

Inclusive Education Audit Checklist

Student: School:		Pass	Not Pass	Comments: Why didn't it pass? Specifically what else is needed?
Please circle this student's category designation <i>Ministry Category</i> A B C D E F G H K P Q R				
Audit Checklist	<i>Category Checklist - current</i>			
	<i>INADS this year</i>			
	<i>Support Planning Tool</i>			
IEP	<i>Evidence of IEP consultation</i>			
	<i>Current year IEP - SMART goals. Goals consistent with identified needs from INADS, Support tool and designated category. Specialists or Community support detailed in IEP. Frequency/type of in-school supports clearly identified.</i>			
	<i>Last year IEP</i>			
	<i>Progress Report(s)</i>			
	<i>Behaviour Plan</i>			
	<i>Safety Plan</i>			
Medical Reports (Shows diagnoses)	<i>Doctor</i>			
	<i>Paediatrician</i>			
	<i>Psychiatrist</i>			
	<i>IHCAN</i>			
	<i>Other:</i>			
Professional Reports	<i>Psycho Ed</i>			
	<i>BASC or Connors</i>			
	<i>OT</i>			
	<i>PT</i>			
	<i>SLP</i>			
	<i>Behaviour consult - FBA</i>			
	<i>Other:</i>			
	<i>Proof of ongoing Outside Agency</i>			
History of Behaviour	<i>Current record of significant behaviours</i>			
Team Mtg. Notes	<i>Identifies date, topics, action, participants</i>			
Does the binder documentation meet the Ministry criteria for the category? PASS _____ NOT PASS _____		Comments: (please use back of page for additional comments)		