# Observation of Practice Notes: Segment #1

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| **Date of Visit:** 12/1/18 | **Start/End Time:**10:15/10:45 am | **Visit Type:** *Announced Unannounced* |
| **Start Date of Feedback:** 9/10/18 | **End Date of Feedback:** 12/1/18 |  |

The Support Professional Model is scored holistically at the end of the year. Written feedback for each component is not required after each Observation of Practice.

***Observation of Practice Notes***

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| **09-10-18** Sixth grade team meeting- Mrs. D attended a sixth grade team meeting to share some resources with teachers for two students with autism who were struggling with peer interactions. Mrs. D shared with the team an organizer that she was using with these students to help them recognize expected and unexpected behaviors. Mrs. D gave an example of how she would use it with a student to help them recognize that unexpected behaviors often lead to negative consequences with their peers. Mr. W shared that he felt that this tool would be very helpful. He was going to use it with one student to help them prepare for next week when he would be attending training. Using this organizer to prepare the student for expected behaviors when having a substitute was a great strategy. (Principal)**BOY conference- 09-23-18** Mrs. D provided me with a copy of her schedule. She spoke about how she had formed each group. She was able to identify the focus of each group. She did not speak specifically about individual needs of her students. She also shared a survey she has sent out to parents to learn more about each student’s summer and social skill growth and needs from the parent’s perspective. (Spec. Ed. Director)**09-30-18** Mrs. D stopped by the office to let me know that she had finally reached a parent that she was struggling to contact. The parent was not returning calls that Mrs. D was making during the day. Mrs. D had called last night shortly after dinner and made contact with the parent. As a result, the parent will be attending our meeting later this week. (Principal)**10-1-18** Open House- Mrs. D set up a table in the foyer and greeted parents as they arrived to Open House. She had a variety of brochures for local agencies in the community as well as a few resources she has created to guide parents in supporting their child’s education. (Principal)**10-1-18** Artifact- During open house, I picked up one of the brochures that Mrs. D had in her display for parents. It was a brochure she had created with suggestions on supporting your child with homework. It was colorful, error free and provided suggestions that were parent friendly. Mrs. D’s contact information is on the back of the brochure. (Principal)**10-6-18** Mrs. D was observed standing in the hallway at the beginning of the school day as students were arriving. She was greeting students by name. She often engaged students in a brief conversation either about their weekend, or gave them an encouraging word “Have a great day today” “Make good choices today” “Looking forward to seeing you after lunch.”(Principal)**10-15-18** October Faculty Meeting- Mrs. D had a 10 minute portion of the agenda. She shared a website that she recently learned about at the RI Social Workers Fall Meeting. She displayed the website up on the screen and guided the faculty throughout different sections. As she shared the site, she made connections to our school’s PBIS initiative. Colleagues asked questions and were engaged in this presentation. (Principal)**10-23-18** I spoke to Mrs. D this morning during first block. A parent had contacted me over the weekend about a difficulty that her daughter had with a peer at a school sponsored sporting event on Friday night. I requested that Mrs. D meet with the student to follow up. By 11am, Mrs. D had followed up with me by email to let me know that she had met with the student and had also followed up with the parent. She had offered to touch base with the student again later in the week. The parent was appreciative. (Principal)**11-5-18** IEP Meeting- Mrs. D attended an IEP meeting for a student in one of her social skills groups. When the chair began to review the draft document, it was noticed that there was not a draft goal for social skills entered. Mrs. D did have a handwritten draft with her that she shared with the team. Mrs. D shared comments with the team “John does well in group.” “He is making progress.” “He attends weekly.” Mrs. D’s goal was for the student to continue to work on the goal from last year. No data was presented to document growth towards this goal. Specific strategies or objectives were not shared at the meeting.(Principal)**12-1-18** Announced Observation- seventh grade social skills group-Students arrived and took a seat around a table. Mrs. D began by taking attendance and setting up the projector for a video. Students talked to one another as they waited. 10 minutes into the group time, Mrs. D began the video. Students laughed and were not engaged. The video was about making friends. The characters in the video appeared to be young elementary school aged students. After the 10 min. video, Mrs. D asked the group, “What did we learn about making friends?” The students did not respond. She followed up by asking, “How do you make friends?” One student began to talk about a situation that he observed during lunch. Mrs. D asked follow up questions about the situation. She opened up resolving this situation by asking the students, “What should the student have done differently?” “How do you think the student getting picked on might have felt?” As a group, they came up with a plan for how to handle a situation like that if it happened again and who to involve. The group ended and students were dismissed. (Spec. Ed. Director) |

# Observation of Practice Notes: Segment #1 with Evidence Statements

**Professional Practice and Responsibilities Feedback Form (Support Professionals)**

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***Evidence Statements for Professional Practice – The Answer Key***

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| **Domain 1: Collaboration** |
| 1A. Works with educators and families to develop strategies and resources to meet the needs of students |
| 1B. Uses and models effective communication with learners, colleagues and/or stakeholders |
| 1C. Builds rapport with students promoting effective service delivery |
| 1D. Demonstrates flexibility and responsiveness |
| *Evidence for PP Domain 1:* 1A. Mrs. D addresses the needs of both colleagues and families by providing resources. She provided a team of sixth grade teachers with an organizer to use with students to help students identify expected and unexpected behaviors and recognize their consequences. She also set up a table during Open House to provide families with resources about community agencies and how to support their child’s education. A brochure she created on “Helping your Child with Homework” was professionally designed and contained parent friendly suggestions. She had added her contact information to the back of the brochure as a resource to parents. During the October faculty meeting, Mrs. D presented a PBIS website to her colleagues. She showed different features of this website using the large screen. Colleagues asked questions and were engaged in this presentation.1B. At a recent IEP meeting, progress was shared with the team in statements such as “John does well in a group.” “He is making progress.” “He attends weekly.” Mrs. D, after several attempts by phone during the school day, was successful in reaching a parent by phone after dinner. As a result, the parent attended the meeting that week about her child. Mrs. D brought a draft of her IEP goal for the student to the meeting, but had not yet entered it into the IEP document for whole team review.1C. Mrs. D’s interactions with students as they arrive in the morning are friendly and demonstrate genuine warmth and caring. Mrs. D greets students by name. She engages them in brief conversations about their weekend or makes encouraging comments such as “Make good choices today” or “Looking forward to seeing you after lunch.” In a social skills group, when students raised a concern about a situation at lunch. Mrs. D asked a series of questions to help them understand other perspectives and reach a solution as a group.1D. Mrs. D was responsive to a request to meet with a student as a follow up to a call I had received over the weekend. She met with the student in a timely manner and followed up with the parent that morning. She also developed a plan to check in with the student again later in the week.  |

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| **Domain 2: Service Delivery** |
| 2A. Establishes service delivery and/or program goals and develops a plan to evaluate them |
| 2B. Plans effectively for service delivery that is based on student data and knowledge of child development |
| 2C. Implements service delivery to ensure learners understand, are focused on, and accountable for results |
| 2D. Uses appropriate assessments to diagnose or identify and monitor student issues or programmatic progress and to adjust service/program delivery |
| *Evidence for PP Domain 2:* 2A. At the beginning of the year conference, Mrs. D shared her schedule. She was able to identify the goal for each group as a whole. Mrs. D had surveyed parents to collect data from the perspective of the parents. At the time of the meeting, she had not yet reviewed the results.2B. Mrs. D used a video focused on making friends with her seventh grade social skills group that had characters that were early elementary age. 2C. During this quarter, it was not observed that students were aware of their goals. During the social skills group, the video used was not developmentally appropriate for middle school students. 2D. During this quarter, it was not observed that Mrs. D has incorporated data use into her practice. She gathered data from parents about their child’s social skills, but at the time of our meeting had not yet reviewed the data. No data was shared at an IEP that I attended. |

***Priority Feedback for Professional Practice***

*Feedback is important to help Support Professionals grow as educators. With this in mind, provide feedback that is specific and actionable that will help the educator move their practice forward.*

|  |
| --- |
| You have provided resources to parents during open house and the faculty during our October faculty meeting. The organizer you shared with the sixth grade team has helped them better communicate with their students who struggle with peer interactions. Taking the time to discuss expected and unexpected behaviors gives them a strategy that these students are already comfortable with to address these needs. By sharing resources, you are serving as a consultant to both your colleagues and families. It is evident by seeing you in the hallway at the beginning of the school day that you are in the process of building rapport with our students. You greet them by name and engage in positive dialogue. This practice makes students feel welcome and also gives them an opportunity to talk to you if something has happened the night before or that morning. Your presence is important to help students identify you as a resource.The survey you sent out to parents is valuable data. I am eager to hear about the results and how you have used the data to inform your goal setting and services. What other assessments or data sources can you access to learn about your students and provide more specific information when meeting during an IEP meeting or updating parents on a student’s progress? How can you use this data to set individual goals for your students?It is best practice to provide a draft copy of your goals to the case manager before an IEP meeting. This way everyone at the meeting can have a draft copy to review and make revisions to individualize the services for the student. Providing specific data on the progress that the student has made and how the goal will be adjusted to help the student to continue to make growth in a specific area is important. If you have questions about using the IEP software, please contact Mrs. G. She is a valuable resource in our school for IEP development.Students arrived on time and were ready to participate in your social skills lesson. I was surprised that you selected a video that had such young characters. The students might have been more engaged in the follow up discussion if the characters in the video had been their age. Try to locate materials that are focused on the needs of middle school students. Please let me know if I can assist you with accessing these materials.  |

# Providing High-Quality Written Feedback to Educators

**The difference between observation notes, aligned evidence, and feedback**

**Feedback**

Helps the support professional improve their practice by identifying strengths (practices that they should continue) and areas for improvement (changes to their practice that they should prioritize).

**Aligned Evidence**

Helps the support professional reflect on their current practice by providing evidence that aligns with a performance-level descriptor.

**Observation Notes**

Helps the evaluator capture evidence of the support professional’s practice to determine formative scores, write aligned evidence statements, and craft feedback. The observation notes can include evidence from observations, natural interactions and artifact review. Notes should be recorded over a period of time. (Sept.-Nov.)

**Qualities of Effective Feedback**

To be effective, feedback after observations should be:

* Prioritized
* Specific
* Actionable
* Have a supportive tone
* Be given as soon after an evaluation/assessment as possible

**Prioritized**

**While it is important that the *aligned evidence* addresses most components of the rubric, positive and constructive *feedback* should be focused. Substantial feedback across all or many components is overwhelming to support professional and does not indicate what is essential or where they should start. Prioritized feedback hones in on the ideas and strategies that are the most important for the support professional to continue or adjust to move forward in their practice.**

**Not Prioritized**

A support professional gets 1 sentence of feedback on all components of the rubric.

A support professional gets significant feedback on most or all components of the rubric.

**Prioritized**

* The evidence aligns to 3’s on all components of the rubric but the evaluator highlights the two that are making the biggest impact on student access/learning.
* The evidence aligns to a combination of 1s, 2s, and 3s, but the evaluator prioritizes feedback on the components that should be addressed first, even if it is not the lowest score.

**Specific**

**Feedback should be clear, precise, and cite specific examples from the observation. The feedback should directly inform the support professional’s practice in the rubric components.**

*Examples:*

**Not Specific**

“You have a great data collection system…”

**Specific**

 “You have set up a data collection system that allows you to monitor student progress towards service delivery goals and communicate progress with parents and classroom teachers….”

**Actionable**

**Effective feedback includes actionable next steps that the support professional may use to improve their practice in the immediate future. Actionable feedback provides resources or strategies to implement into practice and offers a clear picture of what this would look like in his/her practice.**

*Examples:*

**Not Actionable**

During the meeting, you did not help the parent understand why their child needs to come to school on a regular basis.

**Actionable**

 During the meeting, it appeared that the parent was unaware of the impact their child’s frequent absences are having on their academic progress. Sharing data and brainstorming with the parent feasible solutions may lead to improved student attendance and increased collaboration with the parent.

**Feedback Model:**

1. Open with **positive reinforcement**
2. Target **2-4 specific areas** from their practice that you want to **encourage** the support professional to **continue**.
3. Be **specific** and **reference examples** from the evidence to make the feedback concrete.
4. Then offer **constructive feedback**
5. Hone in on **1-2 areas** to give prioritized and actionable feedback.
6. Explain why this is a priority to focus on and **suggest strategies or resources** the support professional could employ moving forward.

# Written Feedback Quality Review Tool for Support Professionals

|  |
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| **Prioritized:**  |
| 1. Does the feedback reinforce the teacher’s strongest practice areas?
 |  | * No
 | * Yes
 |
| 1. Does the feedback focus on 1 or 2 areas for improvement?
 |  | * No
 | * Yes
 |
| 1. Will the focus of the feedback have the greatest impact on teacher and student performance?
 |  | * No
 | * Yes
 |
| 1. Is the feedback appropriate to the context of the classroom?
 |  | * No
 | * Yes
 |
| **Specific:**  |
| 1. Are specific examples from the observation cited throughout the feedback?
 |  | * No
 | * Yes
 |
| 1. Is the feedback aligned to the practice rubric?
 |  | * No
 | * Yes
 |
| **Actionable:** |
| 1. Does the feedback include action steps that offer the teacher a clear picture of what this would look like in his/her classroom?
 |  | * No
 | * Yes
 |
|  |
| 1. Is the feedback feasible to implement successfully in the near future?
 |  | * No
 | * Yes
 |
| 1. Does the feedback include resources or strategies the teacher can utilize?
 |  | * No
 | * Yes
 |
|  |
| **Feedback Delivery:** |
| 1. Is the tone of the feedback supportive?
 |  | * No
 | * Yes
 |
| 1. Was the feedback provided soon after the observation?\*
 |  | * No
 | * Yes
 |

\*LEAs may have local policy regarding timeframes for feedback

|  |
| --- |
| **Title** –Reactive SOO: Ongoing Student Medical Needs**Content Area** –None**Grade Level** – Elementary**Students** – All Students**Interval of Service**– One School Year  |
| **Main Criteria** | **Element** | **Description** |
| **Essential Question:** What are the most important knowledge/skill(s) I want my students to attain by the end of the interval of service? |
| **Priority of Content** | **Objective Statement** | Increase instructional time by decreasing unnecessary visits to the nurse’s office and by efficiently and effectively handling ongoing medical needs of students.  |
| **Rationale** | Each day students visit the nurse’s office for a variety of reasons. Sometimes they are scheduled and sometimes they are triage visits. By having clear procedures and tracking student data I can make the process more efficient and effective. I have identified two major areas that I believe will have the biggest impact: handling non-scheduled trips to the nurse’s office (emergency and unexpected) and handling ongoing medical needs of students (dispensing medicine etc.) Each day, between 10-15 students seek non-scheduled care at the nurse’s office for first-aid and illness. Of those at least 5 are unnecessary (students who are not visiting because they are ill or injured). For example, students often come to the office seeking hand sanitizer, tissues, or cough drops. These unnecessary visits mean students miss time in the classroom and take my time away from students who actually need my help.In addition to non-scheduled visits, I have students with chronic health problems that I provide care and case management for. These students visit me for things such as administration of medicine and nutritional needs. |
| **Essential Question:** Where are my students now with respect to the objective? |
|  | **Baseline Data / Information** | When I reviewed the visit log from last school year I noticed that on any given day at least 10-15 visits were unnecessary. This becomes approximately 75 unnecessary visits per week. After reviewing my caseload of students with chronic health problems for this school year I have identified 50 students. Of the 50 I have identified 20 that, while they have chronic health problems, I think I can reduce the number of visits to the Nurses’ office.  |
| **Essential Question:** Based on what I know about my students, where do I expect them to be by the end of the interval of service? How will I measure this? |
| **Rigor of Target** | **Target(s)** | **Unnecessary visits-** My target is to reduce the weekly average of unnecessary visits to the nurse’s office by approximately 50%.**Chronic-health problems-** Of the 50 students that I have identified that have chronic health problems 20 of them should reduce their visits by 50%.  |
| **Rationale for Target(s)** | **Unnecessary visits**- I believe I can greatly reduce the unnecessary visits because I have identified several proactive strategies and I have the support of the principal and faculty. However, I do not expect to eliminate all unnecessary visits, as it is often difficult forteachers to distinguish between students who really do need to visit the nurse and thosewho do not. In such cases, I would always prefer for teachers to err on the side of cautionand refer these students to the nurse. Based on this, I think a 50% reduction is both rigorous and attainable.**Chronic-health problems-** After reviewing the records of the 20 students I have identified, I can greatly reduce their reliance on visiting the nurse’s office because I have developed several strategies to help students start to manage their own health and I plan to include families in the plan.  |
| **Quality of Evidence** | **Evidence Source(s)** | **Unnecessary visits-** I will record the number of unnecessary visits during one week in November, January, and March to monitor the impact of my strategies and determine if there are any important trends. To gather evidence for this SOO, I will record the average number of unnecessary visits during two weeks at the end of May and beginning of June.**Chronic health problems-** I will keep a running log on each of the 20 students I have identified. Included in that log will be visits to the office as well as the strategies used. I will include this as evidence for the SLO (with the student’s identity redacted).  |
|  | **Strategies**  | **Unnecessary visits*** At the beginning of the year, I spoke to all teachers at a faculty meeting and asked for their help in this effort. I gave them a reference guide for what to ask and look for when referring students to the nurse and answered any questions they had about referrals to the nurse’s office. I plan to check back in with them at the beginning of cold/flu season and at the beginning of allergy season.
* I have worked with my principal to ensure that tissues, hand sanitizer, and paper cups for water will be ordered regularly as part of our monthly purchasing and that teachers have access to these supplies to restock their classrooms.

**Chronic health problems*** At the beginning of the year, I met individually with each of the 20 identified students and a family member. We reviewed the files of visits from the previous year and developed plans together. I will monitor those plans and have a second meeting mid-year to check-in and modify as necessary. Students and families will be part of the process.
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# Support Professional: SOO Quality Review Tool

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| --- | --- | --- |
| Priority of Content |  |  |
| 1. Does the Objective Statement describe the specific outcome(s) that will increase access to learning for students?
 | * Yes
 | * No
 |
| 1. Is the Objective Statement broad enough that it captures critical aspects of the Support Professional’s role, but specific enough to clarify the focus of the SOO?
 | * Yes
 | * No
 |
| 1. Does the objective rationale provide a data-driven explanation for the focus of the SOO?
 | * Yes
 | * No
 |
| 1. *Based on your answers to the questions above, would you rate the Priority of Content as acceptable?*
 | * Yes
 | * No
 |
| Baseline Data/Information[[1]](#footnote-1) and Rigor of Target |  |  |
| 1. Does the SOO describe related baseline data or information?
 | * Yes
 | * No
 |
| 1. Based on the related data and information, is the target possible to realistically attain, while also representing a rigorous outcome for the interval of service?
 | * Yes
 | * No
 |
| 1. If appropriate, is the target tiered to reflect differing starting points?
 | * Yes
 | * No
 |
| 1. Does the target rationale explain how the target was determined in connection with baseline data or information (benchmark assessment, historical data, trend data, etc.)?
 | * Yes
 | * No
 |
| 1. *Based on your answers to the questions above, would you rate Baseline Data and Rigor of Target as acceptable?*
 | * Yes
 | * No
 |
| Quality of Evidence |  |  |
| 1. Does the evidence source(s) clearly articulate how the outcome of the Objective Statement will be measured?
 | * Yes
 | * No
 |
| 1. Does the explanation of the evidence source(s) include how often, when it will be administered and by whom, along with a description of how the evidence will be scored (e.g., including description of scoring guides, logs, screening procedures, surveys, etc.)?
 | * Yes
 | * No
 |
| 1. *Based on your answers to the questions above, would you rate the Quality of Evidence as acceptable?*
 | * Yes
 | * No
 |
| Overall |  |  |
| 1. Are there clear strategies included that will be used to achieve the goal?
 | * Yes
 | * No
 |
| 1. If you were the evaluator, would you have approved this SOO?
 | * Yes
 | * No
 |

\*LEAs may have local policy regarding timeframes for feedback

1. Please note that Baseline Data is included under Rigor of Target here and not in the Anatomy of an SLO (p.19 of the Rhode Island Model Teacher Evaluation and Support System Edition IV) because an accurate assessment of target rigor requires that an assessment of all students’ baseline knowledge is included. [↑](#footnote-ref-1)