

**AARA**

**Access Arrangements and Reasonable Adjustments (AARA)**

**Student Application Pack**

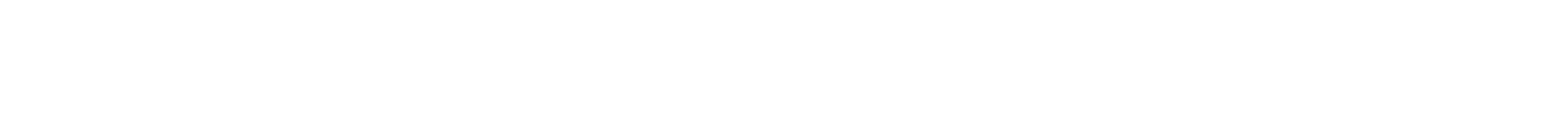
**Inside this pack:**

* **Parent Fact sheet**
* **Application form**  - Page 4-5 (incl. details about medical information requirements)
* **Medical Template**  - Appendix A (provided as guide for medical practitioner if required)

**Please return completed application with supporting documents to Student Services**

|  |
| --- |
| Guidelines stipulate that schools make decisions about AARA for **Units 1** and **2 (Year 11)**. They ensure that for Applied, Applied (Essential) and General subjects, the AARA implemented for an eligible student for assessment in Units 1 and 2 are aligned to those that are available for summative assessment in **Units 3** and **4 (Year 12).**  The provision of AARA for assessment in Units 1 and 2 by a school is not a guarantee that students will be provided the same access or the same adjustments for assessment in Units 3 and 4. |

**Access arrangements and reasonable adjustments (AARA) Year 11 and 12**



Parent Fact Sheet

This fact sheet provides information about the AARA process. The Queensland Curriculum and Assessment Authority (QCAA) recognises that some students have disability, impairment and/or medical conditions, or experience other circumstances that may be a barrier to their performance in assessment. Access arrangements and reasonable adjustments (AARA) are designed to assist these students through minimising barriers for eligible students to demonstrate their learning, knowledge and skill in assessment.

**Applications for known or pre-existing conditions must be submitted** **prior to the due date**.

**Applications for illness or misadventure on the day assessment is due, must be made on the due date**.

A medical report ***must be*** presented to support applications made due to illness, impairment or disability.

**If an AARA is submitted late and/or not approved** (e.g. due to lack of supporting evidence) **students may not receive any credit for the assessment item.** This will affect the student’s overall result and may affect QCE eligibility.

**Absence due to family holiday, sport (other than national representation) or other reasons chosen by the student or family do not constitute grounds for an AARA**. Extensions or adjustments cannot be approved for these reasons.

QCAA stipulate:

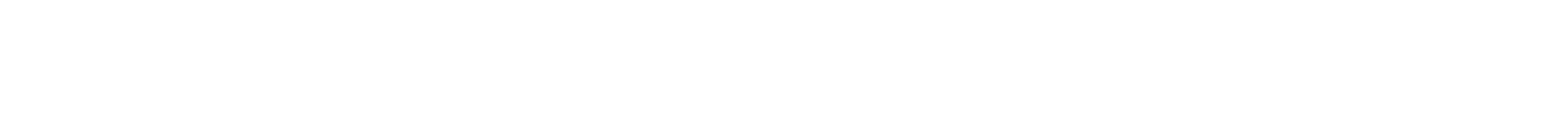
• Year 11 AARA are school based decisions made in line with QCAA guidelines

• Year 12 AARA applications are submitted to QCAA for approval

**Steps for Access**

1. Students are directed to the school web page to access this document. If parents want to clarify expectations, they should contact the school to talk to the HOD Senior Schooling (HOD SS).
2. Student / family completes AARA application and includes all supporting documents (see page four for what supporting documents are required to be completed).
3. Student lodges complete AARA with Education Services, who will pass it onto HOD SS.
4. HOD SS receives AARA application and supporting documents to establish eligibility and meet QCAA submission dates. School contacts parent if further evidence required.
5. HOD SS provides the completed application and supporting documents to the principal for review and approval.
6. HOD SS relays confirmation of eligibility for AARA to teachers.
7. HOD SS notifies student/parent of AARA outcome.
8. HOD SS registers AARA on Spreadsheet (completed by office staff) and QCAA portal.
9. AARA and supporting documentation is given to the office to scan and email teachers and attach to the students One School support provisions. Original documentation filed in the student’s file.

**Eligibility for AARA**



Parent Fact Sheet

AARA are provided to minimise, as much as possible, barriers for a student whose disability, impairment, medical condition or other circumstances may affect their ability to read, respond to or participate in assessment. Eligibility barriers include Cognitive, Physical, Sensory and Social / Emotional.

These barriers fall into three broad categories:

* permanent
* temporary
* Intermittent

An AARA can also be applied for due to Illness, Bereavement or Misadventure.

**Ineligibility**

Students are not eligible for AARA on the following grounds:

* Unfamiliarity with the English Language
* Teacher absence or other teacher-related difficulties
* Matters that the student could have avoided (e.g. misreading an examination timetable, misreading instructions in examinations)
* Matters of the student’s or parent’s/carer’s own choosing (e.g. family holidays)
* Matters that the school could have avoided (e.g. incorrect enrolment in a subject

**Important**

Early applications for all AARA are recommended to ensure timely decisions and confidence for students.

* Applications submitted close to the due date for assessment should not be for known long-term conditions.
* Applications for AARA for long-term conditions should be submitted at earliest possible time upon diagnosis.



**Access Arrangements and Reasonable Adjustments (AARA)**

**Application Form**

**Years 11 - 12**

***All students and parents wishing to apply for AARA in 2020 must complete this form***

***Completed application must include required documentation***

|  |  |  |  |
| --- | --- | --- | --- |
| AARA are planned and negotiated as early as possible so that eligible students are supported appropriately to participate in, and complete the requirements for, a course of study and assessment. | | | |
| Name: | | Form Class: | |
| Date of Birth: | | Application Date: | |
| ***Period Applied for*** Start Date:  End Date: | | | |
| Subject(s): | | All Subjects: | |
| ***Which AARA category do you wish to apply for?*** | | | |
| AARA Category | Documentation Required  **\*\*\*Please see over page for documentation requirements\*\*\*** | | Documentation Provided |
| **Cognitive**  (eg. Intellectual disability; learning disorder) | * Medical report * School statement | | YES / NO |
| **Physical**  (eg. Physical injury or disability) | * Medical report *or* * EAP verification covering Unit 3 and 4 assessments * School Statement | | YES / NO |
| **Sensory**  (eg. Autistic Spectrum Disorders) | * Medical report *or* * EAP verification covering Unit 3 and 4 assessments * School statement | | YES / NO |
| **Social/Emotional**  (eg. Anxiety, depression) | * Medical report *or* * EAP verification covering Unit 3 and 4 assessments * School statement | | YES / NO |
| **Illness, Bereavement and/or Misadventure**  (eg. Sickness; accident; unexpected event) | * Medical report *or* * Supporting Documentation (other) | | YES / NO |
| **Extent of Adjustment Required** | **Substantial**  (specific to the individual student - **criteria integrity maintained**) | | |
| **Supplementary/Differentiated**  (broad based support - **criteria integrity maintained**) | | |
| Student statement explaining reason for application: | | | |
| Parent acknowledgement and understanding of reasonable adjustment: | | | |
| Parent Signature | | Student Signature | |
| Office Use Only | | | |
| Application complete YES / NO | | Principal Approved / QCAA Approved | |
| Parent, student, HOD informed of decision YES / NO | | AARA recorded YES / NO | |
| **Supporting Documentation**  **Please note: supporting documentation must be included with your AARA application for consideration of submission as per QCAA guidelines.** | | | |
| **Medical report: (See Appendix A)**  To make an informed decision about an AARA application, the QCAA requires a medical report that includes the following details:   * the illness, condition or event (including details of a diagnosis, where applicable) * date of onset or occurrence of the disability; illness and/or medical condition (must cover date of assessment) * symptoms, treatment or course of action related to the medical condition or event * explanation of the probable effect of the illness, condition or event on the student’s participation in the assessment, particularly timed assessment when considering timed assessment * professional recommendations regarding AARA | | | |
| The medical report must be completed by a relevant practitioner who is a general practitioner (GP), medical specialist, or psychologist (registered under Queensland’s *Medical Practitioners Registration Act 2001* and/or Queensland’s *Psychologists Registration Act* 2001), and who is not related to the student or employed by the school. | | | |
| **Non-Medical Supporting Documentation:**   * for non-medical claims, must be written evidence from a relevant independent professional or other independent third party, such as a witness or police report * Supporting documentation must cover the date of the assessment for which the application is made | | | |

**SCHOOL TO COMPLETE**

* Based on the information provided in this application (including supporting documentation), is there sufficient evidence that the student requires an AARA?

**YES  NO**

* If no, provide feedback to the student and parent about why an AARA is not appropriate in this instance.
* If yes, use the table below to identify appropriate adjustments to assessment.
* The student and their parent must be notified in writing of the adjustments permitted under the AARA and this must be added as a contact record on OneSchool.
* All applicable teachers must be notified in writing of the adjustments permitted, and their duration.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QCAA Inclusive Strategy** | **QCAA Approved Areas (P to 10)** | **Tick/highlight the adjustment/s for this assessment** | | | | | | | | | | | |
| **Timing** | **Additional time** | Extension for assignment  <1 week | | | Extension for  assignment  >1 week | | | | Exam time  (imputed 5 minutes per hour | | | Exam time  (imputed 10-15 minutes per hour | |
| **Frequent breaks**  **(in between exams)** | Exam time  (imputed 5 minutes per hour) | | | | | | | Exam time  (imputed 10-15 minutes per hour) | | | | |
| **Scheduling** | **Number of sessions** | Breaking assessment into sections | | | | | | | Increasing pre-exam preparation | | | | |
| **Order of sessions** | Establishing assessment from C level to A+ level through the exam/ assignment | | | | | | | Extra sessions for reading and text processing | | | | |
| **Setting**  ***(noise, anxiety, wheelchair access)*** | **Location: furniture, resources, supervision** | Supervision required during the delivery of units, including assessment | | | | | | | Identifying furniture, resources and equipment | | | | |
| **Seating: placement** | Planning the placement of seating to maximise visibility, audibility, physical access to resources, learning opportunities and support (adults or peers), as required. | | | | | | | | | | | |
| **Presentation** | **Cues and prompts** | Highlighting key words or phrases in directions | | | | | | | Using symbols (e.g. arrows or stop signs) to remind the student to do something | | | | |
| **Directions** | Read aloud | Read more than once | | | | Present as pictures/ symbols | | | Highlighted key words | | | Text to  speech |
|  | **Format of the text** | Braille, large print | | | Less text on page | | | | Digitised text | | | Audio text | |
| **Specialised equipment** | Laptop | | | | iPad | | | | | Graphic organisers | | |
| **Response** | **Verbal** | Scribe (adult) | | | | Recording device | | | | | Interpreter /translator | | |
| **Written** | Adaptive tools – pencil grip | | | Specialised writing tools | | | | Keyboards | | | Scribe and speech to text | |
| **Non-verbal** | Assistive technology | | | | Symbol and word bank | | | | | Finger/eye pointing | | |
| **Specialised equipment** | Computer or word processor | | Communication devices | | | | Speech-to-text or text- | | Braille machine | | | Talking calculator |

**I am satisfied/not satisfied that this application meets the requirements as set down in the school’s Assessment and AARA policy. The adjustments outlined above are approved for the following date range:**

If the student/parent wishes for the AARA to be extended beyond this timeframe, additional supporting documentation will be required ***before the AARA lapses***. Please contact the HODSS/HOSES or DP for further information.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Principal Signature:** |  |  | **Date:** |  |

**Appendix A**

**Confidential medical report**

Access arrangements and reasonable adjustments (AARA)

Medical reports may only be completed by the student’s general practitioner (GP), medical specialist, or psychologist (registered under Queensland’s *Medical Practitioners Registration Act 2001* and/or Queensland’s *Psychologists Registration Act 2001*). The health professional providing a report must not be related to the student or employed by the school. The information provided needs to be current and relate to the relevant assessment period.

Information provided in this report is treated in strictest confidence and is only used for the purpose of determining the student’s AARA application.

If the health professional does not use this report form, they must supply a current medical report containing all of the following information.

For more information, refer to **About this report** on the last page.



181436

|  |  |  |
| --- | --- | --- |
| **Student details** | | |
| **Student name:** |  | |
| **School:** |  | |
| **LUI:** |  | |
| I give permission for my health professional to provide information concerning this application to the QCAA, if required. | | |
| **Student signature:** | | **Date:**  **/**  **/** |
| **Parent/carer signature:**  (if student is under 18) | | **Date:**  **/**  **/** |

Are you applying for:

Access arrangements and reasonable adjustments (for existing and chronic conditions)

Health professionals complete **Part A** and **Part B — AARA**, and complete and sign the **Health professional details**.

Illness and misadventure (for unforeseen circumstances)

Health professionals complete **Part A** and **Part C — Illness and misadventure**, and complete and sign the **Health professional details**.

If you are unsure which to apply for, refer to **About this report** on the last page.

Submit this completed report as part of an AARA application via the QCAA Portal.

The information you provide on this form will be used for access arrangements and reasonable adjustments (AARA), which are designed to assist students with disability, impairment, medical conditions or other circumstances that may be a barrier to their performance in assessment. These procedures for these arrangements and adjustments are set out in the *QCE and QCIA policy and procedures handbook 2019 v 1.0*. Personal information will be accessed by authorised QCAA staff and handled in accordance with the *Information Privacy Act 2009*. Information held by the QCAA is subject to the *Right to Information Act 2009.*

**Part A**

This section is **only** to be completed by the health professional.

|  |  |
| --- | --- |
| **Diagnosis:** |  |
| **Date of diagnosis:** | **/**  **/** |
| **Date of occurrence/onset:** | **/**  **/** |
| **Provide a brief history of the student’s disability, impairment and/or medical condition, including symptoms.** | |
|  | |
| **Is the student currently receiving treatment? Please indicate.** | |
|  | |
| **Comment on the probable effect of this disability, impairment and/or medical condition on this student’s capacity to complete timed assessment.** | |
|  | |

**Part B — AARA**

This section is **only** to be completed by the health professional.

|  |
| --- |
| **Comment on how the disability, impairment and/or medical condition would affect this student’s daily functioning in the classroom.** |
|  |
| **Professional recommendations for assessment adjustments.** |
|  |

**Part C — Illness and misadventure**

This section is **only** to be completed by the health professional.

|  |
| --- |
| I consider that the effect of the impairment arising from the medical condition is/was: mild moderate severe |
| I consider that the student is/was: disadvantaged due to a temporary medical condition  unfit to participate in assessment due to a temporary medical condition  from / / to / / .  unfit to participate in assessment due to a deterioration in a chronic condition from / / to / / . |
| If the student was affected for less than a full day, comment on the amount of time the student was affected during a timed assessment, e.g. second half of the exam session. |
|  |

**Health professional details**

|  |  |  |
| --- | --- | --- |
| **Name:** |  | |
| **Profession:** |  | |
| **Phone:** |  | |
| **Specialty/qualifications:** (if applicable) |  | |
| **Place of work:** |  | |
| **Registration number:** |  | |
| **Practice stamp:** (if applicable) |  | |
| **Signature:** |  | **Date:** / / |

**About this report**

**Access arrangements and reasonable adjustments (AARA)**

Some students may have disability, impairment and/or medical conditions, or experience other circumstances that may be a barrier to their performance in assessment. Access arrangements and reasonable adjustments (AARA) are designed to assist these students.

**Illness and misadventure**

Students may also experience unforeseen circumstances that may be a barrier to their performance in assessment, such as a significant deterioration of an existing medical condition, or experiencing a natural disaster, accident or significant cultural obligation. These students may be eligible for illness and misadventure adjustments.

**Submitting this report**

The QCAA requires a medical report for medical claims for AARA or illness and misadventure. Once complete, submit this report as part of an AARA application via the QCAA Portal.