Section B - Standard 15

Educational and Other Assessments

Kawartha Pine Ridge District School Board
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Standard 15
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QUALIFICATIONS OF STAFF AND ASSESSMENTS BEING CONDUCTED

The Kawartha Pine Ridge District School Board 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.

Purpose of Classroom Assessment	**Nature of Assessment**	**Use of Information**
Assessment for learning "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)	*Diagnostic assessment:* • 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.	*The information gathered:* • 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.
	Formative assessment: • Occurs frequently and in an ongoing manner during instruction, while students are still gaining knowledge and practicing skills.	*The information gathered:* • 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.
Assessment as learning "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)	*Formative assessment:* • Occurs frequently and in an ongoing manner during instruction, with support, modeling, and guidance from the teacher.	*The information gathered:* • 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.
Assessment of learning "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)	*Summative assessment:* • Occurs at or near the end of a period of learning and may be used to inform further instruction.	*The information gathered:* • 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.

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 document Learning for All – A Guide to Effective Assessment and Instruction for All Students, Kindergarten to Grade 12, 2013 (ontario.ca). Further, KPRDSB 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;
- 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. The Kawartha Pine Ridge District School Board 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 KPRDSB'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
- 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 Multi-focus and Multi-disciplinary team 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:
Psychological Services		
School Psychologists and Psychological Associates	● Ph. D. or Master's degree in Psychology ● registered with College of Psychologists of Ontario in the area of school and/or clinical psychology	● mental health ● cognitive functioning ● academic skills ● processing deficits ● social - emotional functioning ● behaviour ● adaptive functioning ● language processing ● autism
Speech-Language Services		
Speech and Language Pathologists	● Master's degree in Speech & Language Pathology ● licensed by the College of Speech/Language Pathologists and Audiologists of Ontario	● language comprehension (listening, vocabulary, grammar, following directions) ● language expression (speaking, voice, fluency, articulation) ● written language (reading, writing, phonological awareness) ● pragmatic language (social interaction and language applications) ● augmentative communication

Attendance & Counseling Services		
Mental Health Clinicians	● 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	With the appropriate consents: ● Psychotherapeutic assessment and intervention to determine counseling goals ● review of records, including attendance patterns, and behaviour logs ● consultation with school staff ● clinical assessment/ intervention with student and/or caregivers ● consultation with other professionals within and outside the Board ● observation of the student in class and elsewhere ● review of the student's work ● informal tools (e.g., drawings, notes) ● measures to assess (e.g., psycho/social functioning, mental health, family functioning, social history, crisis) ● crisis assessment ● violent threat-risk assessment
Applied Behaviour Analysis		
Board Certified Behaviour Analyst	● Master's Degree in Psychology/Behavioural Sciences	● Functional Behaviour Assessment ● Behaviour Analytic Assessment
Educational / Academic Testing		
Classroom & Special Education Teachers/Early Literacy Teachers	● Bachelor of Education Degree or Equivalent ● Registered with the Ontario College of Teachers ● Special Education Additional Qualifications - minimum Part I	● An assortment of Educational Assessment Tools including among others: ○ Running Records ○ First Steps Continuum ○ Comparisons to the Ontario Curriculum & Exemplars ○ Wechsler Fundamentals ○ Leaps and Bounds Math assessment ○ Prime Math Assessment ○ KPR Multiple Choice Math Assessments ○ KPR Math Assessment Process Tasks ○ ONAP ○ PM Benchmarks ○ Reaching Higher - Literacy Continuum ○ Phonological Awareness Profile ○ Rosner ○ K-Primary Assessment (KPR) ○ DRA, GB+ FSL Assessment ○ CASI

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
- 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), *The Regulated Health Professions Act* (1991), 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* (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* (1991) 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 the 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 Ontario Student Record), 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 the Kawartha Pine Ridge District School Board 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
- 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 Ontario Student Record), 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

At any time, school staff can consult with Attendance and Counseling Services through Mental Health Clinicians. Referrals are typically made through the school's principal or designate. Counseling Services are prioritized by need. Critical incidents are immediate, crisis support is the same day, urgent is within a week, and other

requests as scheduled.

Informed Consent
In most cases, informed, written consent is obtained from parent(s)/guardian(s) prior to meeting individually with a student. The informed consent is obtained when the parent(s)/guardian(s) or students 18+ signs the Attendance and Counseling Services Referral and Consent for Access to Student Records form (Appendix F). This informed consent procedure is consistent with the *Education Act*. During critical incidents, some crisis support situations (where there is imminent risk), and for attendance referrals, 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
- 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 KPRDSB 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 (7) 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