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[Policy JLE](#)**Student Services (Clinical)****Pre-Referrals**

Prior to making a referral, the specific situation is discussed informally with the appropriate clinician. If there is uncertainty as to who is the appropriate clinician, the Coordinator of Student Services decides which clinician(s) will be involved.

- 1) Referrals for clinical services should be done jointly by the classroom teacher, resource teacher and the principal. The process is to involve collaboration and can be initiated by any of the three.
- 2) Referrals can be initiated by parents. Referrals shall be processed through the school in the usual manner. The Division does not normally provide clinical services to pre-schoolers. Consultative and informal services may be provided to pre-schoolers under special circumstances to facilitate transition to school.
- 3) Students may initiate the process by requesting to meet with a clinician.
 - a) Collegiate students may see the Social Work Clinician up to 2 times without parental consent.
 - b) Parental approval is required in other situations prior to contact. Verbal approval is sufficient to initiate a contact. Subsequently, written approval using the standard referral form must be obtained. This completed form shall be kept on file by the school.
4. Referral forms, available from resource teacher, shall include all pertinent information, and shall be signed by the parent, resource teacher, principal and coordinator.
5. The resource teacher shall co-ordinate the referral process in each school and shall forward all copies of the completed form to the Co-ordinator of Student Services. Signed copies will be distributed from the division office.
6. The Co-ordinator of Student Services will review the referral, sign the form, and forward the original copy to the appropriate clinician. The remaining copy is kept on file by the Co-ordinator of Student Services and recorded in the division database by designated administrative staff.

Assessment and Reporting

1. Following the assessment, the clinician will record results and make recommendation regarding appropriate programming.
2. Copies of the assessment reports go to the clinical file, pupil support file, and parents/guardians. In certain cases where other professionals such as doctors or agencies are involved, copies are also supplied to them under written parental consent. Consultative reports may be provided by clinicians as needed. Reports will be updated, at minimum, once per year.
3. The clinician will maintain appropriate communication with parents regarding assessments and reports.
4. One copy of the report will go to the school pupil support file. The resource teacher is responsible for sharing this report with appropriate school team members. It is suggested that all reports be kept "active", with reviews recommended from time to time. Recommendations should be carefully noted and implemented.
5. The reports can be stored in the pupil support file.
6. Clinical reports should never be duplicated without the consent of the clinician.

Reports are not available to unauthorized personnel; e.g. assistants, secretaries and non-professional personnel except when directed by the clinician.