

Atlantic Provinces Special Education Authority

Procedure Title: **Parent/Guardian Concerns**

Issue Date: **January 2019**

Revised: **January 2021**

Application: This procedure applies to students and parents/guardians.

1. Parent/guardian concerns related to school-based/Centre-based services should be addressed with the APSEA itinerant/Centre-based staff member. If the issue remains unresolved, it should be directed to the appropriate APSEA supervisor. If still unresolved, it should be directed to the APSEA Director of Programs for Students who are Blind/Visually Impaired (BVI) or the APSEA Director of Programs for Students who are Deaf/Hard of Hearing (DHH).
2. Parent/guardian concerns related to APSEA programming/administrative issues should be addressed with the APSEA supervisor. If the issue remains unresolved the parent/guardian may direct the concern to the appropriate APSEA Director (BVI or DHH).
3. When a parent/guardian has a concern with an APSEA staff member and is not comfortable addressing the concern directly with that staff member, the parent should contact the staff member's immediate supervisor. The immediate supervisor will determine the appropriate action.
4. When a parent/guardian concern remains unresolved after the issue is addressed with the APSEA itinerant staff, the APSEA supervisor, and the APSEA Director of Programs (BVI or DHH), the parent/guardian has the option of contacting the APSEA Superintendent.
5. The APSEA Superintendent will advise the Director of Programs (BVI or DHH) of contact by the parent/guardian and ask for a written response (Appendix A), including all relevant notes.

6. The APSEA Superintendent will investigate the parent/guardian concern and provide a response to the parent/guardian within a reasonable time frame.
7. Documentation related to the parent/guardian concern shall remain on file with the Superintendent.



Appendix A

Director Response to the Parent/Guardian Concern Reporting Form

[To be completed by the APSEA Director of Programs]

Name of Child: _____ APSEA Staff Member: _____

Date of Birth: _____ Parent/Guardian: _____

Grade: _____ Contact Information: _____

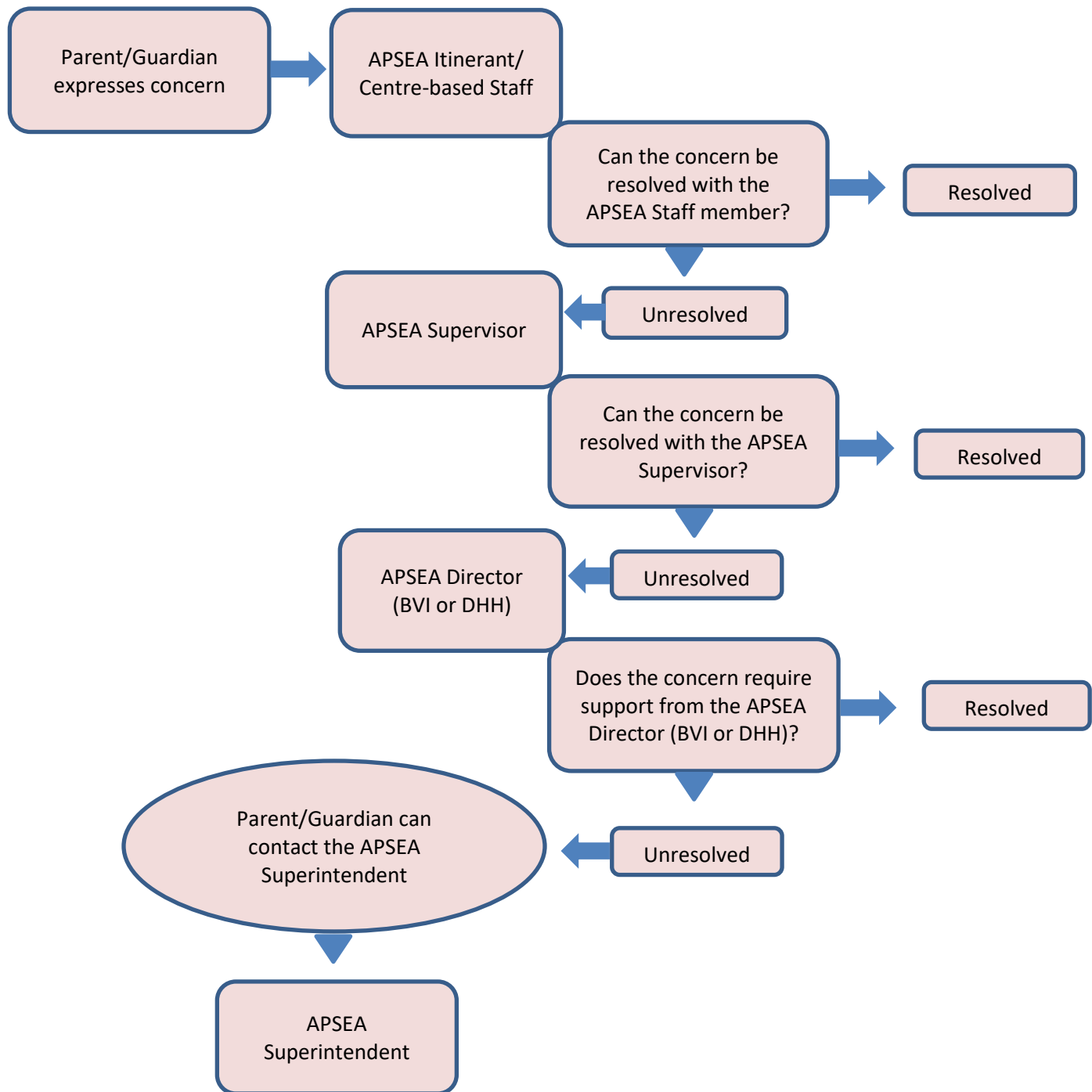
Location of Concern: ☐ School ☐ Daycare/Preschool ☐ Home _____

Actions Taken:

Director's Name: _____ Director's Signature: _____

Date: _____

Send to the APSEA Superintendent.



Note: When a parent/guardian has a concern with an APSEA staff member and is not comfortable addressing the concern directly with that staff member, the parent should contact the staff member's immediate supervisor. The immediate supervisor will determine the appropriate action.