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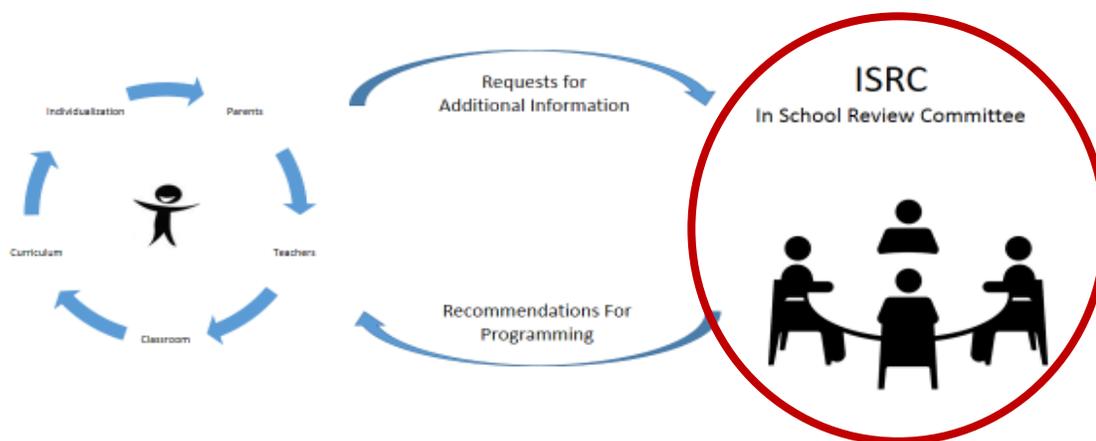
Professional Student Services Personnel (PSSP)

The purpose of this document is to explain the nature of service provided by Professional Student Services Personnel (PSSP), comprised of members of the Psychology, Social Work and Speech-Language Pathology Departments.

At the Peel District School Board, we are committed to respecting and protecting your privacy. Our privacy statement outlines our policies and procedures with respect to collecting, using and disclosing your personal health information. It also provides information about how you can access records of your personal health information and how you can request correction of recorded information.

In the classroom, the teacher is collecting assessment information to program for the student. When this assessment information demonstrates that the classroom teacher may require additional information, the student may be discussed at an In-School Review Committee (ISRC) meeting. The purpose of the meeting is to provide a multi-disciplinary team approach to supporting the classroom instruction. The PSSP staff attend In-school Review Committee meetings hosted at the school level. The information gathered through these services inform the development of the student program. It guides the differentiated instruction that occurs with the student and supports the individualization of the student's program so that the student's needs can be met.

In-School Review Committee (ISRC)



The Role of Psychological Services

Psychology staff – called *Psycho-educational Consultants*, work with students, advise teachers, administrators and parents. These professionals hold a master's degree or doctorate in psychology. Most are members of the College of Psychologists of Ontario. They have special training to identify a wide range of difficulties or needs that affect a student's learning. They offer assistance to the student, the parents, and the school when some aspect of school performance challenges a student. The majority of psychology staff support schools associated with field offices (i.e., Mississauga Field Office, North Field Office) and a few work out of the Central Board Office (CBO). The Psychology Services team reports to the respective Superintendents of Education and the Chief Psychologist.

Psycho-educational Consultants provide a variety of psychological services to schools. Currently, the most frequently requested types of services from the Psychology Department are:

Psycho-educational Assessment

Individual psycho-educational assessment of referred students involves the use of a variety of standardized and/or informal instruments and techniques designed to provide insight into the student's learning strengths and needs, social and emotional development, behavioural presentation and/or mental health status.

The goals of the assessment are to provide staff and parents/guardians and the student with programming, counselling or other recommendations that will assist the student in reaching his/her potential.

How Service is Delivered – Psycho-educational Assessment

- formal SIS referral and informed/signed parent consent required. Please note: Psychology staff must obtain informed parental consent in addition to the signed parental consent
- direct contact with student, parents, school personnel is involved
- an assessment of student strengths and needs in response to the questions raised and needs expressed by the ISRC and the parents is completed
- assessment may be a full (comprehensive) assessment, or a shorter, focused report which usually addresses a single, specific question or concern
- at the conclusion of a psychoeducational assessment, an interview (i.e., feedback session) will be held with the parent(s)/guardian(s) during which the assessment processes and outcomes will be shared by the Psychology staff member and any parental questions answered; the parent(s)/guardian(s) will receive a copy of the Psycho-educational Assessment report. Normally, these meetings will be scheduled for 30-60 minutes, though interviews regarding more complex assessments may require more time. (In rare instances, schools may find that even after repeated attempts to arrange an interview, the parent(s)/guardian(s) fail to attend. In such cases, and in good faith, the

Psychology staff member will mail the Psycho-educational Assessment report to the parent(s)/guardian(s), and encourage them in an attached letter, to request and participate in an interview.)

- Best practice would suggest that it is beneficial to have the school administrator at the parent feedback meeting
- in cases where a diagnosis has been made as the result of an assessment, it is the legal responsibility of the psychology staff member (or their clinical supervisor, as the case may be) to formally communicate that diagnosis to the parent/guardian, or adult student.

Consultation

Psychological consultation can involve discussions with parents/guardians, students, and school staff regarding the social, emotional, behavioural, intellectual, and physical development of students, as well as, students' learning strengths, needs, and interests. It can also involve the review and interpretation of additional information and professional reports relating to the student, school observations, and development and modeling of strategies or interventions. Psychological consultation can be informal (with only verbal feedback) or formal (resulting in a written report).

The benefits of psychological consultation for students and staff include support in the development of individualized classroom programming and remedial strategies, social, and emotional interventions within the school, IEPs, Safety Plans, SEA/SIP claims, transition plans. Psychological consultation can also lead to recommendations for: more specific consultation/assessment by other Board staff; more intensive interventions by other Board teams (i.e., Intensive Support team, Autism Spectrum Disorders team); and therapeutic interventions with community agencies, hospitals, and other professionals.

Psycho-educational Consultants can assist by working with teaching staff, parents/guardians, and the student to develop behavioural interventions to effect change. These interventions may include case management, Positive Behaviour Intervention Plans, and/or Safety Plans.

Behavioural consultation may involve demonstrating, modeling and coaching the strategies that are indicated to be most helpful to the student, as well as, periodic review and evaluation of the behavioural interventions that have been developed and implemented.

How Service is Delivered – Consultation

- Consultation occurs at In-School-Review-Committee meetings, IPRCs, case conferences, and in both formal and informal meetings with principals, vice-principals, teachers, other school and Board personnel, and (with appropriate consent) outside agencies and other school boards. At the discretion of the principal, the psycho-educational consultant may also be utilized as a resource for parents.
- Some psycho-educational consultants are in positions where they provide expertise regarding specific types of students or learning concerns through a consultation and or assessment process. The Board has psycho-educational consultants who resource

(including consultation) the Autism Spectrum Disorders team, Special Needs program, and Intensive Support team (behaviour).

- Schools can refer for Psycho-educational Consultation via SIS as an Internal Service request. Written parent consent for Psycho-educational Consultation is attained from the Student Information System (SIS) and a Parental Consent for Psycho-educational Consultation form is generated.
- If the student in need of Psycho-educational Consultation has been identified, through an IPRC, as an Exceptional student and the parents have signed the Parental Consent Form for Special Education services, then no additional consent is required as written consent has been attained through the completion of that permission form. Should this be the case, a referral for Psycho-educational Consultation should still be made via SIS but the date of parent consent should coincide with the date indicated on the Parental Consent Form for Special Education.
- Referrals for Consultation Services take five broad forms:
 - 1) Review of an external psychological report/file.
 - 2) Program Planning
 - 3) Site specific PPI.
 - 4) Case management/case conference.
 - 5) Counselling
- The Consent for Psycho-educational Consultation form should indicate which type of consultation service is being requested prior to the parent receiving the form.

Counselling

Psycho-educational Consultant may run a variety of group counselling programs (e.g., to address such issues as grief, parental separation/divorce, anxiety management, anger management, social skills, etc.).

Individual counselling of students occurs on a very limited basis.

Risk Assessments

A risk assessment is a specialized assessment that requires senior management approval. Risk Assessment is defined as an emergency procedure, aimed at determining the likelihood of whether a student will engage in behaviour considered dangerous either to self or others. When appropriate a risk assessment process will provide management suggestions to reduce this risk. Typically, students referred for a risk assessment have exhibited behaviour that is frequent, significant, or of such intensity that supports in place at the current school, or in a former location, have been

insufficient and concerns persist. Generally, the assessment will be concerned with the potential for violence, sexual offence, or suicide.

How Service is Delivered – Risk Assessments

Referral Protocol

- When school personnel, including PSSP staff, are concerned about the safety of a student or the safety of others who may come into contact with the student, the Principal will consult with his/her Superintendent of Education.
- Together the Principal and Superintendent of Education should review the following:
 1. Information that will provide a profile of the student. This may include a review of a previous psychological assessment and any information relating to behavioural, social/emotional or personality functioning;
 2. The need for new or additional assessment information. If warranted, this would be pursued through the Psycho-educational Consultant and be viewed as a priority need;
 3. Previous involvement of the Mobile Behavioural Support Team or the need for immediate referral for intervention;
 4. Programs and strategies that have been pursued through the Contact Program, if at the secondary school level; or other community agencies;
 5. The involvement, if any, of the school social worker and police liaison officer.
- Data gathered relative to the above will be summarized by the school special education staff/support staff and forwarded to the principal who will in turn share this information with the Superintendent of Education.
- If it is determined that a risk assessment will be requested then:
 1. The Superintendents of Special Education Support Services and Staff Development and School Support Services are consulted by the Superintendent of Education, who provides via e-mail a copy of the summary report collated by the school as per above;
 2. The Superintendent of Special Education Support Services consults with the Chief Psychologist and Support staff as needed and appropriate;
 3. Upon approval of the risk assessment the school staff will be directed to obtain written consent for the risk assessment. Consent will be voluntary and informed;
 4. The Chief Psychologist will designate a Psycho-educational Consultant to carry out the assessment. The consultant may or may not be regularly assigned to the student's home school.

Assessment Protocol

Once informed consent is obtained, the Psycho-educational Consultant will work with the student and his/her family to explain the purpose of the assessment and the limits of

confidentiality. Risk assessments involve two discrete steps, gathering data and evaluating risk.

Duty To Warn

In Ontario psychologists have a duty to warn if they have a reason to suspect that a person may engage in life-threatening behaviour. The individual and/or a family must be informed of the concern and steps to intervene should be taken.

Follow Up

Results of the assessment will be shared with the student, his/her family, school staff and the Chief Psychologist. The results and an appropriate placement/program will be discussed at a case conference to be held at the home school site. The placement/program identified should be implemented as soon as possible, with any supports as recommended through the assessment. The development and inclusion of a Behaviour Management Plan should be an integral part of any program directions. The Psycho-educational Consultant will conduct a follow up within 30 days after the feedback has been given. This will involve a check of the status of the student and a review of the recommendations and their implementation.

Professional Development

Psycho-educational Consultants develop and offer training opportunities for teaching staff and/or parents on a wide variety of topics related to child development, school performance, behaviour, mental health, and students with exceptional learning needs.

The Role of School Social Work Services

School social work staff work with students, advise teachers, administrators and parents, and consult with community agencies. Their role is to assist schools in identifying and helping to remove those obstacles within children or within their environment which interfere with their ability to benefit from educational experiences. These professionals hold a bachelor's or master's degree in social work and all are members of the Ontario Association of Social Workers and Social Service Workers.

School social workers provide a variety of services to schools. These include:

Attendance

School social workers are responsible for assessing and intervening in cases of significant non-attendance.

Assessment

School social workers meet with administrators and other school staff and conduct psych-social assessments with students and families to understand and plan for students who are struggling academically and/or socially.

Counselling

School social workers provide short term counselling to students to discuss issues that are impacting their success at school. Issues may include personal and peer related issues, mental health concerns such as anxiety or depression, family issues and academic concerns.

Consultation

School social workers regularly meet with school staff and parents to discuss concerns and offer guidance regarding resources, parenting advice and programming options.

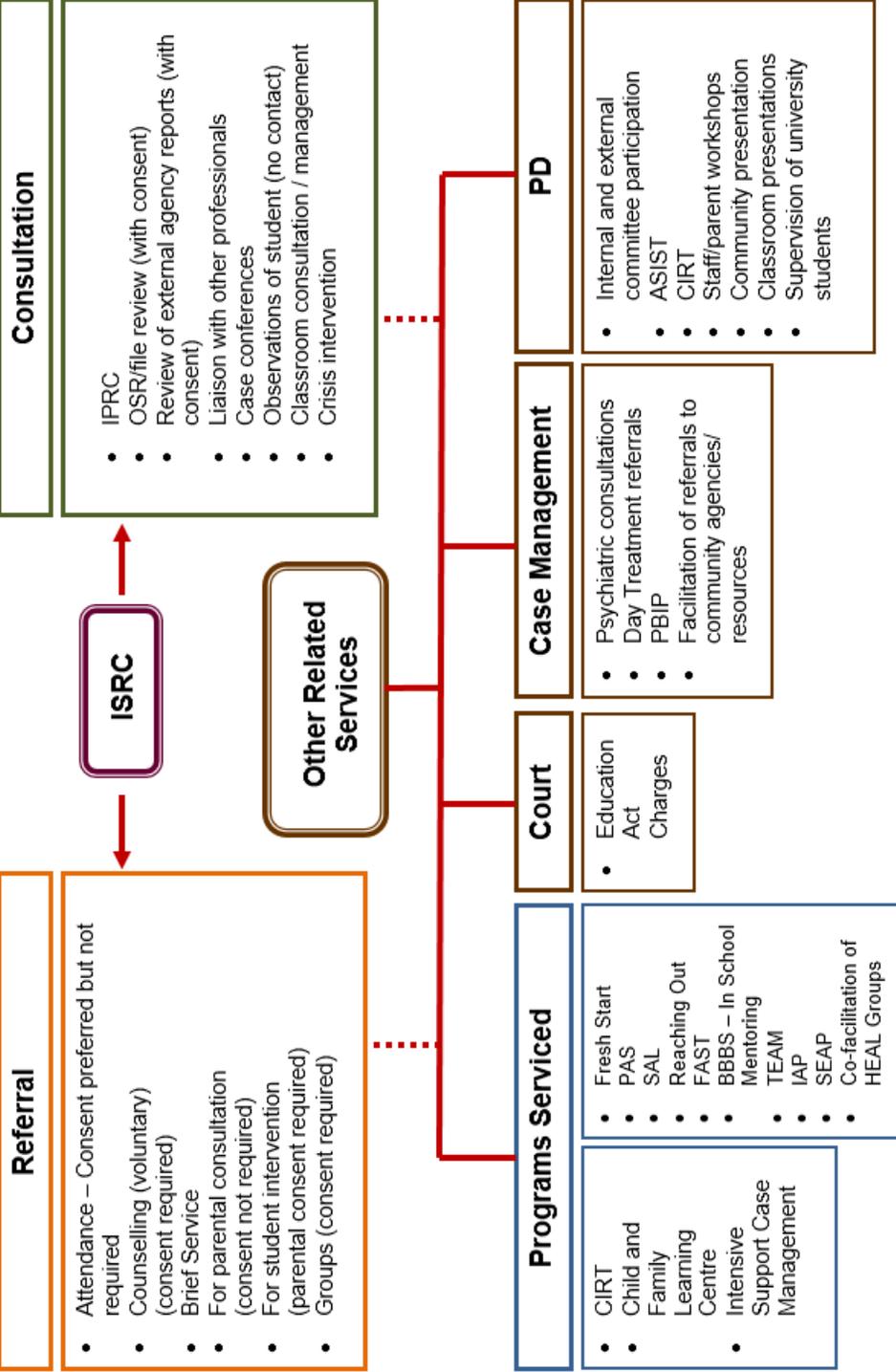
Agency Liaison

School social workers are knowledgeable about resources and agencies in their particular service area and share information regarding the intake processes for these services with families and staff.

Access to Service

School social work services are accessed through the school principal and an in school committee that discuss student need.

SOCIAL WORK SERVICES



The Role of School Speech and Language Services

All students, from school entry to school exit, are eligible for speech-language pathology services in the Peel District School Board.

Communication is essential for learning and for living well, whether that be through listening, speaking, reading, writing or using augmentative or alternative means. Speech-language pathologists provide a wide variety of communication-enhancing interventions and supports through their work with individual students, groups of students, and educator teams, both inside and outside the classroom. Schools provide an ideal environment for SLPs to provide authentic goals that maximize literacy, academic, vocational and social-emotional success for students. Through collaboration with students, families, and educators, the school SLP can build communication success for all students in a tiered approach to prevention and intervention that is good for all and necessary for some.

General Resourcing - Tier One Supports

- Formal or informal in-servicing, workshops and professional development to school-based staff, resource staff, parents and community
- Participation in Board, Department and school-based initiatives to support system priorities (e.g., literacy intervention programs, language strategies to support academic and social development)
- Participation in Kindergarten registration at school request
- Provision of Tier One supports within a classroom as part of a preventative approach (e.g., modeling of general strategies, collaborative teaching)

Consultation and Intervention - Tier Two and Three Supports

Students with speech and language concerns (i.e., oral language, written language, speech [articulation, motor speech, stuttering, voice], hearing, augmentative/alternative communication) must be referred through the I.S.R.C. An informed parental consent is required for assessment, consultation or intervention requests.

- Modelling of targeted programming techniques within the classroom (e.g., communication strategies to support vocabulary development, following directions, or behavioural concerns; phonological awareness games, etc.)
- Provision and adaptation of materials to support learning and curriculum expectations
- Training of school staff (e.g., teachers, teaching assistants) and parent volunteers in facilitating speech and language development
- Collaborative teaching with respect to specific communication strategies and goals
- Provision of short-term direct intervention with groups or individuals

- Provision of home programs, when appropriate
- Interpretation of assessment findings and recommendations
- Regular participation in I.S.R.C.s, which involves the following:
 - screening appropriateness of referrals
 - contributing to team discussion and providing strategies and suggestions
 - setting caseload priorities based on ISRC discussions
- Participation in I.P.R.C.s as deemed relevant by the school resource team
- Liaison with and referrals to relevant outside agencies (e.g., ADRS, LHIN)
- Sharing of professional opinion related to special class placements (e.g., KTLC, PCOM)

Assessment

An assessment and follow-up may consist of one or a combination of the following:

- Communication evaluation with respect to participation in curriculum
- Classroom observation
- Obtaining developmental and academic histories from parents, teachers, and outside agencies
- Administration of standardized and non-standardized tests
- Diagnostic teaching
- Referral(s) to another service agency
- Communication of results and program recommendations to ISRC, school personnel, and parents in written and/or oral format

Speech-language pathologists support students to communicate—talking, listening, reading, writing—for learning and for life.

School Board Speech and Language Services in Conjunction with Community-Based SLP Services

The 'Interministerial Guidelines for the Provision of Speech and Language Services' (September 1988) and 'The Education Act' (1988) outline the responsibilities for school board SLP and community-based SLP services. Community agencies currently providing SLP services within these guidelines in schools are: 1) the Local Health Integration Networks (LHIN) (formerly CCAC) funded by the Ministry of Health; and 2) services provided by ErinoakKids funded by the Ministry of Children and Youth.

School boards are responsible for providing services to students with language and language-based literacy concerns, special communication needs, mild speech problems, and mild hearing/auditory processing difficulties. Students requiring supports from community agencies for Augmentative and Alternative Communication needs may be referred to:

- ErinoakKids Assistive Devices Resource Services (ADRS)

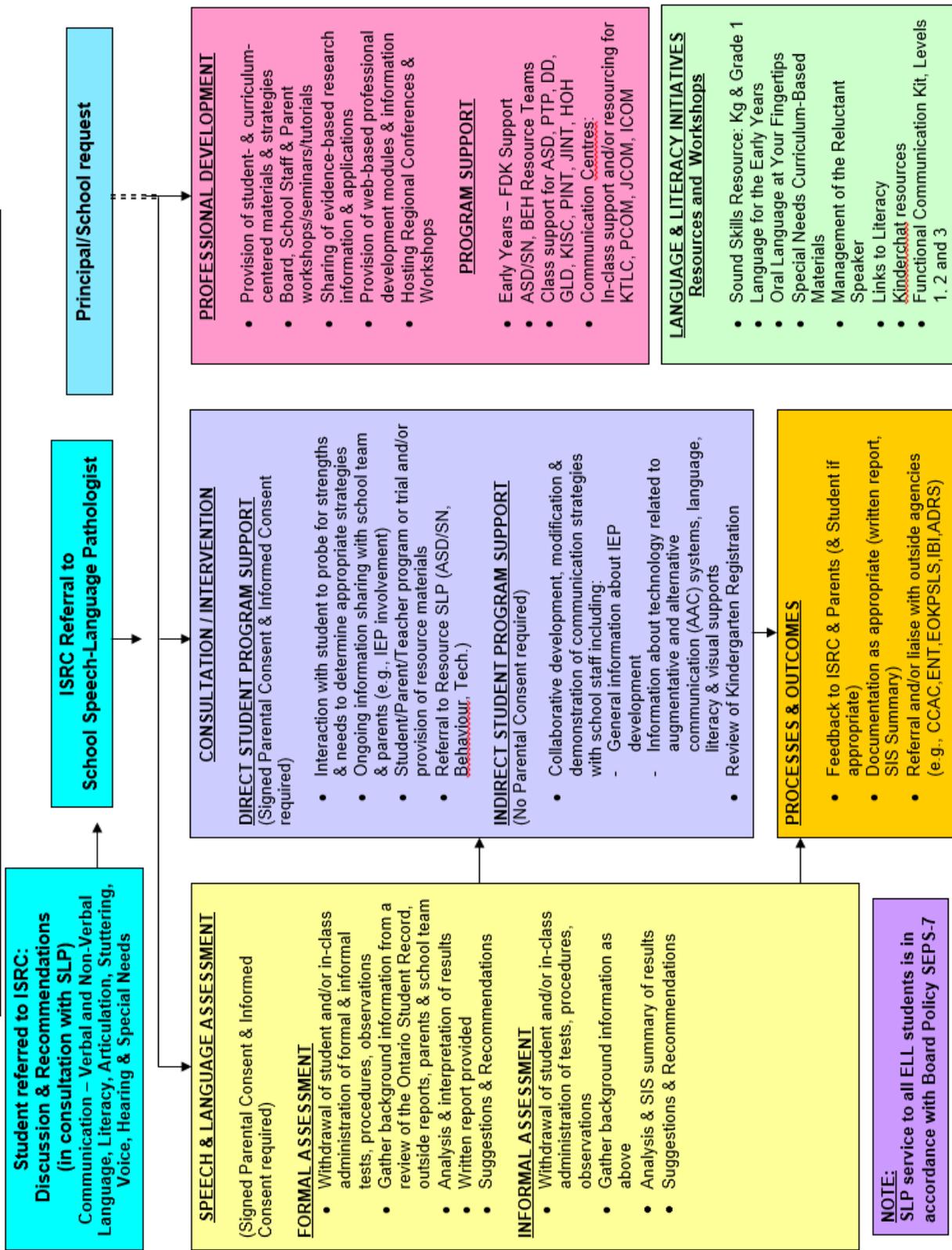
In addition, school boards are responsible for providing assessment services to students with stuttering, voice, swallowing, oral motor, and moderate to profound articulation problems, and making eligible referrals to:

- LHIN School Support Services (formerly CCAC)

Some students in Year One of Kindergarten, may be transitioning from preschool services to school services, and continue to receive support off-site through:

- ErinoakKids Preschool Speech and Language Services (EOKPSLS)
 - Students must be referred to EOKPSLS by August 31 of the year they start Year One of Kindergarten.
 - All children are discharged from EOKPSLS before they enter Year Two of Kindergarten except those receiving ADRS.
 - If the student is already receiving services through EOKPSLS, the school SLP may also receive a referral for program/class support as well as transition support in anticipation of demission from EOKPSLS.

PDSB: SPEECH-LANGUAGE PATHOLOGY SERVICES (Yr.1K-Grade 12)



Behaviour Support Services

In any classroom and at any point in time, students may exhibit a variety of challenges related to behaviour. The PDSB is committed to the belief that a proactive approach that creates a safe and nurturing, respectful, equitable and inclusive learning environment is an essential foundation for promoting positive behaviour and well being for all students. When students exhibit escalating behaviour and mental health challenges, early intervention and collaborative problem solving within an interdisciplinary team of support professionals are important to effectively address needs. The involvement of parents and community mental health partners is also important in this problem solving process.

The continuum of behaviour support services that is available within the Peel District School Board to support this process is outlined in the attached chart: Continuum of Behaviour Support Services.

A Continuum of Behaviour Support Services in the Peel District School Board

Universal Supports

Universal supports promote a positive school-wide and classroom climate that reinforces healthy relationships, character attributes, student well being and positive behaviours. Universal supports also address early indicators of behaviour and mental health need through In-School behaviour planning and program implementation. These supports are available in all schools and include consultation and intervention through Special Education teachers, Professional Student Services Personnel (PSSP), Behaviour Teaching Assistants (BTAs), and in middle and secondary schools, Contact programs and Guidance Teachers.

Targeted Supports

Targeted Supports provide additional reinforcement for small groups or individual students who exhibit "at-risk" behaviours and behaviour and mental health challenges that persist or escalate in spite of ongoing universal behaviour planning. Targeted supports are typically planned and processed through the In-School Review Committee (ISRC). In addition to specialized supports provided by the school's Psychology, Social Work, Speech Language and Resource Teacher services, a number of resources are available for planning for high behavioural needs:

De-escalation and Personal Safety Training: Elementary and Secondary

The training reviews de-escalation and safety strategies that can be implemented by any staff in an escalating situation. By participating in this training, staff gains the confidence necessary to handle situations with minimal anxiety and maximum security.

Contact Programs: Intermediate and Secondary

A behaviour support program is available in all secondary schools and larger middle schools with more than 300 students in grades 7 and 8. A goal for Contact Programs is to facilitate a continuum of school-wide prevention and intervention services that are timely and ongoing. A full range of

prevention, early and ongoing interventions that correspond to the needs of students is available. These include interventions that are universal and of benefit to all students, those that are targeted and address the needs of students who are at risk for developing serious behaviour and mental health problems, and intensive or individualized interventions that address the needs of 'high risk' students. Program focus includes the development and maintenance of effective social skills, work habits, and coping skills.

A range of behaviour patterns can be addressed through the Contact Program including:

- disruptive behaviour,
- problems in interpersonal relationships and conflict management,
- a negative self concept or intrapersonal conflict,
- bullying / harassment,
- self regulation,
- excessive sadness, fears, worries or anxieties,
- self-regulation needs,
- academic underachievement.

Community-based Early Intervention Programs

The PDSB works with a number of community-based early intervention programs including: The Arson Prevention Program for Children (TAPP-C), Families and Schools Together (FAST), and Recognizing Individual Success and Excellence (RISE). Peel Children's Services and Associated Youth Services of Peel have also partnered with PDSB to provide timely access to mental health supports.

Intensive Supports

Intensive Supports refer to individualized programs that are available to address the needs of students who exhibit complex social-emotional, mental health or behaviour difficulties or significant behaviour problems that escalate over time and across different settings.

Intensive Support: Elementary and Secondary

These multi-disciplinary teams include Special Education Teachers and Behaviour Teaching Assistants who have expertise in planning to promote positive student behaviour. Building the capacity of school staff to understand underlying behaviour and mental health needs, to reinforce positive behaviour and to respond effectively to reduce behaviour difficulties is a major goal of the Intensive Support teams. Teams serve the North and Mississauga Field Office areas at both the elementary and secondary levels and operate within schools on an itinerant basis. Students do not need to be identified Exceptional, Behaviour to receive Intensive Support. Referrals are facilitated by the school's PSSP staff.

Students referred for Intensive Support exhibit persistent behaviour or mental health concerns and have not responded to available In-school supports and program planning. Behaviours demonstrated by referred students may include but are not limited to:

- oppositional and defiant behaviour,
- significant problems with self control including anger management,
- excessive sadness, fears, worries or anxieties,

- physical aggression,
- bullying / harassment,
- destructive behaviour,
- self injurious behaviour,
- interpersonal relationship problems.

What can Intensive Support intervention do?

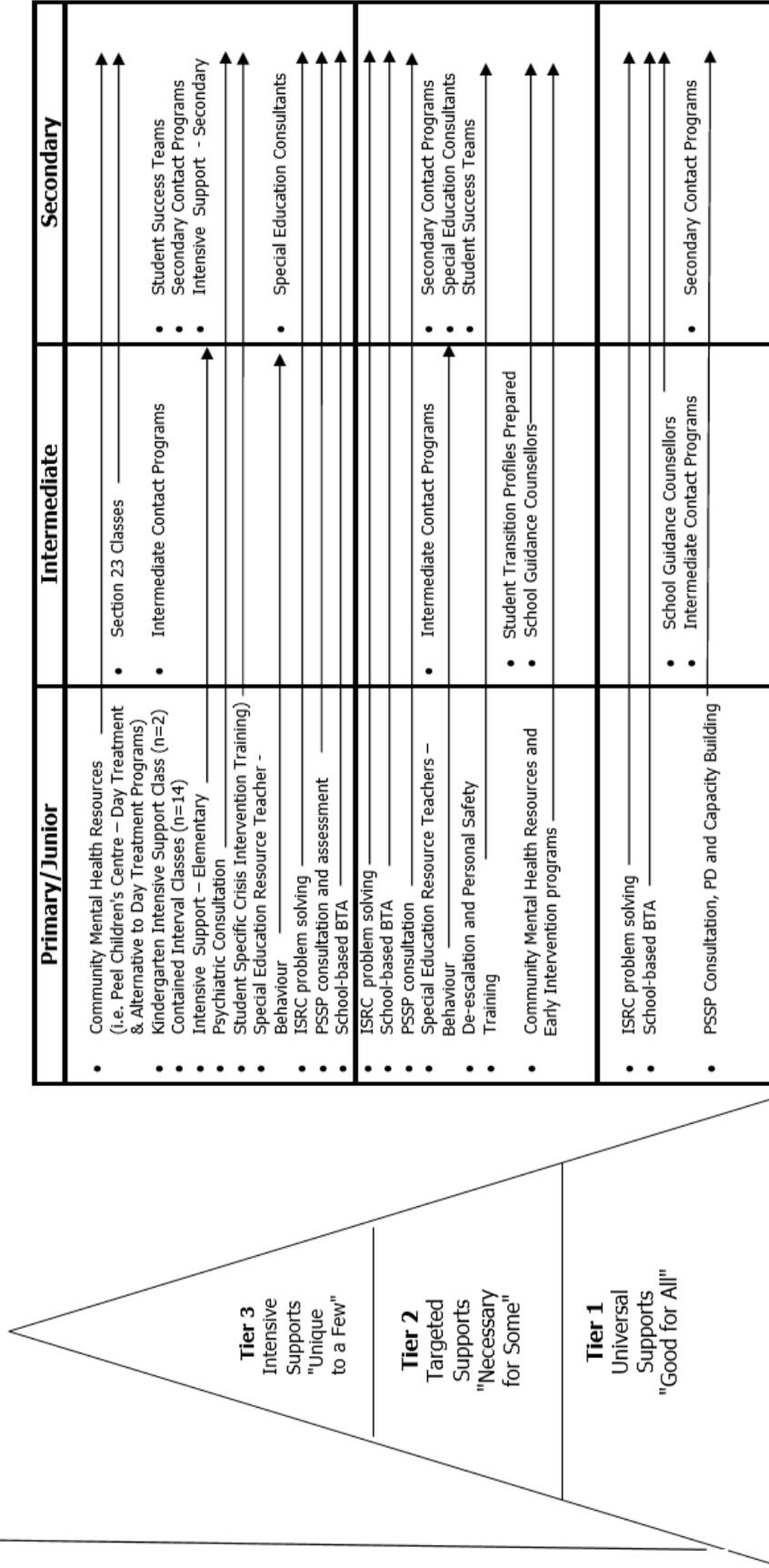
The Intensive Support teams work collaboratively with In-School staff on a 'time-limited' basis to identify and address specific goals. Active involvement on the part of the school-based PSSP is critical to guide clinical directions of the Intensive Support teams and to provide case management. Intensive Support goals may include but are not limited to:

- assisting in problem solving regarding behaviour and mental health and planning to promote student success,
- collaborating with PSSP to provide brief parent support and to facilitate referrals to community mental health resources,
- providing direct support and guidance to build capacity of school-based teachers and BTAs with a focus on understanding student behaviour and mental health, evidence-based strategies to promote positive behaviour and student success, and effective strategies for classroom and individual behaviour management and academic programming,
- supporting In-school staff to promote positive student transitions (i.e. re-entry or starting a new program),
- assisting in planning programs to support significantly escalated and specific student needs.

Psychiatric Consultation: Elementary and Secondary

A psychiatric consultation service is available to support problem solving around the needs of students who exhibit significant and/or complex behavioural/emotional and/or Mental Health needs that have a severe impact on a student's behaviour and academic performance. An agreement has recently been made with the Hospital for Sick Children to provide this service through video conferencing. Referrals are facilitated by the school's Psychoeducational Consultant and/or Social Worker.

**Continuum of Behaviour Support Services in Peel District School Board
2016 - 2017**



Please note: PSSP consultation includes all Professional Student Services Personnel: Psychology, Social Work and Speech-Language Services

Section 23 Programs

Introduction

Section 23 educational programs are funded by the Ministry of Education for students who may be unable to attend regular and special education classes within a community school.

The Section 23 programs are offered at both the elementary and secondary grade levels. The programs follow the Ministry of Education curriculum guidelines. The program is delivered in a flexible and often individualized manner to accommodate Section 23 students. The educational program focuses on literacy, numeracy, life skills and learning strategies. Students in the secondary programs earn secondary school credits and work towards a certificate of education or a diploma.

The academic and social needs of most young people are effectively met through regular attendance in school and within the family unit. Section 23 programs respond to the educational needs of young people and/or family life is interrupted for a variety of reasons. These reasons may include:

- attending a care or treatment facility (hospital, mental health centre) for medical, social or psychological reasons
- having been remanded by the courts to a correctional setting such as detention centre or open custody group home
- living in a group home and receiving treatment for emotional and/or behavioural needs

Teaching Staff

Teachers are qualified elementary and/or secondary school teachers and they may have additional qualifications in special education. In addition, many of the programs have teaching assistants. The agency provides the Child and Youth Worker in the classroom. The education and agency staff combine their skills and life experiences to effectively meet the educational challenges of these students. Section 23 teachers and teaching assistance provide input as members of the assessment and treatment teams.

The Educational Program Work

Section 23 blends the education program with the treatment program. The teacher and teaching assistant work collaboratively with the professionals from the relevant agency partner: psychiatrists, psychologists, child and youth workers, social workers and others. The shared goal is to help students develop the knowledge, skills and attitudes needed to successfully re-enter school (regular class or special education placement) or proceed to post-secondary education job

training or employment. Students follow Ministry curriculum guidelines, individualized to meet their particular learning needs.

Students are linked to a “host school” for the purpose of granting credits.

Classes are held in a variety of locations:

- at the host school
- in agency facilities
- in a community facility

Section 23 students may be integrated into the regular school program when they are considered to be ready for this transition.

Length of Stay In A Section 23 Education Program

The length of time spent in a Section 23 program usually reflects a student’s particular situation. Generally, treatment in most care/treatment agencies ranges from one to two years, while hospital programs may run several weeks or several months. Correctional programs vary according to sentencing by the courts. Admissions is continuous to the Section 23 education program throughout the academic year.

Admission Process For Section 23 Programs

Admission to a Section 23 classroom is restricted to students who are in a care, treatment, custody or correctional facility. Acceptance is decided by an Admissions Committee. Integration into the host school may occur depending upon the setting and student’s needs and readiness.

Community Agencies in Partnership With The Peel District School Board

Section 23 programs are provided through formal agreements between schools and local and provincial community agencies. These annual agreements are approved by the Ministry of Education who provide funding for the teachers, teaching assistants and the consumable budgets for the programs.

Agency Partners/Program Locations

Agency Partners	Program Locations
Associated Youth Services of Peel	Bramalea S.S. Brampton Centennial S.S.
Cornerstone Group Homes	North Park S.S.
Cuthbert House (Salvation Army)	Turner Fenton S.S.
Elizabeth Fry Society	Bramalea S.S.
ErinoakKids	Hickory Wood P.S. Edenrose P.S.
Hanrahan Youth Services	Fletcher's Meadow S.S.
Johnson Children's Services	Rick Hansen S.S.
Marjorie Amos House	Onsite
Peel Children's Centre	Glenhaven Sr. P.S. Kindree P.S. Glenforest S.S.
Roy McMurtry Youth Centre	Onsite
Spectrum Foster Care	Central Peel S.S. West Credit S.S.
Surrey Place Centre (TRE-ADD)	Fallingdale P.S. Mississauga S.S.
Vanier Residence (Kinark Child & Family Services)	Onsite
William Osler Health Centre	Child & Adolescent Psychiatric Unit

Referral Process: Section 23

Typical Student Referrals

- ◆ students referred to a Section 23 program typically have had the following interventions and are continuing to struggle: Special Education support, Mobile Behavior, psych-educational assessment, social work interventions, community agency involvement, medical assessments, an assessment by the consulting psychiatrist with the Peel Board....

Legal Guardian

- ◆ determine the legal guardian. If the student is in a foster home or group home in the Region of Peel, it must be determined who the legal guardian is. Do not assume it is Peel CAS.
- ◆ if the student is not with his/her legal parents or Peel CAS a per diem fee would be required if the student is accepted by the admissions committee at the Section 23 site.
- ◆ contact the CAS worker for students for non Peel CAS referrals to determine the receptiveness of the required fee. Please ensure the CAS worker is aware that this is not an offer of placement and the admissions committee will determine the appropriateness of the referral.

Written Consent

- ◆ to present the student to for a Section 23 program, a signed release must be obtained from the legal guardian.
- ◆ the Release of Information form is available from the Section 23 Coordinating Vice Principal.
- ◆ the signed release must state the agency partner who you will be sharing information with at the Admissions meeting i.e. Associated Youth Services of Peel, Spectrum Foster Care Services....The agency name can be obtained from the Section 23 brochure on the Special Education website.

Section 23 Admissions/Demission Committee

- ◆ the admissions/demission committee typically is composed of the following Peel staff: the host school Principal, Section 23 Coordinating Vice Principal, Section 23 teacher and teaching assistant. In addition, agency staff are also members of this committee and include: the Executive Director and the Child and Youth Worker who provides the treatment component in the Section 23 program.
- ◆ the **Admission/Demission Committee** confirms the placement of students to the program as well as makes the decision when the student is ready to **return to his or her home school**.

General Description of the Section 23 program

- ◆ fully contained program for 8-10 students. The students are typically not integrated into the host school classes for the first few months or first semester (secondary)
- ◆ the students are fully supervised by Section 23 Peel staff and agency staff including lunch, breaks/recess
- ◆ Peel staff include the Section 23 teacher and possibly a TA providing the educational component to the program
- ◆ a Child and Youth Counselor, the agency staff member in the program, provides the treatment component in the classroom
- ◆ the typical length of stay in the program is **one to two years** depending on the student's progress
- ◆ bussing is typically provided
- ◆ the Admissions/Demission Committee monitors the student's progress and determine integration opportunities and the discharge date
- ◆ the legal guardian/parent is provided with an educational plan; developed by the teacher and teaching assistant and the appropriate academic report cards
- ◆ the agency may recommend programs and services for the student and his/her family
- ◆ the Section 23 program and services provided by the agency are voluntary
- ◆ continuous student intake occurs throughout the school year

Presentation for Admission to Section 23

- ◆ the staff member who is most familiar with the student should present to the committee. This staff member maybe: an administrator along with a guidance counselor, a social worker, a psychologist...
- ◆ the case manager for the student will be determined by the referring school which typically is the Peel Board staff member who presented the student. The case manager or designate completes the Section 23 referral form which can be obtained from the Peel District School Board intranet in under Special Education Support Services
- ◆ the case manager will continue to receive updates regarding the student's progress and support
- ◆ the OSR should be brought to the Admissions meeting
- ◆ the Section 23 Coordinating Vice Principal will provide the admissions committee with the following SIS documents: student profile, notes/discipline and suspensions, transcript and status sheet (secondary students only)
- ◆ **NOTE:** when the student is ready to return to the regular school program as determined by the Section 23 Admissions/Demission Committee, he/she will be referred to his/her home school via the case conference process.

Parent/Guardian and Student attendance at the Admissions presentation

- ◆ typically the parents/guardians and the student do not attend the admission meeting.
- ◆ if the student is accepted into the program, an orientation meeting will be arranged with the Section 23 classroom staff and the parent/legal guardian and student will attend.