general public to access evidence-based information about mental health and mental illness and to enable people across the country to engage in a variety of collaborative activities.”

The Senate Standing Committee Report, *Out of the shadows at last: transforming mental health, mental illness and addiction services in Canada* recommended the following:

- That knowledge exchange be regarded as one of the core strategies of the Commission;
- That it create a pan-Canadian network as a reliable “point of access” that is also accessible to all;
- That it filter the accelerating accumulation of data on mental health;
- That it provide Internet-based distribution of information;
- That it publish studies, reports, and other documents; and
- That it monitor national and international developments in mental health.

The report also recommended NOT doing some things. These include:

- DO NOT fund and undertake specific research projects;
- DO NOT recreate and implement existing knowledge;
- DO NOT recreate existing tools;
- DO NOT maintain research databases;
- DO NOT provide 1-800 services; and
- DO NOT direct consumer/system/provider advocacy.