

Section F: EDUCATIONAL AND OTHER ASSESSMENTS



FEEDBACK

[We value your feedback! Please click this feedback link to leave your suggestions/comments on the 2023-2024 Special Education Plan.](#)

Purpose of the Standard

To provide details of the board's assessment policies and procedures to the ministry and to make parents aware of the types of assessment tools used by the school board, the ways in which assessments are obtained by IPRCs, and the ways in which assessments are used

Ensuring assessment practices and learning conditions are rooted in critical consciousness ensures that no groups of students are marginalized or discriminated against ([hooks 2003](#)). The primary purpose of student assessment and evaluation is to improve learning. Assessment has the greatest potential to improve student learning when it is an integral part of all classroom activities and when it is used to identify students' strengths and needs to determine the next steps for learning. The Ontario Ministry of Education policy documents [Growing Success: Assessment Evaluation and Reporting in Ontario Schools \(2010\)](#) and [Growing Success – The Kindergarten Addendum](#) provide guidance to schools on policies and procedures for assessment, evaluation, and reporting for Kindergarten and Grades 1 to 12. The policies outlined in Growing Success, described below, reflect the current state of continuously evolving knowledge about learning.

When a teacher observes a student who has some areas for growth at school (e.g., academic, social/emotional, behavioural), the teacher will seek support through the principal and the Special Education and Inclusion Consultant. Collaboratively, they will ensure that instructional intervention strategies focus on the student's identity, lived experiences, strengths and areas for growth. Strategies need to include the following:

- Evidence of Culturally Relevant and Responsive Pedagogy, Cultural Safety and Trauma-Informed practices and assessment that reflects the student's identity and lived experiences

- Evidence of Tier 1 and Tier 2 Strategies, Universal Design for Learning and Differentiated Instruction
- Evidence of Student Information and an Individual Learning Plan (ILP) that record and track any strategies implemented
- Evidence of implemented strategies recommended by the Special Education and Inclusion Consultant

Most student needs can be met in the regular classroom with Tier 1 and Tier 2 interventions that consider the student's identity, lived experiences, strengths and areas for growth. If this is not possible, after careful consideration of the above and communication with parents/guardians/caregivers, the teacher may refer the student to IST and/or SST.

Assessments by Teachers

Assessment findings provide information relevant for classroom programming, Individual Education Plans, the Provincial Report Card and Identification Placement and Review Committees. Teachers collect assessment information in a variety of ways: formal and informal observations, discussions/conversations/questioning during the learning process, student-teacher conferences, homework, group work, demonstrations/performances, projects, portfolios, developmental checklists/continua, peer and self-assessments/reflections, essays and tests. Assessment is planned at the same time as instruction, to determine what needs to be taught, guide next steps and help both teachers and students monitor and evaluate progress towards achieving learning goals.

Kinds of Educational Assessment

Teachers carry out educational assessment as part of their on-going work with all students and for students with special education needs, throughout the development, implementation and review of Individual Education Plans (IEP). Teachers use terms such as *diagnostic*, *formative* and *summative* to describe the kinds of educational assessment that can be used for different purposes: *assessment FOR learning*, *assessment OF learning*, and *assessment AS learning*.

Assessment FOR learning is the process of collecting information to decide where learners are in their learning, where they need to go and how best to get there. It is integral to the IEP process and can be diagnostic and/or formative in its use:

- **Diagnostic assessment** occurs before instruction begins so teachers can determine students' readiness to learn new knowledge/skills and identify their instructional needs. Teachers use the information to determine what students already know and can do with respect to the knowledge and skills outlined in the

curriculum expectations. Teachers then work with students to set appropriate learning goals and plan differentiated and personalized instruction/assessment.

- **Formative assessment** is frequent and ongoing, carried out while students are gaining knowledge and practising skills. Teachers use the information to monitor students' progress towards achieving expectations, to provide students with descriptive feedback and coaching for improvement, to plan next steps and to differentiate instruction and assessment in response to student needs.

Assessment OF learning is the process by which teachers record and report on student learning. This assessment is summative, occurring at or near the end of a period of learning. The information gathered is used by teachers to evaluate and communicate achievement at a given point in time, on the basis of pre-set criteria. It may also be used to plan further instruction.

For most students in Grades 1 to 12, this kind of assessment looks at achievement of the provincial curriculum expectations against Ministry established rubrics.

- For students with special education needs and for English language learners who require accommodations but do not need to have grade expectations modified, evaluation of achievement is based on the Ministry grade/course expectations and achievement levels.
- When students require modified or alternative expectations, evaluation of achievement is based on the expectations outlined in their IEPs. For this reason, it is important that IEP goals be expressed as specific and measurable outcomes.

Assessment AS learning is the process by which teachers help students learn how to be their own best assessors, to become independent learners. This assessment is **formative**, requiring teacher support, modelling and guidance and structured opportunities for students to assess themselves. Students learn how to monitor their own progress, recognize when they need help, advocate for themselves, adjust their approaches to learning and set new goals. These are increasingly important skills for students with special education needs as they progress through the grades.

Diagnostic Assessment Tools for Teachers

The Ministry of Education released [Policy Program Memorandum No. 155 Diagnostic Assessment in Support of Student Learning](#) to outline how diagnostic assessment tools may be used in support of student achievement. It specifies the shared and individual responsibilities of teachers, principals, and school board staff and their collective accountability for student achievement. PPM 155 guidelines are focused on the effective use of diagnostic assessment tools to inform teaching and learning practices in the classroom. The guidelines direct that teachers must use diagnostic assessment during the school year, selecting tools from the board's approved list and that they are to use their

professional judgment when selecting and using diagnostic assessment tools.

PPM 155 guidelines do not apply to:

- Individual educational and/or professional assessments conducted to determine the special education programs and/or services required by students with special education needs
- Large Scale Assessments like EQAO (Grade 3, 6, 9 and OSSLT), Program for International Student Assessment (PISA), Trends in International Mathematics and Science Study (TIMSS), Progress in International Reading Literacy Study (PIRL), Pan-Canadian Assessment Program (PCAP) and other Ministry mandated assessments.

Canadian Cognitive Abilities Test (CCAT-7)

The purpose of the Canadian Cognitive Abilities Test (CCAT-7) for Grade 3 students is to provide comprehensive information to classroom teachers about the learning strengths and areas for improvement for all students. Teachers will use the data to plan differentiated assessment and instruction for students.

The results from the CCAT-7 may be considered by the School Support Team (SST) to determine if further assessment is warranted. Depending on the findings, the SST may recommend referral of a student for an individual intellectual assessment.

Central staff may also use test results to establish a basis for the evaluation of existing programs and assist in planning appropriate curriculum and instructional programs at the system level. Individual test results will be treated confidentially and any data used for purposes of reporting to the public will be done generically without disclosure of identifying information.

Information about the CCAT-7 administration process is posted on the [TDSB website](#).

The tables below are not in compliance with TDSB AODA standards. Please advise SpecialEd@tdsb.on.ca if you require the information in an AODA-compliant format.

TDSB Approved List of Diagnostic Assessment Tools

Assessment/Tool	Grades/Division	Purpose	Recommended Timelines
Observation Survey	Early Years	Provides a comprehensive overview of a student's level of literacy development; measures students' skills and understanding of reading and writing	On-going
Running Records and Reading Conference	Primary	Document students' reading behaviours to determine a student's instructional reading level; to create dynamic guided reading groups; to allow for documentation of progress over time	On-going for all students; more frequently for those students who are experiencing difficulty with text (i.e., at least once every 2 weeks)
DRA	Primary K – 3 Junior 4 – 6 Intermediate 7 – 8	Provides information about individual student's skills in reading (decoding, fluency, and comprehension); assists in making instructional decisions when grouping students for modelled, shared, guided and independent reading	Senior kindergarten: Spring – only for those students demonstrating an understanding of the concepts of print Grades 1 – 8: minimally twice a year, especially for students who are at level 2 and below in reading and writing
CASI	Junior 4 – 6 Intermediate 7 – 8	Assists teachers in determining students' strengths and learning needs individually, as small groups or whole class profile; provides information on students' attitudes to reading, reading preferences and interests; assists in making instructional decisions when grouping students for modelled, shared, guided and independent reading	Grades 4 – 8: Fall and Spring Reading assessment may be administered in the middle of the year with students who require closer monitoring in reading
Literacy Success Kit	Secondary 9 – 10	Intended for Grade 9 or Grade 10 English courses or any subject; assists teachers in determining students' strengths or learning needs individually, as small groups or whole class profile	Grades 9 – 10: 4 to 6 weeks into the course in a semestered school, or 10 to 12 weeks in a non-semestered school
Le Sondage d'observations	French Immersion K – Grade 1	Provides a comprehensive overview of a student's level of literacy development; measures students' skills and understanding of reading and writing	K to Grade 1: Fall, as appropriate
Alpha Jeunes	French Immersion Grades 1 – 3	Provides information about individual student's skills in reading through miscue analysis of oral reading and assessing a retell of the text in French; Assists in making instructional decisions when grouping students for modelled, shared, guided and independent reading	K and Grade 1: students who demonstrate readiness, as appropriate Grade 1: Spring only Grades 2 to 3: Fall and Spring
Trousse Diagnostique de Lecture	French Immersion Grades 4 – 8	Assists teachers in determining students' strengths and learning needs with respect to reading comprehension and critical thinking skills and to determine appropriate teaching strategies for reading; Assists in making	Grade 4: Fall and Spring Grades 5 to 8: once a year in French and CASI once a year in English Middle of the year for students

		instructional decisions when grouping students for modelled, shared, guided and independent reading	requiring monitoring in French, English or both
Assessment/Tool	Grades/Division	Purpose	Recommended Timelines
Burns-Roe Reading Inventory	ELD - LEAP	Determines students' levels of literacy in reading vocabulary, comprehension and decoding skills; information taken into account at the yearly LEAP review (April/May)	Twice per year – beginning and near year-end
ERGO	ESL – Elementary and Secondary	Initial assessment of oral, reading and writing skills; elementary assessment enables teachers to provide the appropriate program, resources and modifications and/or adaptations to an ELL's program; secondary version is aligned with ESL courses of study for secondary school program placement	The tool is used once as initial assessment
STEPS to English Language Proficiency	ESL	For assessing and monitoring English language learners' language acquisition and literacy development across the Ontario curriculum (oral, reading, writing)	K to 12 initial diagnostic and at reporting intervals

TDSB Approved Diagnostic Assessment Tools for K-12 Mathematics (Tier 1)

Diagnostic Tool	Description
Core Mathematics Resources Grades K-12	<p>Trillium-listed core mathematics resources include materials to assess students' prerequisite skills, concepts and vocabulary.</p> <p>Core resources contain:</p> <ul style="list-style-type: none"> • Diagnostic assessments for every chapter or unit (e.g. Getting Ready sections). • Additional practice resources <p>French: Core mathematics resources are available</p>
Knowledgehook Grades: 1-10	<p>Knowledgehook is an instructional guidance system that leverages formative assessment in a game-based environment to provide insights into student mathematical learning and intervention materials to support.</p> <p>Knowledgehook contains:</p> <ul style="list-style-type: none"> • "Warm-Ups," diagnostic assessments that cover expectations from the previous grade and provide teachers with information to determine the readiness of students for particular concepts • Differentiated activities to assess students' understanding using visual prompts and virtual manipulatives • Teacher supports, including a background document to build teachers' math content knowledge for teaching, a misconception chart to support addressing specific errors, and intervention questions to consolidate new learning. <p>French: Grades 3-10 activities and materials are available</p> <p>Knowledgehook is a district-provided tool. Click here to access Knowledgehook</p>

Math Pre-Assessment (Nelson) Grades: 1-8	Math Pre-Assessment provides short, whole-class diagnostic assessments to determine the procedural knowledge and conceptual understanding of students ahead of specific grade-level learning units. Math Pre-Assessment contains: <ul style="list-style-type: none"> • Developmental trajectories that provide a picture of math development • Diagnostic assessments that help to identify where a student is on the developmental trajectory Analysis charts to score pre-assessments and next steps for instruction, remediation and intervention
Mathology (Pearson) Grades: K-6	Mathology is an instructional program that provides ongoing assessment opportunities within games, books, and other learning activities, driven by the big ideas in mathematics. Mathology contains: <ul style="list-style-type: none"> • Diagnostic activities that begin with an initial lesson or readiness tasks, based on the previous year's expectations, to support with instructional decisions • Mathology "Little Books," activity kits, and math mats to support mathematics learning in different modes French: Mathologie currently supports K-Grade 3 students
MathUP Classroom (Rubicon) Grades: K-8	MathUP Classroom is a comprehensive, online, K–8 instructional tool that helps build teachers' knowledge and understanding of mathematics. MathUP Classroom contains: <ul style="list-style-type: none"> • Diagnostic assessments using open and closed tasks for each topic • Activities, online games, lessons, and ongoing assessments for learning French: K-Grade 6 materials are currently available
What To Look For: Understanding and Developing Student Thinking in Early Numeracy (Pearson) Grades: K-3	What to Look For: Understanding and Developing Student Thinking in Early Numeracy is a professional learning resource with a developmental continuum for early numeracy and sample tasks that can be used to gauge students' numeracy skills. What to Look For contains: <ul style="list-style-type: none"> • Research-based developmental continua for addition and subtraction in early numeracy • Descriptions of strategies, along with access to videos of students displaying those strategies Games to push student thinking forward
TDSB-Approved Intervention Tools for K-12 Mathematics (Tiers 2 and 3)	
Intervention Tool	Description
Gap Closing (Ontario Ministry of Education) Grades: 4-12	The Gap Closing package is designed to help teachers of Grades 4-12 provide precisely targeted remediation for students whom they identify as being significantly behind in mathematics. The goal is to close gaps in number sense so that students can be successful in learning grade-appropriate mathematics.

	<p>Gap Closing contains:</p> <ul style="list-style-type: none"> • a diagnostic assessment that is designed to uncover the typical problems students have with that topic • a set of intervention materials that includes a single-task open question and a multiple-question Think Sheet approach that teachers can select from based on the student’s learning preferences and readiness <p>French: Grades 4-6 number sense is available.</p> <p>Click here to access Gap Closing resources</p>
<p>Knowledgehook</p> <p>Grades: 1-10</p>	<p>Knowledgehook is an instructional guidance system that leverages formative assessment in a game-based environment to provide insights into student learning and intervention materials to support the development of students’ conceptual understanding.</p> <p>Knowledgehook contains:</p> <ul style="list-style-type: none"> • “Warm-Ups,” diagnostic assessments that cover expectations from the previous grade and provide teachers with information to determine the readiness of students for particular concepts • Differentiated activities to assess students’ understanding using visual prompts and virtual manipulatives • Teacher supports, including a background document to build teachers’ math content knowledge for teaching, a misconception chart to support addressing specific errors, and intervention questions to consolidate new learning. <p>French: Grades 3-10 activities and materials are available.</p> <p>Knowledgehook is a district-provided tool. Click here to access Knowledgehook</p>
<p>Leaps and Bounds Toward Mathematics Understanding (Nelson)</p> <p>Grades: 1-8</p>	<p>Leaps and Bounds Toward Mathematics Understanding is developed to help teachers support students who require additional intervention to become more successful in mathematics.</p> <p>Leaps and Bounds contains:</p> <ul style="list-style-type: none"> • Diagnostic assessment tools for each topic with answer keys that identifies gaps based on student responses • Background information for each topic that identifies common errors and addresses why students might be struggling with a particular topic • Multiple supporting activities to help students with developing conceptual understanding <p>French: À pas de géant vers une meilleure compréhension des maths is available.</p>

Assessments by Professional Support Services (PSS)

Special Education and Inclusion staff work in collaboration with Professional Support Services (PSS) staff. A recommendation for an individual assessment by PSS staff comes through the School Support Team (SST). The SST also considers requests for assessments from parents/guardians/caregivers, qualifying students (of age and with the cognitive capacity to understand), or outside agencies.

School-based community services are offered to students, either in-person or remotely:

- School-Based Rehab Services (Speech Therapy and OT/PT) services provided by the respective Community Treatment Centre (i.e., Children's Treatment Network or Grandview Kids)
- Nursing services for medically fragile students provided through Home and Community Care Support Services (HCCSS)

School-based community services staff follow the safety procedures and protocols of TDSB and require a safe, private space in schools to provide services.

A recommendation for individual assessment requires the agreement of parents/guardians/caregivers or qualifying students. PSS staff will contact parents/guardians/caregivers or qualifying student to seek informed consent before beginning the assessment. This ensures shared understanding of the reasons for the assessment, the nature of the assessment, the risks, benefits and possible outcomes of the assessment, as well as how information from the assessment will be managed and shared. Issues of where and how the record will be stored and the limits to confidentiality are outlined in the informed consent process which can be found in [Appendix E: Release of Confidential Information](#), along with the permission form.

Throughout the PSS assessment process, parents/guardians/caregivers or qualifying students are involved and at the conclusion are offered verbal and written feedback about the assessment findings. The services of a cultural or communication facilitator will be offered where necessary. Written reports are provided to parents/guardians/caregivers or qualifying students at, or close to the time of, verbal feedback.

Child and Youth Services

Child and Youth Workers (CYWs) and Child and Youth Counsellors (CYCs) are members of PSS working in the school/program community. They collaborate with teachers, special education staff and other school community members to identify strengths and needs and offer professional supports for students and families. They participate in In-School Team (IST) and School Support Team (SST) meetings by contributing specialized knowledge. Services are provided through a referral process or through the Identification Placement and Review Committee (IPRC) decision to a classroom with CYW support. The referral process varies from position to position. However, a signed referral and the informed consent of the parents/guardians/caregivers or of a student who is 12 years of age or older is always required.

CYW and CYC provide specialized supports to students. Their work is culturally responsive, strength-based and collaborative. Services may include counselling and interventions on matters of mental health and well-being, crisis de-escalation, social and life skill development, behavioural support, and school avoidance. An assessment informed by developmental, culturally relevant, ecological, and strength-based perspectives is completed to identify areas for programming. CYWs and CYCs build therapeutic relationships and set clear goals to ensure all students find their own path to success.

Team members are supervised by a principal for operational/day-to-day matters and their managers on professional matters. All Child and Youth Services staff are expected to adhere to the [code of ethics](#) of the Ontario Association of Child and Youth Care and the TDSB Child and Youth Services Standards of Practice. The required qualification for CYWs is a Child and Youth Care Diploma, while CYCs are required to have a Degree in Child and Youth Care or Social Work.

Child and Youth Services may include:

- Discussions with students to establish relationships, identify strengths and areas of growth and encourage student voice
- A review of the student's school records [with parent/guardian/caregiver or student consent (if older than 12 years)]
- Classroom observations
- Discussion with family to obtain relevant history and information about current strengths and areas of growth at home
- Collaboration with school personnel and other professional support services colleagues

- Contact with external agencies and service providers
- Assessment of strengths and areas of growth
- Provision of social and life skill building programming
- Use of daily life events to develop skills, understanding, and goals through genuine co-created relationships
- Group and individual short-term counselling
- Behaviour management support

Management of Records

Records of identified strengths and needs, goals, interventions, programming and supports are maintained in a confidential file of Child and Youth Services as per the TDSB Child and Youth Services Standards of Practice. Rather than an assessment report, Child and Youth Services staff develop student goals, proactive strategies, and programming to meet student needs and enhance student success based on assessment outcomes.

CYCs complete a summary report at the conclusion of support. This is maintained in the confidential Child and Youth Services file and in the Ontario Student Record (OSR), with consent. CYWs on the Behaviour Prevention and Intervention Team also complete reports. These reports are maintained in the Special Education File, the confidential Child and Youth Services file and the OSR, with consent.

Occupational Therapy and Physiotherapy (OT/PT)

Occupational Therapists/Physiotherapists (OT/PT) collaborate with regular and special education teachers to provide consultative therapeutic programming support and accommodation strategies for students with physical and/or developmental disabilities, and/or for students with safety/accessibility difficulties that impede access to programming and curriculum. They also conduct assessments and provide timely tiered supports for students' adaptive skills, social and play skills, executive function skills, behavioural function, pre-vocational and community living skills, and of their gross motor, fine motor and sensory motor development skills. They can provide physical-management, sensory-motor, and programming recommendations, and assist schools with referrals to Home and Community Care Support Services (HCCSS), as needed.

Referrals for OT/PT Assessments

OT/PT assessments are accessed through the School Support Team (SST), where OT/PT staff may attend. OT/PT consultation with the attending Special Education and Inclusion Consultant may also occur after the SST meeting.

The referral process requires the informed consent of the parents/guardians/caregivers or student 18 years of age or older. This ensures shared understanding of the reasons for the assessment, the nature of the assessment, the risks, benefits and possible outcomes of the assessment, as well as how information from the assessment will be managed and shared. Issues of where and how the record will be stored and the limits to confidentiality are outlined in the informed consent process which can be found in [Appendix E: Release of Confidential Information](#), along with the permission form.

Assessments are conducted under the [Regulated Health Professions Act](#) by Occupational Therapists and Physiotherapists registered in the College of Occupational Therapists of Ontario and College of Physiotherapists of Ontario, respectively.

OT/PT assessments may include, but are not limited to:

- A review of the student's school records
- Classroom observations
- An interview with parents/guardians/caregivers to obtain developmental and relevant family and medical history
- An interview with school personnel, the student, and support service colleagues
- Contact with hospitals, rehabilitation centres, and community agencies
- Provision of specific school-based recommendations pertaining to gross/fine motor function, mobility (school/community), sensory motor/behaviour, visual motor integration and perception skills, social and play skills, executive function skills, and pre-vocational and community living skills
- Assessment and recommendations to promote safety and independence of activities of daily living skills (e.g., feeding, dressing, personal care), where applicable
- Assessment for equipment needs such as Special Equipment Amount (SEA) and/or support in accessing the Assistive Devices' Program (ADP)

Management of OT/PT Assessment Results

The results of OT/PT assessments are communicated with parents/guardians/caregivers through an interview and/or a written report. Written reports are provided to the parents/guardians/caregivers or student 18 years of age or older and who has the cognitive ability to understand, at or close to the time of verbal feedback. Reports include recommendations for physical management (e.g., mobility, seating and positioning for function), activities of daily living skills, motor skills, executive function skills, behavioural function, social and play skills, pre- vocational and community living skills, physical and mental health and wellness, and sensory integration. As outlined during the informed consent process, the results may be discussed with relevant teachers and professional support staff for educational planning and programming purposes.

Records from OT/PT assessments are kept in confidential files, which are maintained in accordance with the regulations and provisions of the Professional Colleges and the [Regulated Health Professions Act](#). Locations of copies of the report are discussed with parents/guardians/caregivers. The consent of parents/guardians/caregivers is required for referral to community services for which the student may be eligible (e.g., Children's Treatment Centres, School Based Rehabilitation Services) or for a student's OT/PT report to be released to an outside agency.

Community Resources

For any in-school nursing support, the school team is to refer to the [Home and Community Care Support Services – School Health Support Services](#) (formerly known as the LHIN).

For any in-home supports required, families may self-refer to the [Home and Community Care Support Services – Family Managed Home Care](#). Students with significant medical needs may also access [Holland Bloorview Kids' Rehabilitation Hospital](#) for clinical services within the community; a referral must be generated by a family physician or dentist to access the medical or dental services at this site.

The Home and Community Care Support Services also offers mental health and addictions' nursing support; however, the referrals are to be generated by school staff.

Psychological Services

Psychological Services staff includes Psychologists, Psychological Associates and Psychoeducational Consultants, who consult with teachers and School Support Teams (SST) about effective classroom programming to address socio-emotional, behavioural and/or learning needs. With the required permission, they conduct a comprehensive individual Psychological assessment of students' learning, social-emotional, and

behavioural development to diagnose disorders, identify students' learning strengths and areas of growth, and recommend effective intervention strategies. They also have a role on Identification Placement and Review Committees (IPRCs) in identifying exceptionalities and recommending program placement.

Referrals for Psychological Assessments

The purpose of a psychological assessment is to better understand the learning, socio-emotional and/or behavioural strengths and areas of growth of a student, in order to help in the delivery of the most appropriate programming.

Psychological assessments are accessed through the School Support Team (SST) (which includes a Psychological Services professional) using a referral process that requires the informed consent of the parents/guardians/caregivers of a student under the age of 18, or of a student who is 18 years or older and has the appropriate level of cognitive ability to understand what they are consenting to. The informed consent process ensures a shared understanding of the reasons for the assessment, the nature of the assessment, the risks, benefits and possible outcomes of the assessment, as well as how information from the assessment will be managed and shared. The informed consent process can be found in [Appendix E: Release of Confidential Information](#), along with the permission form.

The staff conducting the assessment is either a member of the College of Psychologists of Ontario or works under the direct supervision of a member of the College of Psychologists. Psychological Services staff are governed by the [Psychology Act](#), the [Regulated Health Professions Act](#), the [Health Care Consent Act](#), the [Municipal Freedom of Information and Protection of Privacy Act \(MFIPPA\)](#), and the Education Act when working in a school board.

A psychological assessment may include the following:

- A review of the student's school records
- Interviews with the parents/guardians/caregivers and student to obtain developmental, family, and medical history
- Interviews with school personnel and the student
- Classroom observation
- An assessment (standardized and informal measures) of the student's cognitive abilities, academic skills and social-emotional functioning to assess learning strengths and areas of growth

Wait time for a psychological assessment varies. Once a referral has been initiated, the average wait time is typically less than one year. The SST determines the priority in which students will be seen relative to the nature and complexity of student needs and all referral requests from the school.

Management of Psychological Assessment Results

As outlined during the informed consent process, the results and recommendations of a psychological assessment are discussed with the parents/guardians/caregivers or qualifying student and with staff of the TDSB who are directly involved with the student. A cultural or communication facilitator will be offered and arranged, if necessary. A copy of any written report is provided to the parents/guardians/caregivers or qualifying student, at or close to the time of verbal feedback. A copy is also given to the school, to be placed in the student's Ontario Student Record (OSR).

The original written report, assessment measures, notes, and other information obtained during the assessment are maintained in the confidential files of Psychological Services in accordance with the [Psychology Act](#) and the [Regulated Health Professions Act](#). An electronic copy of the report is uploaded to a confidential records management system within the TDSB.

Psychological Services will not release any information to persons or facilities outside of the TDSB without written consent, except as may be required by law.

Social Work

School Social Workers are closely affiliated with schools to provide a variety of support to students, families and school staff. School Social Workers participate on School Support Teams (SST), contributing specialized knowledge, culturally responsive and relevant practices and resources, mental health and wellness strategies as well as healthy home life and student achievement practices. School Social Workers also conduct assessments to identify social, emotional and behavioural factors that can impact a student's ability to make the most productive use of the learning environment.

Referrals for Social Work Assessments

A referral to Social Work can be initiated through the SST, which includes a social worker through referrals from principals, staff, parents/guardians/caregivers, or through self-referral by students themselves or at any time on an as-needs basis. This includes requests for culturally specific social workers. Social Work assessments require the informed consent of the parents/guardians/caregivers or of a student who is 12 years of age or older.

The informed consent process ensures a shared understanding of the reasons for the assessment, the nature of the assessment, the risks, benefits and possible outcomes of the assessment, the types of service that may be provided to the student, as well as how information from the assessment will be managed and shared. The informed consent process can be found in [Appendix E: Release of Confidential Information](#), along with the permission form.

School Social Workers possess a Master of Social Work degree, with a minimum of three years' experience working with children and youth. All Ontario Social Workers are regulated by the Ontario College of Social Workers and Social Service Workers and subscribe to a set of [professional ethics and standards of practice](#). A Social Work assessment may include:

- Interviews with the student
- An interview with the parents/guardians/caregivers to obtain relevant family and social history
- Interviews with Support Services colleagues and school personnel
- A review of school records
- With consent, contacts with community agencies
- Classroom observations

There is typically no wait time for social work since service is initiated as soon as possible upon receipt of a request for service. A referral form is completed, and informed consent is obtained from the parents/guardians/caregivers or from students 12 years of age or older.

Management of Social Work Assessment Results

As outlined during the informed consent process, recommendations and reports are discussed with the parents/guardians/caregivers and/or students (dependent on the nature of the referral, the age of the student or where professionally determined as appropriate by the social worker). With permission, relevant information is shared with school personnel and, where applicable, professional staff from community agencies.

[Standards of Practice of the Ontario College of Social Workers and Social Service Workers](#) regulating Social Work records are adhered to. Registered Social Workers ensure that records are current, accurate, contain relevant information about students, and are managed in a manner that protects the student's privacy. Social Work records are stored in confidential Social Work files in secure locations at the regional Education Offices.

Speech Language Pathology Services

Speech-Language Pathologists participate on School Support Teams (SST), contributing specialized knowledge and resources to aid deeper understanding of the connections between communication, learning, literacy, and social development. They also conduct assessments and collaborate with regular and special education teachers to design language, literacy, and social communication programming. Services are prioritized to support younger students from Kindergarten through Grade 3 who have oral language delays and disorders that may affect literacy, academic, and social development.

Referrals for Speech and Language Assessments

Speech-Language Pathology assessments evaluate students' communication skills in the areas of oral language (e.g., comprehension, expression, vocabulary, phonological awareness), speech (e.g., articulation, stuttering, voice/resonance), augmentative and alternative communication (AAC) and related difficulties in literacy development and functional social communication, distinguishing second-language issues (e.g., ELL, ELD) from language disorders.

A Speech-Language Pathology assessment is initiated through the School Support Team (SST) (which includes the speech-language pathologist) using a referral process that requires the informed consent of the parents/guardians/caregivers, or of the student 18 years of age or older.

The informed consent process ensures a shared understanding of the reasons for the assessment, the nature of the assessment, the risks, benefits and possible outcomes of the assessment, the types of service that may be provided to the student, as well as how information from the assessment will be managed and shared. The informed consent process can be found in [Appendix E: Release of Confidential Information](#), along with the permission form.

Assessments are conducted by speech-language pathologists, registered in Ontario under the [Regulated Health Professions Act](#), and may include the following:

- A review of the student's school records
- Interviews with parents/guardians/caregivers to obtain developmental, family, and medical history
- Interviews with school personnel and the student
- Classroom observation
- An assessment (standardized and informal measures) of the student's receptive and expressive language skills, articulation, fluency, voice skills and reading and writing skills to assess learning strengths and areas of growth

Average wait times for an assessment vary anywhere from a few months to a year, although the majority of students are seen within six months. Assessments are provided for students according to prioritized needs. The SST determines the priority in which students will be seen relative to the nature and complexity of student need and all referral requests received.

Management of Speech Language Assessment Results

Speech-Language Pathology reports are stored in confidential speech-language pathology files in the Education Offices, according to the [Records Regulation of the College of Audiologists and Speech-Language Pathologists of Ontario \(CASLPO\)](#). The results of speech and language assessments are communicated with parents/guardians/caregivers through an interview. A copy of any written report is provided to parents/guardians/caregivers or qualifying students 18 years of age or older and having the cognitive ability to understand, at or close to the time of verbal feedback.

As outlined during the informed consent process, the results of the speech and language assessment are discussed with relevant teachers and professional support staff for educational planning and programming purposes. A copy of the report is kept in the Ontario Student Record (OSR). The consent of parents/guardians/caregivers is required for referral to community services for which the student may be eligible, or to release a student's speech and language report to an outside agency.

Sharing of Professional Assessment Information and Privacy

The [Municipal Freedom of Information and Protection of Privacy Act \(MFIPPA\)](#) requires that Professional Support Services (PSS) staff receive explicit written or verbal consent from parents/guardians/caregivers or the student (when of age and with the cognitive capacity to understand), to share information that they collect with school staff (e.g., educational assistants, teachers, principals). This permission is discussed during the informed consent process.

The sharing of assessment findings or information with persons outside of the TDSB will only occur with the expressed written permission of the parents/guardians/ caregivers, or qualifying student, except as required by law (as per the [Personal Health Information Protection Act](#)). Further information about the privacy rights of parents/guardians/caregivers is detailed in a [PHIPA Privacy Statement](#), posted on the Board's public website under Professional Support Services.

The TDSB Policy [PR 677 Recorded Information Management](#) requires that PSS files are retained for a minimum of ten years after graduation age (which in most cases is either 18 or 21). This requirement is in accordance with professional guidelines.

Students who are referred for an assessment are often seen within the school year in which the request is made. Referrals not seen by the conclusion of the school year will be prioritized on a wait list for assessment in the following school year. A variety of factors,

such as length of time on the waitlist, nature of the referral question, age of the student and urgency for assessment results, will be used to prioritize referrals on a wait list.