

## **Special Education Department Plan 2024-2025**

# **Section B - Standard 15 Educational and Other Assessments**



**Kawartha Pine Ridge District School Board**

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**Standard 15**  
**Educational and Other Assessments**

**QUALIFICATIONS OF STAFF AND ASSESSMENTS BEING CONDUCTED**

The Kawartha Pine Ridge District School Board (KPR) believes that student success is achieved through a continuous cycle of assessment. Assessment informs and drives effective instruction for all students.

The following table is taken from page 31 of the Ministry of Education's [Growing Success](#) (2010) document and describes the purposes of assessment, the nature of assessment for different purposes, and the uses of assessment information.

<b>Purpose of Classroom Assessment</b>	<b>Nature of Assessment</b>	<b>Use of Information</b>
<p><i>Assessment for learning</i>            "Assessment for learning is the process of seeking and interpreting evidence for use by learners and their teachers to decide where the learners are in their learning, where they need to go, and how best to get there" (Assessment Reform Group, 2002, p. 2)</p>	<p><i>Diagnostic assessment:</i></p> <ul style="list-style-type: none"> <li>Occurs before instruction begins so teachers can determine students' readiness to learn new knowledge and skills, as well as obtain information about their interests and learning preferences.</li> </ul>	<p><i>The information gathered:</i></p> <ul style="list-style-type: none"> <li>Is used by teachers and students to determine what students already know and can do with respect to the knowledge and skills identified in the overall and specific expectations, so teachers can plan instruction and assessment that are differentiated and personalized and work with students to set appropriate goals.</li> </ul>
	<p><i>Formative assessment:</i></p> <ul style="list-style-type: none"> <li>Occurs frequently and in an ongoing manner during instruction, while students are still gaining knowledge and practicing skills.</li> </ul>	<p><i>The information gathered:</i></p> <ul style="list-style-type: none"> <li>Is used by teachers to monitor students' progress towards achieving the overall and specific expectations, so that teachers can provide timely and specific descriptive feedback to students, scaffold next steps, and differentiate instruction and assessment in response to student needs.</li> </ul>
<p><i>Assessment as learning</i>            "Assessment as learning focuses on the explicit fostering of students' capacity over time to be their own best assessors, but teachers need to start by presenting and modeling external, structured opportunities for students to assess themselves." (Western and Northern Canadian Protocol, p. 42)</p>	<p><i>Formative assessment:</i></p> <ul style="list-style-type: none"> <li>Occurs frequently and in an ongoing manner during instruction, with support, modeling, and guidance from the teacher.</li> </ul>	<p><i>The information gathered:</i></p> <ul style="list-style-type: none"> <li>Is used by students to provide feedback to other students (peer assessment), monitor their own progress towards achieving their learning goals (self-assessment), make adjustments in their learning approaches, reflect on their learning, and set individual goals for learning.</li> </ul>

<p><i>Assessment of learning</i></p> <p>“Assessment of learning is the assessment that becomes public and results in statements or symbols about how well students are learning. It often contributes to pivotal decisions that will affect students’ futures.” (Western and Northern Canadian Protocol, p. 55)</p>	<p><i>Summative assessment:</i></p> <ul style="list-style-type: none"> <li>Occurs at or near the end of a period of learning and may be used to inform further instruction.</li> </ul>	<p><i>The information gathered:</i></p> <ul style="list-style-type: none"> <li>Is used by the teacher to summarize learning at a given point in time. This summary is used to make judgements about the quality of student learning based on established criteria, to assign a value to represent that quality, and to support the communication of information about achievement to students themselves, parents/guardians, teachers and others.</li> </ul>
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## **Continuous Cycle of Assessment**

The information gained from the continuous cycle of assessment provides a more in-depth knowledge of the student’s learning profile. This information guides instruction and the most effective strategies to support the child.

## **Linking Assessment with the Tiered Approach:**

The Tiered Approach is a model used as teachers plan to meet the needs of each learner in their class, and it is described in the Ministry of Education document [Learning for All – A Guide to Effective Assessment and Instruction for all Students, Kindergarten to Grade 12](#). Further, KPR has developed the [Supporting Students Checklist – Learning for All](#) for guidance in implementing each tier of support.

### **Tier 1:**

Planning for instruction and assessment begins by knowing the learner. Information must be gathered around a student’s strengths, needs and interests to ensure we are addressing each student. Principles of Universal Design for Learning (UDL) and Differentiated Instruction (DI) will help guide the teaching-learning cycle to ensure we address the learning needs of each student. The social, emotional and academic learning skills continuum is an essential underlying component of academic success. Teachers use the [Supporting Students Checklist – Learning for All](#) (see Standard 14) to track interventions.

### **Tier 2:**

As the teacher observes, differentiates, and uses assessment strategies throughout instruction, there will be some students who will require planned interventions based on the analysis of student achievement. An Individual Education Plan (IEP) is usually developed and results are monitored. Teachers will use the classroom data and curriculum-based assessment, along with the IEP, to support the discussion at in-school team meetings. If required, the school team, including the teacher(s), education workers, administration, parents/guardians (or their permission to discuss the student with professional staff), and appropriate members of the regional special education support team (system principal of special education, instructional leadership consultant, behaviour support assistant), will have a case conference to plan, monitor and determine the duration of strategies, resources and/or interventions. An outcome of the IEP may be to adjust the interventions, which could include additional in-school team meetings.

### **Recommendations from the In-School team could include:**

- adjustments to program and/or classroom environment and/or organizational structures in the school,
- review and analysis of classroom assessment data and curriculum-based assessment, and
- use of tracking sheets or checklists to gather further information and data.

### **Tier 3:**

A smaller percentage of students will require more intensive support, professional assessment and services. KPR uses a multi-focus team (MFT) approach (see Appendix A) to address more intensive student needs (i.e. learning, behaviour and/or social emotional needs not being met through interventions attempted at Tiers 1 and 2). Special education services staff, in addition to other pertinent central staff (such as staff from KPR's Teaching and Learning, Indigenous Education, and/or Equity, Diversity, and Inclusion departments), will be invited to a multi-focus team (MFT) meeting, based on the areas of concern which may include:

- vision,
- hearing,
- listening,
- oral language,
- motor skills,
- behavioural/social skills,
- emotion regulation/ coping skills,
- attention/concentration,
- academic processing skills,
- cognitive problem solving, and
- functional living skills.

If the MFT meeting determines that external (to the Board) community-based supports should be consulted in order to best serve the student, then a multi-disciplinary team (MDT) meeting will be called, to include the school team, the central Board team and external community-based services. Parent/guardian consent is required for both the MFT and MDT meetings.

### **Professional Assessments**

When a teacher, in collaboration with the in-school team, becomes aware that an individual student is experiencing significant difficulty meeting curriculum expectations, and all strategies outlined in the [Supporting Students Checklist – Learning for All](#) have been implemented, they may require additional information obtained through a focused assessment. All school requests for professional services assessments must be presented through an MFT meeting for approval (see Appendix A). The summary chart below provides specific information regarding the types of assessment that may be accessed:

Professional Services Staff	Qualifications	Types of Assessments: Intelligence, Academic Achievement, Neurological Processing, Social/Emotional Functioning Testing:
<b>Psychological Services</b>		
School Psychologists and Psychological Associates	<ul style="list-style-type: none"> <li>• Ph. D. or Master's degree in Psychology.</li> <li>• registered with College of Psychologists and Behavioural Analysts of Ontario in the area of school and/or clinical psychology</li> </ul>	<ul style="list-style-type: none"> <li>• mental health</li> <li>• cognitive functioning</li> <li>• academic skills</li> <li>• processing deficits</li> <li>• social - emotional functioning</li> <li>• behaviour</li> <li>• adaptive functioning</li> <li>• language processing</li> <li>• autism</li> </ul>
<b>Speech-Language Services</b>		
Speech and Language Pathologists	<ul style="list-style-type: none"> <li>• Master's degree in Speech &amp; Language Pathology</li> <li>• registered by the College of Speech/Language Pathologists and Audiologists of Ontario</li> </ul>	<ul style="list-style-type: none"> <li>• language comprehension (listening, vocabulary, grammar, following directions)</li> <li>• language expression (speaking, voice, fluency, articulation)</li> <li>• written language (reading, writing, phonological awareness)</li> <li>• pragmatic language (social interaction and language applications)</li> <li>• augmentative communication</li> <li>• speech assessment (articulation, voice, stuttering)</li> </ul>
<b>Attendance &amp; Counseling Services</b>		
Mental Health Clinicians	<ul style="list-style-type: none"> <li>• Bachelor of Social Work or Master's of Social Work (or equivalent) registered with the Ontario College of Social Workers and Social Service Workers, or the College of Registered Psychotherapists of Ontario</li> </ul>	<p>With the appropriate consents:</p> <ul style="list-style-type: none"> <li>• psychotherapeutic assessment with student and/or caregivers to determine counselling intervention,</li> <li>• psychometric measures to assess psycho/social functioning, mental health, family functioning and social history,</li> <li>• measures to assess (e.g., psycho/social functioning, mental health, family functioning, social history),</li> <li>• assessment of risk of harm to self, and</li> <li>• violent threat-risk risk assessment.</li> </ul>

<b>Applied Behaviour Analysis</b>		
Registered Behaviour Analyst (RBA)	<ul style="list-style-type: none"> <li>• Master's Degree in Psychology/Behavioural Sciences</li> <li>• Registered with the College of Psychologists and Behaviour Analysts of Ontario.</li> </ul>	<ul style="list-style-type: none"> <li>• Functional Behaviour Assessment</li> <li>• Behaviour Analytic Assessment</li> </ul>
<b>Educational / Academic Testing</b>		
Classroom & Special Education Teachers/Early Literacy Teachers	<ul style="list-style-type: none"> <li>• Bachelor of Education Degree or Equivalent</li> <li>• Registered with the Ontario College of Teachers</li> <li>• Special Education Additional Qualifications - minimum Part I</li> </ul>	<ul style="list-style-type: none"> <li>• An assortment of Educational Assessment Tools including among others: <ul style="list-style-type: none"> <li>○ Running Records</li> <li>○ First Steps Continuum</li> <li>○ Comparisons to the Ontario Curriculum &amp; Exemplars</li> <li>○ Wechsler Fundamentals</li> <li>○ Leaps and Bounds Math assessment</li> <li>○ Prime Math Assessment</li> <li>○ KPR Multiple Choice Math Assessments</li> <li>○ KPR Math Assessment Process Tasks</li> <li>○ ONAP</li> <li>○ PM Benchmarks</li> <li>○ Reaching Higher - Literacy Continuum</li> <li>○ Phonological Awareness Profile</li> <li>○ Rosner</li> <li>○ K-Primary Assessment (KPR)</li> <li>○ DRA, GB+ FSL Assessment</li> <li>○ CASI</li> </ul> </li> </ul>

### **Average Wait Time, Consent, Communication, and Privacy**

A variety of factors are used to prioritize referrals from each school, such as:

- nature of referral,
- age of student,
- urgency for assessment results,
- time since previous assessment, and
- lived experience of the student.

### **Psychological Services**

#### **Average Wait Time for Psycho-Educational Assessment**

To ensure equity of access to assessments, all referrals for psycho-educational assessments come centrally through the MFT meeting at the school. Assessments are prioritized based on the overall needs in the system, and they are allocated according to the principles of equitable and inclusive education. Psychological professionals will provide consultation as needed to schools in the meantime.

## **Informed Consent**

In order for Psychological Services staff to be involved with students, written, informed consent is obtained from the parent(s)/guardian(s), or student (where the student is 18 years of age or over). The informed consent procedure begins when the school staff sends home a parent consent form, "Consent for Psychological Assessment" (Appendix B) for signature.

Accompanying this form is the brochure "Information for Parents about Psychological Services" (Appendix C), which provides information required for informed consent. Once consent is obtained Psychological Services staff begin the assessment procedures. This informed consent procedure is in keeping with the requirements of the [Psychology Act, 1991, c. 38](#). The [Regulated Health Professions Act, 1991, S.O. 1991 c.18](#) the Standards of Professional Conduct of the College of Psychologists (1995), the [Canadian Code of Ethics for Psychologists \(1991\)](#) and the [Municipal Freedom of Information and Protection of Privacy Act R. S.O. 1990](#).

## **Sharing Information**

With Parents:

The results of the assessment are discussed in a face-to-face meeting with the parents/guardians and usually with school personnel. A copy of the psychological report prepared about the student is given to parents and, unless the parents direct otherwise, to the school principal.

With Physicians, Agencies, etc.:

Parents/Guardians can complete a consent form, "Consent to Release Information" (Appendix D), authorizing the release of information to third parties. No information is released, orally or in written form, without this authorization. If third parties request information from psychological services, a consent to release Information signed by the parent/guardian or adult student is required.

## **Communication of Diagnosis**

The scope of practice of psychology as defined within the Psychology Act includes "the diagnosis of neuropsychological disorders and dysfunctions and psychotic, neurotic and personality disorders and dysfunctions". The Regulated Health Professions Act permits members of the College of Psychologists of Ontario to perform the "controlled act" of "communicating a diagnosis". The Regulations under the Psychology Act, as well as the Standards and Guidelines of the College, place additional conditions on who may provide these services. If a learning or mental health diagnosis results from psychological assessment, the school psychologist or psychological associate will communicate directly with the parent/guardian to explain the results.

## **Privacy of Information**

Reports from psychological services are provided to parent(s)/ guardian(s), the school principal (for sharing with appropriate school staff and for filing in the documentation folder of the OSR), and to others only with the expressed written consent of the parent(s)/ guardian(s). A copy of the psychological report is also filed in the confidential and secure psychological services file, along with any psychological assessment data and case notes. These latter files are accessible only by psychological services staff and must be kept for 10 years following the date of the last contact with the student, or until the student is 31 years of age, whichever is

later.

## **Speech-Language Services**

### **Average Wait Time for Language Assessment**

To ensure equity of access to assessments, all referrals for language assessments come centrally through the MFT meeting at the school. Assessments are prioritized based on the overall needs in the system, and they are allocated according to the principles of equitable and inclusive education. Speech and language professionals will provide consultation as needed to schools in the meantime.

### **Informed Consent**

As a regulated health profession, Speech-language pathologists follow the expectation of the College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO).

The general practice of Speech-Language Pathologists employed by KPR is to become involved with students after receiving the Consent for Speech-Language Pathology signed by a parent/guardian or student who is over the age of 18 years (see Appendix E). This procedure is consistent with the Code of Ethics of the College of Speech-Language Pathologists and Audiologists of Ontario (CASLPO), (1996); the Consent to Treatment Act; the Regulated Health Professions Act, 1991 (July 1996); the Personal Health Information Act (2004); and in the Municipal Freedom of Information and Protection of Privacy Act (1989).

### **Sharing Information**

Speech-Language Pathologists may share assessment information with school staff, parent(s)/guardian(s), and/or students in a variety of ways:

- face-to-face meetings,
- telephone conversations, and
- written reports.

The Parent(s)/Guardian(s) or student 18+ completes a consent form authorizing the release of information to third parties, if such action is required. The form also enables information to be sent to the school board from outside agencies to assist the Speech-language pathologist working with the student.

### **Privacy of Information**

Reports from Speech-language services are provided to parent(s)/guardian(s) or the student 16+, the school principal (for sharing with appropriate school staff and for filing in the documentation folder of the OSR), and to others only with the expressed written consent of the parent(s)/guardian(s). A copy of the speech-language report is also filed in the confidential and secure Speech-language services file, along with any speech-language assessment data and case notes. These latter files are accessible only by Speech-language services staff and must be kept for 10 years following the date of the last contact with the student, or until the student is 31 years of age, whichever is later.

## **Attendance and Counselling Services**

### **Average Wait Time for Assessment**

Referrals to MHC are typically made through the school's principal or designate. Counselling services are prioritized by need. MHCs will prioritize intervention for students that are requiring crisis supports, or where there is an urgent need reported. Wait times for urgent mental health needs or risk-related behaviours are approximately two days. Wait times for lower acuity mental health needs are approximately two weeks.

### **Informed Consent**

In most cases, the principal or designate will obtain all custodial caregivers' permission to share referral information with the MHC and with parental agreement, will submit a request for an MHC Consultation. Upon receiving a referral for consultation, the MHC will contact the parent/guardian to directly obtain verbal or written consent prior to meeting individually with a student. Informed consent is obtained when the parent(s)/guardian(s) or students 18+ signs or verbally indicates consent to the Attendance and Counselling Services Referral and Consent for Access to Student Records form (Appendix F). This informed consent procedure is consistent with the [Education Act and The Personal Health Information Protection Act, 2004 \(PHIPA\)](#).

Prior informed consent for MHC services may not be required when critical incident support or when there is a concern about imminent risk of harm to self or others. Additionally, when an attendance referral is made to the MHC under their investigative role as Attendance Counsellor, informed consent is not required.

### **Sharing Information**

Attendance and Counseling Services staff may share student needs/service requirements and recommendations with school staff and parent(s)/guardian(s) in a variety of ways:

- face to face meetings,
- phone conversations,
- written reports,
- case conferences,
- secure email, or
- school-based team meetings.

The parent(s)/guardian(s) sign a release of information form authorizing the release of information to third parties, if such action is required.

### **Privacy of Information**

A service summary is written for each student referred to attendance and counseling Services. This report is filed in the confidential and secure attendance and counseling files at the KPR Board Office in Peterborough. These files are accessible only by attendance and counseling services staff and where appropriate consent is obtained to share with other service providers. The files must be kept for seven years following the day the student becomes 18 years of age.



## MULTI-FOCUS TEAM CONSULTATION PATHWAY



The Multi-Focus Consultation Team is an interdisciplinary team composed of KPR central special education and professional services staff, in collaboration with school educational staff. The role of this team is to provide school support and consultation for those students with special education needs, to make recommendations regarding special education support, interventions, and academic modifications to grade level, as well as to vet and triage referrals for professional assessments (including Psychological assessments and Language assessments).

### School determines need for student support

Teacher or parent identifies concern related to student achievement:

- » Teacher recognizes a significant learning gap, unique pattern of learning, or significant concerns related to student achievement
- » Teacher uses the [Supporting Students Checklist – Learning for All](#) to document assessment of student strengths and needs, and to review individual, instructional, and environmental interventions
- » Teacher consults with parent/guardian and SERT to explore interventions, accommodations, differentiated instruction, review IEP if developed, and identify additional information required to support the student

If, after a period of time, school-based intervention is not successful in ameliorating student needs, school staff may choose to move to a Multi-Focus Consultation Team meeting

### Documentation Completed

- » School contacts parents/guardian to obtain informed [written consent](#) to make a referral to the Multi-Focus Consultation Team
- » School SERT creates a referral in KPR Lite. This is where documented consent and any subsequent minutes or documentation will be attached
- » School team submits the agenda for the Multi-Focus Consultation Team meeting, including documented consent and the completed Supporting Students Checklist, at least 1 week prior to the Consultation meeting

### Consultation Meeting

- » Multi-Focus Consultation Team membership should include School Administration, SERT, ILC, as well as the assigned Psychologist, Speech/Language Pathologist, Mental Health Clinician, and BSA. Other central or school-based supports, such as the classroom teacher(s), BCBA, Principal of Indigenous Education, EDI Department members if applicable, or SEA trainer should be invited when indicated.
- » Multi-Focus Consultation Team meetings should occur no more than once per month at requesting schools and can occur virtually if indicated. Scheduling is to be arranged by the SERT or school administration
- » The school's SERT will be responsible for chairing the meeting and ensuring that minutes are taken
- » Multi-Focus Consultation Team meeting process:
  - SERT presents interventions already taken, and assessment results to the Multi-Focus Consultation Team
  - Multi-Focus Consultation Team recommends additional programming or environmental interventions
  - Consideration of **modifications to grade level** of student programming **must** be reviewed and documented through the Multi-Focus Consultation Team process (see KPR IEP Page 4 – Modified Below Grade Level guidelines)
  - The team collaboratively updates [Multi-Focus Consultation Team minutes](#) with intervention plan developed
  - Teacher/SERT and/or Administration will discuss the recommended intervention plan, which could include additional observation, further professional assessment, and programming recommendations, including program accommodations, alternate programs, and/or potential program modifications with parent/guardian. *Parents/guardians must be made aware of the impact on student pathways of any proposed program modifications to grade level.*
  - Once parents have been consulted in the recommended changes to the student's program, the school team updates the IEP

# MULTI-FOCUS TEAM CONSULTATION PATHWAY



## Consultation Meeting

- » Multi-Focus Consultation Team collaborates with the school team to develop and implement a plan for the student, including monitoring strategies. *Student program modifications to grade level should be reviewed by the MFT when students are transitioning*
  - between divisions,
  - between elementary and secondary school,
  - and/or the data is indicating a change in baseline achievement.
- » Multi-Focus Consultation Team explores and recommends any additional referrals or consultation as required, based on intervention attempted to date
- » Multi-focus Consultation Team may recommend additional assessment of the student through KPR's Psychology team, Mental Health Clinicians, Speech Language Pathologists, or BCBAs. If an assessment is recommended, the principal or professional staff member responsible for the assessment will contact the family to discuss the nature of assessment and to obtain informed consent to proceed with assessment. Assessments that are recommended through the Multi-Focus Consultation Team will be initiated through KPR Lite by the professional responsible for the assessment
- » Minutes of the Multi-Focus Consultation Team meeting will be documented on the Multi-Focus Consultation Team Meeting Minutes form and will be uploaded to the Multi-Focus Consultation Team referral in KPR Lite by the SERT

## Central Review and Monitoring of Professional Assessments

- » Central Review Team consists of Executive Officer of Professional Services, Senior Psychology and Speech Language Clinicians, Team Lead of Technology and Support Systems, Manager of Professional Services, and System Principals of Special Education
- » Central Review Team will meet quarterly to review scope of Multi-Focus Consultation Teams, referrals for consultation, as well as to monitor the number of professional assessments recommended
- » When there is disagreement with the recommendations made by the Multi-Focus Consultation Team, the Central Review Team will review the student's needs and the recommendations made, and will suggest a path moving forward
- » In some situations, the Central Review Team may be requested to triage and assign referrals to expedite equitable service for students
- » The Central Review Team will review system data on 1) assessment allocation, 2) reading disability interventions, 3) student program modifications



## KAWARTHA PINE RIDGE DISTRICT SCHOOL BOARD CONSENT FOR PSYCHOLOGICAL CONSULTATION AND REVIEW

Full Name of Student (please print): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_

**About this consent form:**

- I understand that there is a need for a psychological consultation and/or a review of a previously completed psychological assessment.
- This consultation/review will be conducted by a Clinician from the Kawartha Pine Ridge District School Board's Psychology Services Department with the goal of assisting the school in addressing my child/youth's educational, social emotional, and/or behavioural needs.
- Such consultation and/or review may require that information be obtained from school board staff and school records, including my child/youth's Ontario Student Record (OSR).
- Documentation regarding the involvement of Psychological Services will be securely maintained at the central Education Centre office, in my child's psychology file and retained until the year of their 31<sup>st</sup> birthday.

**Reason(s) for Referral (check all that apply):**

- ☒ Review of psychological assessment completed by/date: \_\_\_\_\_
- ☐ Additional report review (list all reports to be reviewed): \_\_\_\_\_
- ☐ Considering a trial of technology for learning
- ☐ Consultation regarding Identification and Placement
- ☐ Participation in school case conference
- ☐ Program planning
- ☐ Observation of child/youth (as discussed by school and Clinician)
- ☐ Completion of questionnaire/checklist (as discussed by school and Clinician)
- ☐ Other: \_\_\_\_\_

Clinician Name: \_\_\_\_\_ Contact: \_\_\_\_\_

By signing this form, I am providing permission for a psychological review and/or consultation for my child/youth. My consent is voluntary, and I understand that I may withdraw consent at any time.

Parent/Guardian (please print) \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_

Email of Parent/Guardian \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Student Signature (for students over the age of 12) \_\_\_\_\_

Date \_\_\_\_\_

This permission is valid for one year from the date signed. To withdraw consent for Psychological Services involvement, please contact your Principal or the Psychological Services member

### What are the benefits of working with Psychological Services?

Our staff members have years of special training and education to help them identify a child's specific strengths and needs related to learning, emotions and behaviour. We can help identify problems and challenges such as learning disabilities, developmental delays, levels of intelligence, anxiety, depression or serious behavioural problems. Once we better understand the challenges your child or teen is facing, we can make recommendations to help your child cope with school. We also can give you tips on dealing with behaviour problems or supporting your child. Any child or teenager who is having difficulties can benefit from our services.

### What are the risks?

- When most children complete the assessment, they find parts of it challenging and interesting. A small number of children, however, become very anxious or distressed when completing the activities. We are well trained in helping children deal with this type of upset, and we will stop the testing until your child is able to continue. Please let us know about any concerns you have before testing begins.
- The assessment may lead to changes for you and your child. For example, we may find that your child or teenager has problems you did not expect. Knowing this information will help your child in the long run, but it can be upsetting at first for you and your child. It also may lead to some changes in your child's or teen's educational program.
- If we find your child has a problem such as difficulty paying attention, a learning disability, depression or low intellectual ability, a special education program may be needed. This could mean a change in timetable, or having to spend some time working with a different teacher. Far less often, it could mean a change of school. Or, we could find that your child does not qualify for special education programming according to the rules set by the Ministry of Education. In that case, you would have to find other resources for your child.

### Are there other ways to help my child?

Parents sometimes ask if there are other ways to get help for their child, without using the school board's Psychological Services. You could choose to talk to your child's or teen's teacher, or ask for a teacher assessment only. Teachers are trained to measure children's academic (learning) skills, and to help them with their courses. Psychological Services staff members, however, have the specialized training to identify what is causing your child's problems.

If you would rather receive services from someone who does not work for the school board, you could work with a private psychologist or other practitioner. You would have to pay any costs involved, however. If you do have a private assessment done, please have the results sent to the school board, so that we can use the information to design a program for your child.



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## Psychological Services for Students

### Information for Parents and Guardians



EDUCATING FOR SUCCESS!



Sometimes, when a student is having difficulty in school, referral to Psychological Services at the Kawartha Pine Ridge District School Board may be helpful. Psychological Services may help teachers and other staff understand your child or teenager better, and help develop a program that best meets your child's needs.

This brochure answers questions parents ask most often about working with Psychological Services. Please read it before signing the consent form. It's important that you understand as much as possible about Psychological Services before you give permission for us to work with your child or teen.

### Why did the school refer my child to Psychological Services?

By now, you probably have spoken with school staff about your child. The school would like to know more about the challenges your child is facing, and what is causing them. School staff members who work with your child want expert advice to help plan the best possible educational program, so that your child can learn and be successful. Psychological Services also can offer ideas and tips on how you can help support your child's learning at home.


### Who will be seeing my child?

Psychological Services staff members are all highly trained professionals who care about children and youth. Each one has a Master's Degree or a Doctorate in education or psychology. The psychological assessment (testing) of your child will be completed or supervised by a registered member of the College of Psychologists of Ontario.

### Why do you need my permission?

Ontario law states that a responsible person must give "informed consent" for any kind of psychological service, before it begins. "Informed consent" means you must understand the type of psychological service your child will receive, the expected benefits and risks, any possible side effects, other action you could take, and any consequences that would be likely if your child did not receive the psychological service.

This brochure provides the information you need. Please read it carefully. If there is anything you don't understand, or if you have other questions, please ask us before you sign the white consent form.



### How old do you have to be to give consent?

For students up to 17 years of age, the parent or guardian must give written permission for their child to receive the psychological testing. In these cases, we take the time to speak with the student as well, to explain what the testing will include and to answer any questions.

Students who are 18 years of age or older may sign the consent form, if they are able to understand what will be taking place and give their informed consent. If there is any doubt that the student is able to understand and give permission, we will ask the parent or guardian to give written consent as well.

### Can I change my mind after giving permission?

Yes, you can change your mind and take away consent. If you do change your mind, just call the principal or the Psychological Services staff member working with your child.

### What kind of services will my child receive?

When you give your consent for Psychological Services to work with your child or teen, the type of service will depend on your child's needs. We may:


- watch how your child acts and works with others at school
- speak with you, others who care for your child or school staff
- complete an assessment (detailed testing) of your child
- make recommendations to school staff on how best to meet your child's strengths and needs.

The attached, white consent form describes what services will be provided specifically for your child. We also may speak with you further about any benefits or risks of receiving the service.

### What is a psychological assessment?

Once we have received your permission, we will begin to collect information about your child or teen from you, your child's teachers and your child. We may do this through interviews, by looking at your child's school record, by watching your child in the classroom, and by asking you, your child and the teachers to fill out questionnaires.

When we complete an assessment, we follow several steps:

1. We will meet with your child individually. Your child will complete psychological tests that measure things such as:
- 

- academic skills, such as reading, writing and math
- intelligence
- ability to pay attention and memory
- "adaptive" skills (how well children can help themselves adjust to new situations)
- emotional well-being (your child's mood, anxiety or sadness, for example)
- behaviour

Your child may not be given all of these tests. The tests will depend on your child's needs and the reasons for being referred to Psychological Services.


2. If your child has worked with other school board specialists, such as a speech and language pathologist or school board counsellor, we may review any reports they have completed as well.

3. If needed, we may ask your permission to contact others who have worked with your child, such as your family doctor, the Children's Aid Society, or other professionals. We may review any other psychological assessments that have been done in the past.

4. We will review and "interpret" all the information we have collected. This means we will reach conclusions based on the results of your child's testing. We will then meet with you and with school staff to discuss the results, and give recommendations to help your child.

5. We will prepare a written report that describes the results of the assessment and our recommendations. We will give you a copy of the report, and keep another copy in Psychological Services' files for at least 10 years after the student leaves school.

6. A copy of the report likely will be put in your child's Ontario Student Record (OSR) at school. Teachers and members of school staff who will be working with your child or teen will be able to read the report. Once the report is in the OSR, only the principal can remove it. You can ask the principal, in writing, to consider removing the report at any time.





## KAWARTHA PINE RIDGE DISTRICT SCHOOL BOARD

### Consent to Release Information

Student: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City, Postal Code: \_\_\_\_\_

School: \_\_\_\_\_

**Initial beside all that are applicable:**

Educational \_\_\_\_\_

Psychological \_\_\_\_\_

Behavioural \_\_\_\_\_

Social Work \_\_\_\_\_

Medical \_\_\_\_\_

Psychiatric \_\_\_\_\_

Speech & Language \_\_\_\_\_

Occupational Therapy \_\_\_\_\_

Physiotherapy \_\_\_\_\_

Other (specify) \_\_\_\_\_

I/we hereby authorize the release of pertinent information

To: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

From: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Parent/Guardian/Adult Student: \_\_\_\_\_

Signature of Student (age 12 or older) \_\_\_\_\_

Signature of Witness: \_\_\_\_\_

Date: \_\_\_\_\_



## KAWARTHA PINE RIDGE DISTRICT SCHOOL BOARD

## CONSENT FOR SPEECH-LANGUAGE PATHOLOGY

O.E.N. _____ - _____ - _____		(Signature of Speech-Language Pathologist)		(Return Date)	
STUDENT SURNAME ( <i>Capitalized</i> ), Given Names		Gender	Birthdate ____ / ____ / ____ dd mm yy		Date of Entry to Canada ( <i>if applicable</i> ) ____ / ____ / ____ dd mm yy
Current School		Grade/Program	Room Number		Teacher ( <i>full name</i> )
Student's Mailing Address ( <i>street, apartment #, town/city</i> )					Postal Code
Parent's/Guardian's Full Name		Has legal authority to consent for this service? Y      N		Primary Phone Number (    ) Secondary Number (    )	
Parent's/Guardian's Full Name		Has legal authority to consent for this service? Y      N		Primary Phone Number (    ) Secondary Number (    )	
Student Lives with		Relationship to Student			

## REASON FOR REQUEST:

☐ Speech Assessment and related support. Referral to School Health Services for speech therapy if appropriate.

☐ To provide assessment and/or ongoing consultative support of the student's communication needs at school provided by the Speech-Language Pathologist (S-LP) and/or the Communicative Disorders Assistant (CDA). Recommendations will be provided as appropriate.

☐ Language Assessment completed by the Speech-Language Pathologist (S-LP) in the areas of oral and/or written language with recommendations to be provided as appropriate.

☐ Other: \_\_\_\_\_

\_\_\_\_\_  
(Signature of School Contact)

\_\_\_\_\_  
(Signature of Principal)

\_\_\_\_\_  
(Date)

## STATEMENT OF INFORMED CONSENT

This request is being made to obtain information to assist the school in meeting this student's needs as outlined above.

## Before this assistance is provided, I understand that:

- the clinician's file will be destroyed after the student's 31<sup>st</sup> birthday;
- the Speech-Language Pathologist or Communicative Disorders Assistant providing the service will have access to the student's Ontario Student Record (OSR), and will consult with School Board personnel as needed;
- this form and any subsequent reports will be placed in the documentation folder of the student's OSR and may be filed electronically on KPRDSB file servers;
- access to the clinician's files may be denied if such access will put the student at risk (PHIPA);
- the nature of the service and any risks or benefits have been explained to me by school staff; and
- this consent will remain valid for 12 months, is voluntary and may be withdrawn at any time.

Date: \_\_\_\_\_ Signature of Custodial Parent/Legal Guardian/Student 18+ years: \_\_\_\_\_

*In addition to being KPRDSB employees and being governed by KPRDSB policy, Speech-Language Pathologists are Regulated Health Care Professionals and must comply with health care legislation including the Regulated Health Professions Act, Audiology and Speech-Language Pathology Act, Health Care Consent Act and Personal Health Information Protection Act. Personal information contained on this form or collected on behalf of the Board of Education regarding assessment and assistance to the student indicated above is collected under the authority of the Education Act and in compliance with the Municipal Freedom of Information and Protection of Privacy Act.*

## INSTRUCTIONS:

- original signed copy to Professional Services Secretary, Education Centre
- middle copy in OSR
- bottom copy to PARENT/GUARDIAN or STUDENT 16+ years

## SPECIAL SERVICES USE ONLY:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
dd mm yy

## CODE:

- ☐ SA      ☐ SL  
☐ CCN      ☐ CONS  
☐ OTHER \_\_\_\_\_



## Ontario Student Record Referral Summary

### Attendance and Counselling Services

Please sign and return the completed form to the school.

#### Student Information

OEN

206479289

Name

Green, Taylor

Gender

F

Age

17

Birthdate

2007-07-31

Grade

12

#### School Information

School

CAMPBELLFORD DISTRICT HIGH SCHOOL

School Address

119 Ranney Street N Campbellford, Ontario

#### Counselling Information

Referred By

Mental Health Professional

Michaelene Shannon

#### Custodial Parent/Legal Guardian (Please Complete)

Name

Home Phone

Relationship

Cell Phone

Lives with Student (Yes, No, Part-time)

Custody (Full, Joint, Other)

Email

Name

Home Phone

Relationship

Cell Phone

Lives with Student (Yes, No, Part-time)

Custody (Full, Joint, Other)

Email

Name

Home Phone

Relationship

Cell Phone

Lives with Student (Yes, No, Part-time)

Custody (Full, Joint, Other)

Email

I hereby consent to support from *Attendance and Counselling Services* for Green, Taylor in addition, I consent that *Attendance and Counselling Services* personnel can access this student's records (Ontario Student Records and other files) and discuss their progress with the principal, teachers and other appropriate staff.

_____ Student	_____ Signature of Student	_____ Date (YYYY-MM-DD)
_____ Custodial Parent/Legal Guardian	_____ Signature of Parent/Legal Guardian	_____ Date (YYYY-MM-DD)
_____ Custodial Parent/Legal Guardian	_____ Signature of Parent/Legal Guardian	_____ Date (YYYY-MM-DD)
_____ Custodial Parent/Legal Guardian	_____ Signature of Parent/Legal Guardian	_____ Date (YYYY-MM-DD)

**Please Note:**

1. Custodial Parent/Legal Guardian signature is not required for adult students aged 18+.
2. As a result of this referral, a report will be on file at the Education Centre and a service summary will be placed in the documentation section of the student's *Ontario Student Record (OSR)*.
3. This information is being collected and will be used and retained in keeping with the *Freedom of Information and Protection of Privacy Legislation*. Any questions regarding this procedure or legislation should be directed to the *Freedom of Information and Privacy Coordinator or the Manager, Counselling Services*.

Revised: September 2023

Kawartha Pine Ridge District School Board

Ontario Student Record Referral Summary  
Attendance and Counselling Services

## KAWARTHA PINE RIDGE DISTRICT SCHOOL BOARD

### Consent to Release Information

Regarding:	D.O.B.:
Address:	City, P.C.:
School Attended:	
Note: Signature, initials are required below.	
Educational	Psychological
Behavioural	Social Work
Medical	Psychiatric
Speech & Language	Occupational Therapy
Physiotherapy	
Other (Specify)	
I/we hereby authorize the release of pertinent information	
TO:	
	(name)
	(address)
FROM:	Kawartha Pine Ridge District School Board
	(name)
	1994 Fisher Drive, Peterborough, ON K9J 6X6
	(address)
Date: (Valid for 12 months)	Signature of Parent/Guardian/Adult Student
	Signature of Witness