BRIDGING TO ADULTHOOD:

A Protocol for Transitioning Students with Exceptional Needs from School to Community

January 2023

Manitoba 🐆

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This resource is available on the Manitoba Education and Early Childhood Learning website at $\underline{www.edu.gov.mb.ca/k12/}.$

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INTRODUCTION

Purpose

Bridging to Adulthood: A Protocol for Transitioning Students with Exceptional Needs from School to Community:

- directs provincial government departments to support cross-departmental policy development and co-ordinate administrating bodies who work directly with students who have exceptional learning needs, which include school divisions, institutional schools (including those in correctional and treatment facilities, residential settings), regional health authorities and child and family services authorities
- outlines the interactive roles and responsibilities of transition planning partners and their timelines
- provides guidelines and support materials for transition planning and implementation

This document updates *Bridging to Adulthood: A Protocol for Transitioning Students with Exceptional Needs from School to Community, version 2008.* It is intended for transition planning partners, including Manitoba Families, designated agencies, Child and Family Services Authorities and Agencies, Manitoba Economic Development, Investment and Trade, Manitoba Health, Manitoba Mental Health and Community Wellness, regional health authorities and their programs and services, Manitoba Education and Early Childhood Learning, as well as educators in Manitoba.

As students work towards graduation, they must begin to plan for their options in life after high school. The goal is to help partners better support students with exceptional needs who require supports from the provincial government, its agencies and/or regional health authorities after leaving school. This includes students with intellectual, learning, neurodevelopmental, physical disabilities and psychiatric disorders. Included are students with Fetal Alcohol Spectrum Disorder, those with Autism Spectrum Disorder, persons with spinal cord injuries and persons with a visual disability or who are Deaf or hard of hearing. The transition planning process facilitates timely access to available adult supports and services.

SECTION ONE

Protocol for Transitioning Students with Exceptional Needs from School to Community

THE TRANSITION PROTOCOL

Interactive Roles and Timelines

The transition protocol identifies who is responsible for developing and implementing transition plans for students with exceptional needs when they require government supports to enter the community. It outlines the tasks and their timelines.

Partners in transition planning include:

- the student and their support network (which may include: parents¹ and/or legal guardians, siblings, friends, advocates, foster parents or group home staff)
- teachers and school/school division staff (including principals) and institutional school staff
- community service workers from Manitoba Families programs, including:
 - Children's disABILITY Services (CDS)
 - Employment and Income Assistance (EIA)
 - Community Living disABILITY Services (CLDS)
- vocational counsellors from Manitoba Economic Development, Investment and Trade and the designated agencies through the Employability Assistance for People with Disabilities (EAPD) program:
 - Under The Social Services
 Administration Act, the EAPD program delivers services to persons with specific disabilities through designated agencies that are funded by Manitoba Economic

Development, Investment and Trade. The three designated agencies are Manitoba Possible, Spinal Cord Injury (SCI) Manitoba and Vision Loss Rehabilitation Canada (VLRC).

- community workers from regional health authority (RHA) programs in Manitoba, including:
 - Community Mental Health (MH) services
 - Home Care program
- Legal guardians and support staff from child and family services (CFS) agencies if involved

Transition planning should begin in the school year in which the student enters high school. The process concludes in July of the calendar year in which the student turns 21 years of age or when they graduate. During this time, professionals, the student, their support network and others work together to provide the student with a coordinated transition from school to life in the community.

The transition planning protocol is summarized in Figure 1. The rows outline key responsibilities of transition partners. The columns identify timelines for specific tasks.

¹In some cases, only one parent or legal guardian may be involved in a child's educational and transition planning. The term "parent" in this document can apply to either of these. The rights and responsibilities of parents may also apply to students once they have reached the age of majority. For information on The Vulnerable Persons Living with a Mental Disability Act, see Appendix D.

Figure 1: Interactive Roles and Timelines in Transition Planning

Initiating the Process High School Entry (Age 14 to 16) Years where Overlap May Occur

Age 16 to 17

Age 17 to 18

One Year Before Graduation

Graduation Year

Students and/or parents/guardians with support networks, teachers, siblings, relatives, friends, advocates, foster parents or group home staff

- become aware of options and planning process
- think about potential community experiences (e.g., recreation, volunteering), graduation date, adult options (e.g., CLDS day services, residential supports, employment/training supports, etc.)
- provide information on strengths, interests, dreams

- explore residential support services of personal preference or plan to reside in family home
- understand the implications of leaving school before completing graduation requirements, or availability of adult supports
- at age 18, a person with a disability may contact Employment and Income Assistance for assessment of eligibility
- apply for appropriate ID
- age 18 may involve moving to an adult residential facility with support from adult programs (CLDS, MH)
- plan for post-secondary education/training, work/ community placement, or vocational/day service
- choose supports that match individual preferences/needs or advocate for new/enhanced services
- make informed decisions about
- employment
- move to post-secondary education/training, work/ community opportunities
- access a variety of supports/ services from communitybased service providers

School

- appoint a case manager for transition planning
- co-ordinate initial planning meeting with those closest to the student (student-specific planning team)
- begin appropriate work/ community experiences*
- explore potential graduation date and senior years programming direction with student, family and studentspecific planning team
- inform families about adult support options and transition planning process
- contact an adult program (CLDS, MH, EAPD) where there is no children's worker involved or coordinate contact with a children's worker

- coordinate annual transition planning meeting
- research eligibility criteria for adult programs
- initiate referrals to adult programs (CLDS, EAPD, MH) in consultation with parents
- include adult worker in studentspecific planning meetings
- assist with gathering information regarding supports required at home and in the community

- coordinate annual transition planning meeting
- increase focus of instruction towards priority outcomes for transition
- advocate for establishment of community supports for adult life, where none currently exist
- coordinate annual transition planning meetings
- increase work/community experiences*
- ensure curriculum supports a planned move to postsecondary education/training
- ensure completion of CLDS day services: information gathering and referrals
- include assigned adult community worker in planning meetings
- identify resources required: work/community

- coordinate annual transition planning meeting
- include assigned EAPD vocational counsellor in planning meetings and provide with current information
- ensure graduation/completion requirements have been met
- initiate long-term work/ community experience*
- coordinate continuity of supports with adult community worker or with work/ community

^{*} May include ongoing career development, work experience, volunteer experiences, exploration of day programming options, exposure to recreational opportunities, transportation training, skills for living in the community with independence, etc.

Figure 1: Interactive Roles and Timelines in Transition Planning

Initiating the Process High School Entry	Years where Overlap May		erlap May Occur -	1ay Occur	
(Age 14 to 16)	Age 16 to 17	Age 17 to 18	One Year Before Graduation	Graduation Year	
Services for Children					
Provincial Child and Family Service Agencies* • inform the family about the transition planning process and discuss potential adult service options (EIA, EAPD, etc.) and eligibility requirements • complete referrals for appropriate adult services in collaboration with the parents • attend school transitional planning meetings *Note: For children in care of child and family services agencies, CFS/ legal guardian should be involved in the process whenever a parent would be involved.	 complete referrals for appropriate adult services in collaboration with the family link the appropriate adult service worker(s) to the family, upon confirmation of program eligibility participate in school transitional planning meetings to ensure continuity of planning for services and supports 	continue to plan and make referrals to appropriate adult resources	a provincial child and family servic voluntary involvement under an Agage 21 for youth who are permane of the CFS agency child welfare service agencies provoversight of Indigenous Governing policies about involvement with you	greement with Young Adult to nt wards under the guardiansh viding services under the Bodies may have different	
Children's disABILITY Services Inform the family about the transition planning process and discuss potential adult service options (EIA, EAPD, etc.) and eligibility requirements complete referrals for appropriate adult services in collaboration with the parents attend school transitional planning meetings	 complete referrals for appropriate adult services in collaboration with the family link the appropriate adult service worker(s) to the family, upon confirmation of program eligibility participate in school transitional planning meetings to ensure continuity of planning for services and supports 	In consultation with adult services worker • continue to plan and make referrals for required supports			
Children's Mental Health inform the family about the transition planning process and discuss potential adult service options (EIA, EAPD, etc.) and eligibility requirements complete referrals for appropriate adult services in collaboration with the parent/legal guardian attend school transitional planning meetings	 complete referrals for appropriate adult services in collaboration with the family link the appropriate adult service worker(s) to the family, upon confirmation of program eligibility participate in school transitional planning meetings to ensure continuity of planning for services and supports 	In consultation with adult services worker • continue to plan and make referrals for required supports	Bridging to Adultho		

Figure 1: Interactive Roles and Timelines in Transition Planning

Initiating the Process High School Entry (Age 14 to 16) Years where Overlap May Occur

Age 16 to 17

Age 17 to 18

One Year Before Graduation

Graduation Year

Services for Adults (Employment and Income Assistance, Community Living disABILITY Services, Employability Assistance for People with Disabilities, mental health services and supports, Home Care Program)

 provide transition team with general information (re: referral process, eligibility criteria and adult service options)

Home Care Program

- receive referral and conduct assessment to determine eligibility
- provide information on adult resources
- case coordinator collaborates in developing care plan
- case coordinator arranges services specified in care plan
- participate in the facilitation of alternate residential placement in the community

Community Living disABILITY Services (CLDS)

- acknowledge receipt of referral, check eligibility and assign community worker
- community worker participates in planning meetings with transition team (at least one before assuming case responsibility)
- provide information on adult supports/service providers
- coordinate and complete the Supports Intensity Scale (SIS) assessment
- Supports Budget Level (SBL)
 establishes funding amount for
 residential/supports informed
 by the results of the SIS
 assessment
- complete referrals to residential service provider of choice as required
- provide information for establishment of community supports for adult life, where none currently exist

Day Services

- check eligibility and assign a community worker
- provide information on adult programs and resources in the community
- day service funding established according to SIS assessment and Supports Budget Level

Regional Health Authorities (RHA) Mental Health (MH) Services and Supports

- check eligibility and assign a community worker
- assigned worker participates in planning meetings (at least one before assuming case responsibility)
- provide information on adult resources
- complete referrals to adult resources
- request for funding for residential and/or support services if required at age 18

Home Care Program

 assess and facilitate request for funding for residential/support services if appropriate at age 18

Employment and Income Assistance

• apply in person at age 18 and beyond

Employability Assistance for People with Disabilities, RHA, designated agency (Manitoba Possible, SCI Manitoba, Vision Loss Rehabilitation Canada)

- acknowledge receipt of referral, determine basic eligibility** and assign vocational counsellor
- vocational counsellor participates in meetings with transition team
- provide information on adult supports/service providers
- develop individual vocational plan
- identify and initiate referral to service provider of choice and request funding for services, including technical assessments, upon student leaving school

Community Living disABILITY Services (CLDS)—Day Services

- ensure completion of previous steps in the referral process
- community service worker participates in meeting
- request funding for day service resources two years before graduation date
- referrals to day service resources and adult clinical services

^{**}Eligibility for Employability Assistance for People with Disabilities is a two-fold process: 1) basic eligibility is determined by a diagnosed disability; and 2) suitability for engaging in vocational/employment planning, which is determined through assessment. Students are able to be referred to EAPD at age 16. Referrals are typically submitted one to two years prior to graduation.

Interactive Roles and Responsibilities in Transition Planning

Manitoba Transition Support System

Transition planning for students who will require government supports when they move from school to life in the community is necessary to ensure coordinated service delivery. The transition planning process demands significant collaboration between students, their family/support networks, school divisions, educators, government and community service providers who are responsible for implementing the transition protocol. To accomplish a successful transition, it is important that all those involved with the students work together and fulfill their individual roles and responsibilities.

Figure 2 identifies key supports that may be involved with students in the transition process.

Manitoba Economic Development, **Investment and Trade Regional Health Authorities** Mental Health services for Workforce Training and Employment children and adults Employability Assistance for People with Disabilities Home Care program **Manitoba Families** • Children's disABILITY Services **Child and Family Services** Community Living **Authorities** disABILITY Services Student • Provincial CFS agencies Employment and Income **Assistance** Support Network **School Divisions** Parents/legal guardians and Educators Friends Educational programming Advocates Coordination of transition Foster families planning · Cultural and spiritual supports Others **Designated Agencies** and Service Providers Services funded by government and delivered by designated agencies or service providers

Figure 2: Manitoba Transition Support System

For legislation affecting transition teams, see Appendix D.

Students

Students are the central member of the transition planning team. Their role is critical in goal setting and decision-making. Students and their support networks should be active participants in transition planning. Support networks may include parents/legal guardians, siblings, relatives, friends, teachers, advocates, foster parents or residential or other support staff.

Students, with help from their support networks, may participate in transition planning by:

- attending student-specific planning meetings
- sharing information with the team on their interests, skills and hopes for the future
- becoming aware of options and the planning process
- participating in assessments designed to identify current skills and needs
- expressing their opinions in the decisionmaking process
- thinking about potential community experiences (e.g., recreation, volunteering), graduation date, asking yourself "What am I going to do after graduation?"
- choosing preferences for residential supports or planning to reside with family
- understanding the implications of leaving school at age 16 or 17, or graduation before adult supports are available
- at age 18, contacting Employment and Income Assistance for assessment of program eligibility
- at age 18, considering a move to an adult residential care facility (i.e. shift-staffed group home or Home Share) with support from adult programs (e.g., CLDS), if appropriate
- planning for post-secondary education/ training, work/community placement, or vocational/day service
- choosing supports that match individual preferences and needs completing school requirements

Parents, Legal Guardians, Foster Parents, Caregivers and Support Networks

Parents, legal guardians, foster parents, caregivers and others legally authorized to make decisions are also key members of the transition team. They can ensure that transition planning reflects the interests and values of the student.

The school principal must ensure that parents and students have the opportunity to have a person of their choosing in the process and attend planning meetings.

The suggested roles of these team members include:

- attending student-specific planning meetings
- sharing with the team their knowledge of the student's interests, strengths and needs
- supporting the students during the transition process
- participating in the decision-making process
- encouraging and helping students participate in transition planning
- finding information on available services and resources, currently or following graduation
- supporting implementation of the plan
- sharing information about the student's progress
- becoming familiar with The Vulnerable Persons Living with a Mental Disability Act (see Appendix D)

Standards for Appropriate Educational Programming in Manitoba (2022) reinforces the transition planning protocol for students who will need adult supports. Teachers' roles are also outlined in the Manitoba Pupil File Guidelines (2012).

School Principals

Principals are responsible for studentspecific plans and transition planning, which includes:

- initiating planning for students entering high school who may require adult supports and services when they leave school
- identifying planning case managers within the school and ensuring planning involves teachers and other school staff
- ensuring that transition planning is coordinated with a student's educational programming
- involving the registered nurse in transition for Unified Referral and Intake System (URIS) Group A students
- ensuring the involvement of child and family services agencies, Manitoba Families, Manitoba Economic Development, Investment and Trade, designated agencies (Manitoba Possible, SCI Manitoba and Vision Loss Rehabilitation Canada) and/or regional health authority programs and services
- ensuring planning is updated annually, or sooner if required
- ensuring parents are meaningfully involved in decision-making
- ensuring parents have the information they need to make informed decisions
- ensuring students and their parents have the opportunity to have a person of their choosing at individual planning meetings
- establishing, maintaining and retaining a pupil file for each student in a school
- transferring the pupil file and pupil support file of students who move to another school, within one week of the new school requesting it
- ensuring appropriate referrals are made to the necessary adult support programs

Student Services Administrator

Consistent with Appropriate Educational Programming in Manitoba, the student services administrator or designate within a school division assumes a leading role in transition planning and is responsible for:

- initiating contact early in the school year (at the latest by November 30) with designated personnel from Manitoba Families, regional health authority programs and services, child and family services agencies and others to discuss planning for identified students within the school division
- providing consultation and professional learning opportunities to equip the case manager and the school staff for transition planning for students with exceptional needs

Determining when a student's right to attend school ends:

Students have the right to attend school until they graduate or until June of the calendar year in which they turn 21. To determine when a student's right to attend school ends, add 21 to their year of birth.

For example:

- Yuvraj's birthday is February 15, 2010.
 Yuvraj is therefore eligible to attend school until June 2031.
- Samyha's birthday is December 10, 2010.
 Samyha is therefore eligible to attend school until June 2031.

For information on the transfer of a pupil file and continuation of transition planning when a student changes school or school division, see Appendix A. For transition case checklists, See Appendix B.

Case Managers (Transition Planning)

Case managers are designated by principals and will assume primary responsibility for coordinating the transition planning process. The educational activities of the student should be informed by transition plans. Principals should assign school staff (e.g., student services teacher, classroom teacher, or counsellor) who act as case managers and have responsibility for the educational programming of the student, unless another professional is more appropriate. Specific roles of case managers in transition planning include:

- scheduling and facilitating transition planning meetings
- determining graduation dates along with students, parents/legal guardians
- determining members of transition planning teams in consultation with students and parents
- facilitating agreement about the roles and responsibilities of team members
- monitoring implementation of transition planning
- maintaining transition planning documents (e.g., student assessments, transition planning file, documentation of the plan, meeting notes and other related materials)
- updating plans annually and keeping pupil files current
- maintaining communication with team members, students, parents or legal guardians
- helping the student and parents find services and resources available in the community
- ensuring appropriate referrals are made to the necessary adult support programs

Teachers

Students' educational programming should be a part of the transition planning process. The commitment and collaboration of teachers (including resource teachers, inclusive education teachers, classroom teachers, subject teachers, guidance counsellors and so on) who are involved with the students are critical.

A teacher's roles may include:

- assessing the student's strengths, needs, interests and performance
- making connections between the transition planning goals of the students and their educational goals
- helping students who want postsecondary education by identifying the admission and learning pre-requirements and preparing accordingly

School Division—Student Services Staff

Student services staff who are closely involved with transitioning students may become members of the transition planning team. They may include speech and language pathologists, occupational therapists, social workers, psychologists, etc.

They may:

- identify specific ongoing needs of the student, including service requirements
- provide assistance to increase independence and potential of the student to successfully adapt to and maintain a more independent adult life

Interactive Roles and Responsibilities of Community Workers and Vocational Counsellors from: Manitoba Families; Manitoba Economic Development, Investment and Trade; Regional Health Programs/ Services; and Child and Family Services Agencies

Children's Services Workers

Workers from Manitoba Families, regional health authorities and child and family services agencies who are involved with the student should participate in the transition planning process until the team agrees that a transfer to appropriate adult services is completed.

Children's disABILITY Services

Manitoba Families Children's disABILITY Services (CDS) program provides services and supports to birth, extended or adoptive families and legal guardians who are raising children with developmental and/or physical disabilities. Services and supports are available through regional offices that are located throughout the province.

The role of the CDS program in the transition planning process may include:

- informing the family about the transition planning process and discussing potential adult service options and eligibility requirements
- completing referrals for appropriate adult services, which include supporting documentation/current assessments in collaboration with the family and school
- attending school transitional planning meetings
- connecting the adult service worker(s) with the family, upon confirmation of program eligibility
- participating in school transitional planning meetings to ensure continuity
- working with adult service workers to provide ongoing planning and referrals

Child and Adolescent Community Mental Health Workers

The roles of child and adolescent community mental health workers, from services provided by regional health authorities, may include:

- attending transition planning meetings to provide current information to the team on available services and supports
- helping students, parents, school teams and support networks explore and determine appropriate adult supports and residential options
- making referrals to appropriate programs for adults within recommended timelines
- connecting with assigned adult services workers to co-ordinate supports and services
- helping students and families find potential resources in collaboration with adult services workers and school teams

Child and Family Services Workers

The roles of the child and family services agency workers may include:

• attending transition planning meetings to provide current information to teams about available services and supports

- helping students, parents, school teams and support networks find appropriate adult supports and residential options
- making referrals to appropriate programs for adults within recommended timelines
- connecting with assigned adult services workers to co-ordinate supports and services
- helping students and families find potential resources in collaboration with adult services workers and school teams

Adult Services Workers and Vocational Counsellors

Adult services workers and vocational counsellors from Manitoba Families, Manitoba Economic Development, Investment and Trade, designated agencies and regional health authority programs/services must be involved in transition planning.

One or more of the following programs may be considered, depending on the needs of the student:

- Employment and Income Assistance
- Community Living disABILITY Services
- Employability Assistance for People with Disabilities (through Manitoba Economic Development, Investment and Trade, or designated agency, Manitoba Possible, Spinal Cord Injury Manitoba, Vision Loss Rehabilitation Canada)
- Community Mental Health Services
- Home Care Program

Once an individual is deemed eligible for a support program and the availability of those supports is confirmed, the roles of the adult worker and/or vocational counsellor may include:

- providing information to students, parents/legal guardians and school teams on adult programs and services (e.g., residential, vocational and recreational) available in the community
- making referrals to appropriate community programs and services
- ensuring wherever possible that services are in place for students when they graduate
- working with students, parents and school teams in annual transition planning meetings as necessary (attending at least one annual transition planning meeting before assuming case responsibility)

Community Service Providers

Community service providers include government funded community organizations that may provide direct supports for eligible adults. Community service providers may help transition planning teams by:

- · attending transition planning meetings as required
- presenting specific information to teams about their services
- assisting the team in determining the knowledge and skills critical for the student to transition successfully to adult supports (suggestions for high priority outcomes)
- providing direction for students and planning teams in preparing for, obtaining and maintaining employment (through assessment and assistance in developing work training outcomes and methods)

Adult Support Programs and Services

Adult Support Programs and Services Administered by Manitoba Families; Manitoba Economic Development, Investment and Trade; or Designated Agencies

Please note that applicants for adult support programs and services must be Manitoba residents who are Canadian citizens or legally entitled to live and work in Canada. A registered member of an Indian Band in Manitoba must have established a permanent residence off-reserve before a referral or request for services.

Adult supports for individuals with exceptional needs may be provided by Manitoba Families through regional offices or through designated agencies, including:

- Employment and Income Assistance
 - provided through regional offices of Manitoba Families
 - an in-person application may be made at age 18
 - must meet eligibility criteria to be eligible for the Persons with Disabilities category
- Community Living disABILITY Services
 - coordinated through Community Service Workers
 - accessed through regional offices of Manitoba Families
 - based on eligibility criteria to receive supports under the CLDS program
 - Residential Services offers a range of options to help individuals age 18 and older live in the residential setting that best meets their support needs

Day Services include a range
 of supports and training to help
 individuals participate in the community
 and pursue supported employment,
 vocational skill development, personal
 development and other opportunities.
 Participation in day service
 programming is available to individuals
 beginning in July of the calendar year
 they turn 21 years of age.

Vocational support for individuals with disabilities may be provided by Manitoba Economic Development, Investment and Trade through regional offices or through designated agencies, including:

- Employability Assistance for People with Disabilities (EAPD)
 - delivered by provincial government vocational counsellors, mental health workers and employment development specialists within regional health authorities and through designated agencies who provide services to persons with specific disabilities (e.g., Manitoba Possible, Spinal Cord Injury Manitoba Inc. and Vision Loss Rehabilitation Manitoba)
 - can apply to the program at age 16 or over and not attending school
 - applicants must meet specific eligibility criteria and be able to enhance their ability to regularly pursue employment through voluntary participation in rehabilitation/ training process appropriate for their individual needs and vocational goals

All these programs may include assessment, planning, information, referral, guidance, counselling, treatment, skill development and resource development.

The student, along with their transition planning teams, should contact their regional service centre early in transition planning for complete details on available programs, including eligibility requirements.

Contact Manitoba Families regional offices for inquiries for Employment and Income Assistance, Community Living disABILITY Services and other services from Manitoba Families: gov.mb.ca/fs/locations.html and www.gov.mb.ca/fs/misc/loc/ruralnorthern.html.

Individuals with an intellectual, psychiatric or learning disability should email <u>EAPD@gov.</u> <u>mb.ca</u> with inquiries about the Employability Assistance for People with Disabilities Program. Contact information is available at: <u>www.gov.mb.ca/wd/ites/vrmanual/index.html</u>.

Inquiries about the Employment Assistance for People with Disabilities programming delivered by the designated agencies should be directed to:

- Manitoba Possible: <u>www.manitobapossible.ca</u> and Employment Preparation Centre (EPC)
- Spinal Cord Injury Manitoba: <u>www.scimanitoba.ca</u> and Education/Employment Services
- CNIB: <u>www.cnib.ca</u> or CNIB's "Work" Programs
- Vision Loss Rehabilitation Canada: www.visionlossrehab.ca/en

Adult Support Programs Funded by Manitoba Health and Manitoba Mental Health and Community Wellness

Adult support programs may be available through regional health authorities (RHAs) and include the Community Mental Health Services and Home Care Program.

RHAs deliver mental health services, including planning, delivery and ongoing management of services in Manitoba. Community mental health workers provide services through the RHAs and Community Mental Health Services.

- Community Mental Health Services
 - Applicants must contact the regional health authority where they reside to learn about the specific eligibility criteria and intake process.
 - Participation is voluntary and requires the informed consent of the individual for referral, beginning at age 17.
 - Services are for individuals age 18 or older with mental health concerns that compromise their capacity to participate in major life activities such as family life, employment, education, community or social relations (e.g., schizophrenia, major affective disorders, bipolar disorders, anxiety disorders).

Questions about the responsibilities at the local level can be directed to the regional health authorities at: www.gov.mb.ca/health/rha/contact.html.

- Home Care Program
 - delivered by RHAs who are responsible for:
 - accepting referrals and determining eligibility for home care services, based on a multi-disciplinary assessment
 - developing a plan of care which takes into account the needs of the individual and family as well as available community resources
 - determining the amount and type of services to be provided

SECTION TWO

Protocol for Transitioning Students with Exceptional Needs from School to Community

Person-Centred Transition Planning

Person-Centred Planning

Students go through different stages of transition during their school years, from preschool to school, from early years to middle years, from middle to senior years and from school to adult life. These stages often involve changes in environments, roles and responsibilities, needs, and social relationships. The transition from school to adult life causes substantial changes in the lives of students and families.

Person-centred planning strives to provide services and supports that meet the specific needs of the individual. The participation of the student in planning is crucial, as their interests, strengths and circumstances are the key factors to developing a unique plan for them. A person-centred planning process involves key people working together to develop a transition plan that meets the student's needs, using available resources, or advocating for new or enhanced services.

Person-centred planning in transitioning from school to adulthood may include:

- pursuing academic areas of interest and continuing meaningful involvement in school life past age 18
- celebrating the completion of high school through a graduation ceremony with peers, and then shifting focus towards life and work preparation with continued support from the school
- pursuing a combination of volunteer and work experience through the school
- shifting school focus towards meaningful participation in community life (e.g., volunteering or recreational programming) in increasing independence
- high school completion after four years and transition to the support of a community service provider
- preparation for post-secondary education after high school

Person-Centred Transition Planning

Individual students' strengths and needs are always unique and may require many coordinated services for successful transition. A student's current level of performance in transition areas all become a part of a student profile that influences their transition planning. Considering a student's individual strengths and needs helps ensure a successful transition.

Goals and Objectives

The goal of person-centred transition planning is to help students achieve an optimum quality of life as they become adults in the community.

An effective team will:

- identify the student's interests, preferences, strengths and needs
- involve and empower the student and family in the transition process
- · increase the capacity of the student for meaningful participation in community life
- identify potential adult support options (e.g., recreation, continuing education and/or community life)
- identify and secure required resources and supports for successful transition
- ensure that implementation plans are made
- involve the student, family and other team members in carrying out the plans

Effective Practices in Transition Planning

The following principles should be considered in transition planning:

- 1. Early coordinated planning
- 2. Student, parent and support network involvement
- 3. Team collaboration
- 4. Inclusive, community-based approaches
- 5. Developing a student's self-determination and self-advocacy skills
- 6. Comprehensive and functional approaches

1

Early, Coordinated Planning

Early planning gives teams sufficient time to understand the student and their needs, develop their potential, secure necessary resources and explore opportunities. To be effective, transition planning should revisit the goals, activities, roles and responsibilities of team members, as the student grows older.

2

Student, Family and Support Network Involvement

Student and family involvement (parents, legal guardians, foster parents, siblings, grandparents) is fundamental to ensuring students' needs, interests and capabilities are reflected in the transition planning process.

The student is the central member of the transition planning team. Their role is particularly central in goal setting and decision-making. The roles of the student in transition planning include:

- attending individual planning meetings, if possible
- · sharing information on their interests, skills and hopes for the future
- participating in assessment designed to identify current skills and needs
- identifying goals in transition planning
- expressing their opinion in the decision-making process
- fulfilling their share of the responsibilities to reach the goals of the plan

Parents, legal guardians and foster parents are key members of the team who can ensure that transition planning reflects the interests, benefits and values of the student.

Suggested roles include:

- understanding the transition planning process and obtaining relevant information
- attending student-specific planning meetings
- · sharing their knowledge of their child's interests, strengths and needs
- · helping the student identify goals achievable with effort

- offering opinions and participating in the decision-making process of transition planning
- encouraging and helping their child participate in transition planning
- finding information on services and resources available, currently or after graduation
- helping the student carry out the responsibilities assigned to them in the transition plan
- helping the student develop independence and self-determination in everyday living
- visiting various placement options or programs to help the student make decisions for future options (e.g., residential, vocational, recreational)
- sharing information about the student's progress

Along with the student and the family, members of the student's support network who can provide valuable input for transition planning should be included in planning. A support network may include siblings, friends, advocates, group home staff, etc.

Strategies to support student involvement include:

- previewing the agenda of team meetings with the student
- providing the student with an orientation on the general process of transition planning
- helping the student understand their role and responsibilities in transition planning and the significance of their participation
- using an alternate/augmentative communication system for the student if they have difficulty communicating
- ensuring sufficient opportunities and time for the student to express opinions and make decisions
- making transition planning meetings personal and welcoming to the student, by inviting individuals with whom the student feels comfortable and arranging a welcoming environment (e.g., preparing snacks, playing music, providing comfortable seating)

Strategies for parental* involvement include:

- clarifying the roles and responsibilities of the parents in the process
- maintaining frequent communication with parents about the student's needs and progress
- providing orientation on the purpose, process and key decisions in transition planning (ex: web-based information, booklets, information evenings)
- informing parents about programs and services available in the community and how to access them (ex: transition fairs, tours of adult service providers, booklets)
- arranging transition planning meetings that are convenient for them to attend
- providing them with a meeting agenda in advance
- ensuring they have opportunities to offer their opinions freely and raise concerns during meetings

*The term parent in this context includes the following: parents, legal guardians and foster parents.

Team Collaboration

Transition planning may involve many partners from various disciplines and organizations, including school divisions, government, designated agencies, service providers, advocates and the community. It is critical to establish and maintain a collaborative team to effectively support the student through transition from one support system to another.

A collaborative approach allows team members to communicate and share information and resources. Effective, accountable, seamless transition planning relies on team collaboration. Clarification of the roles and responsibilities of the members is also crucial.

4

Inclusive, Community-Based Approach

No matter how intense and complex the needs of a student are, everyone has the right to be included as part of the community whether as students or as adults living in the community with support. It is important for students to be a part of inclusive communities inside and outside of school so they can reach their goals in areas such as social relationships and employment. In inclusive schools, transition planning should facilitate inclusive experiences and instruction for a student with exceptional needs as much as possible.

5

Developing Self-Determination and Self-Advocacy Skills

Developing a student's self-determination and self-advocacy skills enhances their own transition planning and the quality of their lives as adults in community life. This involves developing student-specific outcomes in areas such as:

- decision-making
- problem solving
- taking initiative
- self-management

The family, school and other team members should help students find and use opportunities to develop and exercise self-determination and self-advocacy in their daily routines. A student may require practice in:

- expressing personal preferences and interests
- communicating wants and needs with others

- making decisions and explaining the reasons
- identifying problems or difficulties in a given situation and finding solutions
- being aware of situations that need self-advocacy (e.g., discrimination, harassment, abuse, etc.), and how to deal with them
- setting goals and taking action to achieve them

6

A Comprehensive, Functional Approach

Transition planning requires a comprehensive, functional approach covering such things as vocational skills, social skills, independent living, health, daily living skills and academic knowledge. For students with limited daily living skills and difficulties in applying learned skills in different contexts, the transition team will need to focus on developing functional skills that will be useful in adult life in the community. Many students with exceptional needs require extensive, specific instructions and/or support to develop many of the skills others acquire through daily experiences.

In addition, teaching functional skills to students with exceptional needs may be combined with community-based experiences (e.g., work experience, shopping/banking skills, transportation skills) in situations where they are likely to be needed.

Meeting Preparation

Well-organized meetings are essential for effective person-centred transition planning. Case managers and other team members should ensure:

- The individual student's dreams and vision for the future are the standard toward which the planning team strives.
- Planning is results-oriented with achievable goals and a plan for implementing and monitoring of outcomes.
- The focus of planning is on the strengths, interests and hopes of the student and the required supports, rather than on the student's disabilities.
- Planning respects and reflects the student's background (e.g., family values, way of life, culture, community life).

When, How Often and Where?

Planning meetings may be formal or informal. Informal meetings may occur as frequently as needed, anytime throughout the year and involve contact by phone, email or in person. Formal transition planning meetings must be held at least annually. Annual outcomes need to be decided on shortly after the beginning of each school year.

The time and location for meetings should be arranged by case managers to accommodate the participants as much as possible. Accessibility and convenience for the students and parents² are important.

Who Should Attend the Meeting?

A transition planning case manager should consult with the student and parents about who will be invited to the student-specific planning. The core team should include the student, parents and/or legal guardian/CFS agency worker and the case manager. The student's friends or advocates should also be welcomed to attend if their presence will provide support and/or important information.

While many professionals and other support people (e.g., teachers, administrators, specialists, community service providers, advocates, etc.) may be involved in the transition planning for the student, the team may choose to invite only the people who are directly related to the issues on the agenda to any given meeting. The case manager should consult with the student and family about whom they want to invite to a meeting.

²The term parent in this context includes the following: parents, legal guardians, foster parents.

Conducting the Meeting

Planning meetings should take a holistic approach to priority learning needs (e.g., employment, housing, personal management, health, community participation, recreation, etc.) in order to identify the needs of the student and coordinate services. The work of meeting participants may include:

- sharing new information about the student
- identifying gaps in what the team knows about a student
- developing/updating a student profile
- evaluating the progress and outcomes of previous planning or describing current levels of performance
- discussing adult support options and requirements, including contacts to be made
- setting the priorities to be addressed in the plan
- identifying student-specific outcomes and performance objectives
- developing implementation plans
- · establishing and updating roles and responsibilities
- identifying responsibilities for writing, updating and sharing student-specific plans.

Strategies for team collaboration:

- Create a positive, respectful and welcoming atmosphere.
- Avoid the use of jargon.
- Establish a joint vision and shared mission.
- Ensure every member is familiar with the purpose of the transition planning process.
- Clarify roles and responsibilities.
- Develop specific implementation plans with assigned timelines and monitor the process and results.
- Establish a communication network among members (e.g., phone, email, regular meetings).
- Develop agreements for collaborative teamwork and document them.

The transition planning case manager's leadership is particularly crucial in ensuring team collaboration.

Transition Planning Process

Transition planning may follow the same process as student-specific planning. In Manitoba, student-specific planning is a global term for any written plan developed by a team that addresses the individual needs of a student. School teams, including families, are likely to be familiar with the student-specific planning process. What may occur, beginning in Grade 9, is that the planning process begins to take on a new perspective with domains and any student-specific outcomes (SSOs) addressing transition needs taking priority as high school completion nears.

Transition planning consists of four steps consistent with individual education planning:

- 1. Setting direction
- 2. Gathering information
- 3. Developing the transition plan
- 4. Implementing and reviewing the plan



Setting Direction

Case managers who are responsible for transition planning will identify key team members as the first step of the process. The team members will include people who are currently involved with the student as members of the planning team.

The team should also include people who will be involved as the student prepares to leave school. These include community workers from Manitoba Families, Manitoba Possible, SCI Manitoba, Vision Loss Rehabilitation Canada, child and family services agencies and regional health authority programs/services. Community service providers and members of support networks may also have a role in individual transition planning.

Depending on the needs of the student and individual circumstances, some team members will be permanent, while others participate on as needed basis or upon request.

After identifying the team members, setting direction may involve:

- orienting the members about the transition process
- clarifying member's roles and responsibilities
- deciding on a process for collaboration and sharing information

Gathering Information

Observation and assessment are ongoing in transition planning. They help the team monitor the student's transition needs and determine appropriate outcomes.

The team may gather information about:

- the student's vision for the future as well as interests, hopes and aptitude (with input from family and support networks when appropriate)
- background information about the student and his/her family and community (e.g., language, culture, way of life, etc.)
- the student's current level of performance, experiences, strengths and needs
- the skills or knowledge the student requires for successful transition
- the available community-based services and resources
- the ongoing requirements for adaptations or assistive technological devices or therapies to help the student

To gather this information, the team may:

- conduct curriculum-based assessments
- collect work samples
- interview the student, parents, teachers, or other support staff
- use inventories or checklists from the student, parents, or other support staff
- use specific observations of the student in various settings (e.g., classroom, home, worksites, retail store, etc.)
- examine existing documents (ex: student school records, previous student-specific planning or assessments)
- guide the student in developing a career portfolio
- assess the student's specific skills in various real life settings (e.g., vocational, behavioural, academic)
- conduct diagnostic assessments (formal or informal cognitive, or adaptive testing)

3

Develop Transition Plans

Selecting Priority Learning Needs

Successful adults try to balance their daily lives. Transition planning also requires balancing several areas:

- A. Life-long learning
- B. Employment/career development
- C. Building social networks and inclusion
- D. Living in the community with independence

Although priority outcomes in transition planning may vary for individual students, the team should assure that any concerns in these areas are addressed.

A. Life-long Learning

i. Post-Secondary Education

Some students may choose post-secondary education after high school. Persons with disabilities have the right to reasonable accommodation within post-secondary institutions. Post-secondary institutions may require skills or specific prerequisites for acceptance that often demand long-term preparation, such as particular course credits or skills.

The transition planning team may support a student in areas such as:

- exploring the student's areas of interest, strengths and needs
- supporting self-determination and self-advocacy skills
- helping the student develop skills needed for post-secondary education (e.g., effective study strategies, literacy, computer skills, communication)
- learning what the entrance requirements are for post-secondary institutions
- identifying disability services available in post-secondary institutions
- · helping the student in the application process
- arranging for assistive technical devices and investigating the portability of specialized equipment from one system of support to another

For information on post-secondary education institutes in Manitoba, see the Advanced Education, Skills and Immigration website at: www.edu.gov.mb.ca/ald/uni_coll.html.

ii. Other Community Programs and Training Options

Students who do not choose post-secondary education may benefit from other community programs or training opportunities to advance their employment or community life after graduation. The transition planning team needs to assure that the student and the family are able to access information on available community resources.

B. Employment/Career Development

Work enables individuals to achieve independence, contribute to society, develop social relationships and establish self-esteem. Therefore, this area is particularly important in transition planning for students with exceptional needs. Some students may require specific individual supports for career development.

Through career development, a student may:

- earn high school credits
- learn and practice pre-vocational social skills
- develop employability skills
- expand resumes and career portfolios
- make contacts with people in the business community, adjust employment expectations, explore employment options and narrow job search focus

C. Building Social Networks and Inclusion

This area may involve developing friendships, collaborating with others and participating in social and cultural events.

Areas the transition planning team may address include:

- developing social skills
 - offering and asking for help
 - negotiating conflict
- increasing social integration/networking opportunities
 - maximizing inclusive placement with peers and the general public
 - exploring interests, hobbies, volunteer and leisure activities
- meeting with those who interact with the student to help them
 - understanding the characteristics, strengths and needs of the student
 - communicating comfortably and successfully with the student

Career Development Curriculum

Manitoba's career development curriculum are developed by Manitoba Education and Early Childhood Learning to help schools prepare students for their future careers. The following five themes included in Manitoba's life/work exploration curriculum are a guide for transition planning for all students, including those with exceptional needs:

- personal management
- career exploration
- · learning and planning
- job seeking and job maintenance
- career and community experiences

D. Living in the Community

This area addresses the personal management, community participation and self-advocacy issues that an independent adult faces in the community. Examples include:

- personal management, such as:
 - daily household tasks, such as cooking, cleaning, shopping
 - personal care and hygiene
- community participation, such as:
 - voting
 - accessing community facilities and resources
- self-advocacy, including:
 - self-awareness (e.g., strengths, weaknesses, specific needs)
 - awareness of potential risks and ways to prevent or deal with them

For some students, increased independence will require specific training and supports. To be effective, the instruction and assistance should be combined with community-based experiences, in places where those skills are most likely to be used. Since many activities in the home environment involve these independent living skills, collaboration with home is necessary in helping the student develop and generalize necessary life skills.



Plan Implementation and Review

Effective implementation of the plan requires ongoing communication among the team members.

The identified learning outcomes and instructional strategies are clearly understood by all team members who may be involved with the supported individual on a daily basis. Implementing the plan also involves:

- securing appropriate co-operation, partnerships, resources and services
- maintaining ongoing communication with the student, parents and other team members
- monitoring the progress of implementation
- revising and adapting the plan as necessary
- communicating the progress and outcomes of the plan with team members
- reviewing and updating the plan annually

Problem Solving/Dispute Resolution

Transition planning involves a number of people working together for a common purpose. Different opinions are a natural part of working relationships. Sometimes these differences lead to disagreements or disputes. Informal dispute resolution is a co-operative, creative, problem solving process.

Working Together: A Guide to Positive Problem Solving for Schools, Families, and Communities is a resource to support local school and school division dispute resolution policies and practices.

Working Together: A Guide to Positive Problem Solving for Schools, Families, and Communities can be found at:

www.edu.gov.mb.ca/k12/specedu/problem_solving/index.html.

APPENDICES

APPENDIX A: Transfer of a pupil file and continuation of transition planning when a student changes school or school division

A pupil file and the pupil support file will contain information important for the transition planning team, including a copy of the latest student-specific plan for the student. When a student transfers to another high school, there is an expectation that the new team will carry on transition planning and that the plan will be adjusted as necessary.

A student's pupil file and pupil support file will typically include:

- information on the student's citizenship and legal entitlement to work in Canada
- the most recent student-specific plan and/or health care plan specifically devised for the student and any amendments
- current notes on referrals to/contacts with external agencies (e.g., child and family services) or caregivers
- detailed documentation from school clinicians and special education/resource staff about all inter-agency contacts and services
- ongoing health/psycho-social/counselling information, whether medical, psychological or behavioural
- the results of special diagnostic tests
- reports from service providers such as agencies, hospitals and clinics
- any other assessment or evaluation the parents/legal guardians or the student want(s) placed in the file

APPENDIX B: Transition Case Checklists

Transition Case Checklist: High School Entry – Ages 14 to 16

	Name	Phone Number
Student		
Parent		
Legal Guardian		
Case Manager (Transition)		
Children's Program Contact		
Community Worker		

School

Date Initiated (mm/dd/yyyy)	Completed (mm/dd/yyyy)	Not Applicable	
			Identify case manager for transition planning.
			Provide general information to students, parents or legal guardian about adult options and planning process.
			Coordinate initial planning with those closest to student (student-specific planning team).
			Introduce community experiences.
			Explore potential graduation date and high school programming direction with students, parents or legal guardians and student-specific planning team.
			Make initial contacts with adult programs (CLDS, MH, EAPD, Home Care) if no children's worker is involved or co-ordinate contact with children's worker.
			Initiate referrals to CLDS, EAPD and Home Care if appropriate.

Student – with Help from their Support Network

The first of the f			
Date Initiated (mm/dd/yyyy)	Completed (mm/dd/yyyy)	Not Applicable	
			Become aware of options and the planning process.
			Think about potential for:
			community experiences
			graduation date
			adult options available
			sharing information on strengths/interests/ dreams

Transition Checklist – Age 16 to 17

	Name	Phone Number
Student		
Parent		
Legal Guardian		
Case Manager (Transition)		
Children's Program Contact		
Community Worker		

School

Date Initiated (mm/dd/yyyy)	Completed (mm/dd/yyyy)	Not Applicable	
			Identify case manager for transition planning.
			Coordinate annual transition planning meetings.
			Gather information on supports required at home and in the community.
			Review eligibility criteria for adult programs.
			Include assigned adult community worker in planning meetings.
			Make initial contacts with adult programs (CLDS, MH, EAPD, Home Care) if no children's worker is involved or co-ordinate contact with children's worker.
			Increase community (work and/or recreation) experiences.
			Ensure curriculum supports a planned move to post-secondary education/training.
			Identify resources required (work/community).
			Gather information and initiate referral to Community Living disABILITY Services.
			Initiate referrals to Community Mental Health if appropriate.

Student – with Help from their Support Network

1 11			
Date Initiated (mm/dd/yyyy)	Completed (mm/dd/yyyy)	Not Applicable	
			Choose residential support services of personal preference or plan to reside in family home.
			Understand the implications of leaving school before completion of graduation requirements, or availability of adult supports.
			Plan for post-secondary education/training, work/community placement or vocational/day services.
			Choose supports that match individual preferences/needs or advocate for new/enhanced services.

Transition Checklist – Age 17 to Graduation

	Name	Phone Number
Student		
Parent		
Legal Guardian		
Case Manager (Transition)		
Children's Program Contact		
Community Worker		

School

Date Initiated (mm/dd/yyyy)	Completed (mm/dd/yyyy)	Not Applicable	
			Identify case manager for transition planning.
			Coordinate annual transition planning meetings.
			Increase focus of instruction towards priority outcomes for transition.
			Help determine appropriate community options for adult life.
			Include assigned community worker in planning meetings.
			Provide information on the student's current performance and needs, including clinical (OT, PT CLDS, Nutrition), to assigned community worker.
			Ensure graduation requirements have been met.
			Initiate long-term work/community experiences and investigate continuity post-graduation in collaboration with community worker and support network.

Student – with Help from their Support Network

Student with help from their support Network			
Date Initiated (mm/dd/yyyy)	Completed (mm/dd/yyyy)	Not Applicable	
			If student is 18 or older, contact Employment and Income Assistance for persons with disabilities for assessment of eligibility.
			Make informed decisions about:
			employment options
			 move to post-secondary education/ training, work/community opportunities
			accessing supports/services from community-based service providers
			Choose adult community based supports or service provider from available options.
			Apply for appropriate identification.

APPENDIX C: Appropriate Educational Programming

Appropriate Educational Programming

Students are eligible to attend school until they graduate or until June of the calendar year in which they turn 21, whichever comes first. Appropriate educational programming is determined by the school team in collaboration with the student and parents/legal guardians through the student-specific planning process. The direction of programming is determined by the student's profile of need.

This programming and planning is directed by The Public Schools Act, Standards for Appropriate Educational Programming in Manitoba and several supporting documents and guidelines. They can be found at: www.edu.gov.mb.ca/k12/specedu/aep/index.html.

High School Graduation

Opportunities are available for students (including those with significant cognitive disabilities) to choose courses that are of interest to them. High school students earn credits for compulsory and optional courses, locally developed courses, distance education courses, post-secondary courses (college and university) and others such as community service. Students who have completed the required number of compulsory and optional courses, including (M) course designations, receive a Manitoba high school diploma.

For more information on graduation requirements in Manitoba, see: www.edu.gov.mb.ca/k12/policy/grad_require.html.

Certificate of Completion for Students Receiving Individualized Programming Designation

This certificate recognizes the achievement of students with significant cognitive disabilities who benefit from a highly individualized, functionally appropriate learning experience.

Information guidelines for awarding the certificate are available at: www.edu.gov.mb.ca/k12/policy/grad_require.html.

APPENDIX D: Legislation Affecting Transition Planning Teams

The Manitoba Human Rights Code

The Manitoba Human Rights Code prohibits unreasonable discrimination arising from a person's actual or perceived physical or mental disability.

For more information, visit: www.manitobahumanrights.ca/v1/education-resources/resources/ fact-sheets.html.

The Vulnerable Persons Living with a Mental Disability Act

The act reflects the right of all people to make their own decisions and to have help when necessary in a manner that respects their independence, privacy and dignity. Substitute decision-making is described in this act.

For more information, visit: <u>web2.gov.mb.ca/laws/statutes/ccsm/v090e.php</u>.

The Protection for Persons in Care Act

The act helps protect adults from abuse while receiving care in personal care homes, hospitals or any other designated health facility.

For more information, visit: www.gov.mb.ca/health/protection/.

Appropriate Educational Programming in Manitoba: Standards for Student Services

Appropriate Educational Programming in Manitoba: Standards for Student Services embodies the spirit of human rights legislation and regulations, elaborates on the education regulations and establishes standards for school divisions. The standards provide school divisions with a framework to use in developing a local policy for appropriate educational programming.

For more information, visit: www.edu.gov.mb.ca/k12/specedu/aep/index.html.

The Child and Family Services Act

The Child and Family Services Act outlines the fundamental principles guiding the provision of services to children and families in Manitoba.

For more information, visit: web2.gov.mb.ca/laws/statutes/ccsm/c080e.php.

The Personal Health Information Act

The purpose of the Personal Health Information Act (PHIA) and the related Freedom of Information and Protection of Privacy Act (FIPPA) is to provide individuals with a right to examine and receive a copy of personal health information about themselves, to control the manner in which personal health information is collected and the right to request corrections to personal health information about themselves. This act also protects individuals against the unauthorized use of personal health information.

For more information, visit: www.gov.mb.ca/health/phia/links.html.

The Protecting Children (Information Sharing) Act

For the purpose of providing or planning for the provision of services or benefits to a supported child, a service provider may collect personal information or personal health information about the supported child or the child's parent or guardian from another service provider; and collect personal health information about the supported child from a trustee;

Under this act, a service provider may use the information for the purpose of providing or planning for the provision of services or benefits to the child.

For more information, visit: <u>web2.gov.mb.ca/laws/statutes/2016/c01716e.php</u>.

The Social Services Appeal Board Act

The purpose of the Social Services Appeal Board Act is to give Manitobans a fair, impartial and informal appeal process from decisions relating to various social services and programs.

For more information, visit: web2.gov.mb.ca/laws/statutes/ccsm/s167e.php.

The Youth Criminal Justice Act (Canada)

The Youth Criminal Justice Act (YCJA) deals with records and information of youth who have been dealt with under the act. Statutes such as the Public Schools Act, the Educational Administration Act, FIPPA and PHIA do not apply to youth criminal justice information. The YCJA permits limited disclosure of information in records kept under this act and youth criminal justice information must be handled in accordance with the YCJA even when it is included as part of a pupil file or some other record.

For more information, visit: www.laws-lois.justice.gc.ca/eng/acts/Y-1.5/index.html.