



Ontario Psychological Association

**Professional Practice
Guidelines for School
Psychologists in Ontario**

The OPA Section on Psychology in Education

2013

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Notes

The intent of this document is twofold: to provide guidance for school psychology practitioners within and outside of the school system; and to inform other educational, health and mental health professionals working with the school system about the role of the school psychologist. Increasingly, health and education professionals in Canada's public systems work within a collaborative and consultative model – a model of practice in which administrators, educators, health professionals, students and families work together to enhance student learning, development and mental health.

Psychology practitioners in the community offer services to students that are utilized and valued by school boards as complementary services. This document is primarily for the use of psychology service providers within boards of education, and all psychology service providers working with school age children and youth. The content of the document will be most useful to those practicing school psychology. All are encouraged to use this document as it pertains to their practice.

In Ontario, the College of Psychologists of Ontario regulates the profession of psychology, and requires practitioners to hold a master's degree to be licensed as a psychological associate, and a doctoral degree to be licensed as a psychologist. In addition, nonregistered personnel may provide psychological services under the supervision of a licensed psychologist or psychological associate.

Following the practice of the Canadian Psychological Association, and based on its *Guidelines for Professional Practice for School Psychologists in Canada* from which this document was adapted, we will use the term "school psychologist" to include:

- Registered psychologists with an established competence in school psychology; and
- Registered psychological associates with an established competence in school psychology.

The term "established competence" refers to a registered psychologist's or a registered psychological associate's boundary or area of competence as defined by the College of Psychologists of Ontario.

"Registered" refers to those psychology professionals who have sought and obtained licensure from the College of Psychologists of Ontario, the regulatory body established by governmental statute to regulate the practice of psychology in Ontario (www.cpo.on.ca). Registered psychologists and psychological associates are required to comply with the Standards of Professional Conduct of the College of Psychologists of Ontario.

Preface

“School psychologists are the most highly trained mental health experts in schools. In addition to knowledge about prevention, intervention, and evaluation for a number of childhood problems, school psychologists have unique expertise regarding issues of learning and schools. It is [school psychologists] ethical responsibility to become involved in programs aimed at problems that are broader than assessing and diagnosing what is wrong with a child. As the most experienced school professionals in this area, school psychologists must become invested in addressing social and human ills ... Although [school psychologists] will not ‘solve’ these ills, [they] must have a role in ameliorating their impact on the lives of children.” – Sheridan, S. and Gutkin, T. (2000)

The mandate and scope of the school psychologist’s intervention encompasses the total life of the child and adolescent. The school psychologist investigates the child and adolescent’s birth and developmental history, family circumstances, and functioning in the school and community.

The training and skills that psychologists bring to the school system include but are not limited to the administration and interpretation of psychological tests to assess cognitive, academic or emotional functioning. School psychologists also have expertise to address the needs of students through counselling to help them better succeed in the classroom.

According to the missions and models of psychologist training programmes, science informs and is informed by practice. School psychologists know how children learn and behave and how they develop cognitively and emotionally. School psychologists understand individual and group differences and have expertise in research methodology and program evaluation. This knowledge base informs the practical skill sets psychologists employ in assessment, intervention, and consultation. This knowledge and skill set can be applied at the level of the student, family or teacher, at the whole-school level, and at a district/system-wide level.

The school psychologist is an integral and important part of a district’s student services team, as well as of the total district organization. The school psychologist serves the district by engaging in planning, implementing, and delivering prevention programs for the full spectrum of mental health problems affecting schools, including violence prevention and crisis response. Collaborative consultation with teachers and other mental health professionals enables the psychologist to deliver meaningful programs to the total student body.

School psychologists serve as expert resources for districts, teachers, and parents in providing in-service education on a variety of school-related problems and issues, such as behaviour management and parenting skills. Psychologists also assist districts with the development and evaluation of new programs, and provide professional consultation to district level staff. Consultation with community stakeholders in education, such as medical practitioners, other government and service agencies and professionals and

support groups, is also within the scope of school psychologists. The school psychologist's activities target many levels: primary prevention programs, systemic interventions, individual consultations, postvention, and treatment for chronic and severe developmental problems. The breadth of practice speaks to the diversity of skills that the school psychologist brings to the educational system.

Evolution of the Role of School Psychologists in Ontario

Although the first mention of psychologists working with schools in Canada dates to the early part of the 20th century, these clinicians were typically based in mental health facilities rather than schools, and their work was primarily the identification of students needing specialized placements for learning.

Psychologists worked within schools in small numbers throughout the ensuing decades, although primarily in an itinerant capacity and with a clinical psychology or health rather than school psychology perspective. This occurred because there were no formal training programs in school psychology available in Canada until the 1970s. With the advent of specialized training programs in school psychology, school districts in Canada began hiring their own psychologists, again with a primary focus of identifying students with unique learning needs who required special placement or services. The passage of PL-94-142 in the United States in 1975 had an indirect impact on educational practices in Canada, as did the passage of the Canadian Human Rights Act in 1977 and the Canadian Charter of Rights and Freedoms in 1982. These legislative changes opened the doors for more inclusive classrooms, more attention to the needs of individual students, and more services to address individual and special needs. There was also a need for supports for teachers educating students with behavioural, emotional and learning differences, who were now being included in the regular school system. In Ontario, since the passage of the Education Amendment Act (Bill 82) in 1980, all school boards have been required to offer special education programs and services.

The introduction of inclusive practices in the schools created an increase in the population of students who required the services of school psychologists. Historical estimates of the percentage of students needing psychological services were 5 percent. This figure essentially represented those with cognitive disabilities. With the move to more inclusive classrooms, we now estimate that 25-30 percent of the total student population will have exceptional problems that need psychological services. Included in this larger group are students with learning disabilities, cognitive challenges, behavioural and emotional disorders, mental health needs, impulse control problems, giftedness, and autism spectrum disorders. According to the National Association of School Psychologists in the United States the recommended ratio for school psychological practice is one school psychologist to 500-700 students¹. Saklofske et al. recommended one school psychologist to 1000 students in a 2007 study².

Whereas the historical 5 percent largely needs traditional cognitive and learning assessments, the 25 to 30% now identified for psychological services requires a broader array of psychological assessment, intervention and consultation. The training and skills that psychologists bring to the school system today have gone beyond the “refer, test, place” model of past years and have accordingly increased in depth and breadth. The movement to inclusion has enabled psychologists to apply the full range of their skills in the schools. The Student Assessment Project, funded by the Ontario Ministry of Education and led by the Ontario Psychological Association (2006-2009) provided an excellent opportunity for all publicly funded school boards and school authorities to

¹ NASP Model for Comprehensive and Integrated School Psychological Services, 2010

² Saklofske, Schwan, Bartell, Mureika, Andrews, Derevensky & Janzen, 2007

utilise a range of psychological and other professional services, including consultations, pre-referral interventions, and capacity building for teachers. (OPA)

Qualifications of School Psychologists. School psychologists are trained at the graduate level as science-practitioners. Their knowledge and skills include the foundations of learning, behaviour and individual differences, assessment and intervention, research methodology, and program evaluation. School psychologists are unique among psychologists in that they have training and experience in both mental health and educational issues. Mental health issues not only have a major impact on a child's or adolescent's behaviour in school but also can seriously impact learning. In turn, learning difficulties impact a student's social, emotional, and behavioural adjustment. Psychologists provide an integrated service that addresses the whole child or adolescent in the many settings in which he or she lives (e.g. school, home, community).

Ethical Obligations of School Psychologists. Psychologists adhere to the Canadian Code of Ethics for Psychologists 3rd edition of the Canadian Psychological Association (CPA).

<http://www.cpa.ca/cpaside/userfiles/Documents/Canadian%20Code%20of%20Ethics%20for%20Psycho.pdf>

What School Psychologists Offer to the Educational System - An Overview

School psychologists are integral and important members of the student services team, as well as of the district's organizational structure. School psychologists provide a wide variety of both educational and mental health services to school districts, school staff, students, and their families. It is important to note that school psychologists, along with their multidisciplinary team colleagues, can be instrumental in providing services to ensure the best outcome for children and youth facing barriers to learning (Lean & Colucci, 2010).

School psychologists

- understand educational policies and issues because they work within the educational system
- understand the viewpoints of the many stakeholders in the educational system because their work requires their regular and direct contact with students, teachers, parents, and the community
- respond to student needs and situations that are continual and chronic in nature (e.g. disruptive behaviour disorders, learning disabilities) and understand how these problems and situations affect and are affected by the classroom
- bring a scientific, research-based and objective approach to the analysis and assessment of students learning, behavioural and emotional problems
- have the tools to systematically measure change in behaviour over time
- have the training to carry out psychological assessments of students' cognitive, academic, social-emotional functioning and learning styles for the purpose of educational planning
- have the training to recognize, diagnose, and intervene with child and adolescent behaviour and learning disorders
- collaborate with students, families, teachers and other health care professionals in formulating appropriate recommendations, plans and achievable goals for students
- support parents and teachers in the implementation and monitoring of recommendations and plans
- liaise with other agencies in the community when appropriate to ensure comprehensive service delivery to students, parents, and the teachers with whom they collaborate

- develop, consult, and participate in programs designed to respond to crises and emergency situations in schools
- stay current with research related to psychology and education, and therefore offer psychological resources and expertise to the educational system in the development of educational policies and procedures as well as program evaluation.

The Clients of School Psychologists

Furlong et al. (2000) identify three factors that determine students' connectedness to school. All three are ones in which school psychologists have identified roles and which target individual, group and systemic engagement. School psychologists can help students develop the skills optimal to school success, identify the opportunities that promote school success and receive recognition not only for their success but for their efforts. School psychologists can provide multi-tiered population-based approaches to services, involving interventions at all tiers.

Entire school population: School psychologists intervene with the whole school population through primary prevention measures such as school-wide screening programs for early identification of learning and/or behavioural problems and needs, mental health and wellness promotion, personal safety and safe-school programs, anti-violence awareness programs (as described by Cole, 2003), and family support initiatives.

Individual students: Some students will require more direct intervention. This might include assessments of learning, behavioural, developmental and emotional problems and the development of programs to address the student's needs as identified through the course of assessment or by the school. Other kinds of psychological interventions, often called postventions, might be needed to help students leaving or being removed from school.

Teachers, families, community health professionals and social service agencies: Addressing the psychological needs of students often involves a coordinated and collaborative commitment on the part of students, families, teachers, community health professionals and social service agencies. While the school psychologist may provide only some of the needed services, he or she will be involved in coordinating others.

Roles and Responsibilities of School Psychologists

Because they work directly in the educational setting, school psychologists are familiar with the unique characteristics, culture, delivery systems, and current educational policies of the school system. School psychologists work with school, district, and community-based teams, and bring specialized understanding of child and adolescent development and an empirically-based approach to assessment and intervention of the problems students present. The breadth and depth of psychologists' training in

assessment, intervention, research and evaluation at the individual, group and systems' levels mark their significant contributions to the school team. School psychologists complement the different training and approaches of the other school professionals with whom they collaborate, enabling teams to provide the most effective and comprehensive service to children and adolescents in our schools.

Five Levels of Service / Intervention for School Psychologists

A. Student-Focused Indirect Service / Intervention

Student-focused indirect service / intervention occurs when the school psychologist works with parents and teachers in planning educational and behavioural interventions for individual students. These kinds of interventions by school psychologists can include:

- **Consultation** with teachers and administrators to address concerns related to individual student or class behaviour and learning difficulties.
- **Program planning** following functional behavioural assessments in which psychologists provide advice on how to adapt the curriculum and make accommodations to meet a student's learning style, cognitive profile, developmental level, or behavioural needs.
- **Parent collaboration** to better understand students with behavioural, socio-emotional and learning difficulties and to best integrate intervention strategies across the settings in which students live and learn.
- **Goal setting** by interpreting assessment findings and applying them to help to establish realistic goals based on a student's strengths and needs.
- **Teacher assistance** by consulting with teachers and suggesting teaching strategies based on the specific nature of the student's learning or behavioural difficulty.
- **Interagency networking** by collaborating and coordinating with other agencies to provide comprehensive services to the child or adolescent.
- **Referrals** to other agencies and professionals, as needed.

B. Student-Focused Direct Service / Intervention

Student-focused direct services include a psychological assessment and/or intervention (e.g. behavioural or cognitive-behavioural therapy) with an individual student.

Interventions are directed to students for recently developed or identified problems, sometimes of an urgent nature. Sometimes the goal of the intervention is to understand and accommodate a student's difficulties within the school environment. At other times, intervention is directed to students at risk of leaving or removal from school (e.g. those with severe disruptive behaviour disorders who have passed the point where the usual interventions can be expected to be helpful).

These students may require what is called postvention or services for acute episodes (e.g. being asked to leave school) which result from chronic problems (e.g. a longstanding history of problematic and disruptive behaviour in school).

Postvention services typically involve more intensive supports in the form of alternative education programs, longer-term individual or family psychological interventions, drop-out recovery and follow-up support, and possible family preservation interventions. While these supports are not usually provided directly by the school psychologist, the school psychologist collaborates and consults in their delivery.

- **Individual psychological assessment:** The cornerstone of a psychological assessment is often psychological testing. However, the interpretation of psychological testing is done in the context of other information collected and interpreted by the psychologist. This information includes classroom observations, file review, gathering case history information through interviews and checklists, collection of functional behavioural data, and reviewing other professional assessments of the child or adolescent. Psychological testing may include the administration and interpretation of standardized objective and projective psychological tests to assess such areas and functions as cognitive development, memory, language, executive functioning, visual perception, auditory perception, language development, visual motor skills, academic attainment, and socio-emotional and behaviour adjustment. The data from a comprehensive psychological assessment informs a psychologist's recommendations concerning intervention strategies for parents and teachers.
- **Individual intervention / counselling:** School psychologists use evidence-based psychological interventions such as relaxation training, social skills training, cognitive, behavioural, and rational emotive interventions. These interventions help the student and others better understand the nature of a problem or personal issue, how best to solve or manage it, and how to prevent future problems. Interventions can also help the student and others plan for the future in the context of issues or problems related to school success. Research has shown that mental health interventions run more smoothly when school-based support services providers, including school psychologists, deliver the interventions at both the individual or group level (Lean & Colucci, 2010).
- **Group intervention and behaviour skills development:** School psychologists often meet the needs of a number of students by organizing small groups which focus on specific issues or the enhancement of specific coping skills. Some examples are social skills training, anger management training, stress management training, and interventions to respond to the effects of divorce on children and adolescents.

C. Whole Class and School-Wide Interventions

School-wide interventions help a school in its efforts to improve how it meets students' mental health and learning needs. These kinds of interventions by school psychologists include:

- **Liaison** with and/or serving on school-based problem-solving teams.
- **Collaboration** with teachers and administrators to support the inclusion of exceptional students within the school.
- **In-service education** to teachers and administrators in such areas as behaviour support, mental health literacy and supports, classroom management strategies, assessment methods, understanding exceptionalities, suicide prevention, and stress management.
- **Prevention** by advising on whole class and school-wide prevention and intervention programs that facilitate the development of a positive school environment. The Positive Behaviour Interventions and Supports approach is an example of a school-wide approach to discipline (www.pbis.org).
- **Consultation** with teachers and administrators in the provision of information about learning styles and behaviours commonly associated with various identified learning, socio-emotional, and behavioural problems.
- **Best practices** support by providing information related to current research on interventions in the area of children's and adolescents' mental health and various exceptionalities.
- **Planning** by participating in planning and implementing school-wide screening and assessment programs.
- **Postvention** by coordinating, debriefing and supporting students and staff following a tragic event which affects the school as a whole, and monitoring students and staff to ensure that healing occurs and referrals are made when appropriate.
- **Teaching** by providing parenting programs and staff in-service educational opportunities.

D. District / System-Wide Interventions

District/system-wide interventions help the system as a whole improve its effectiveness in supporting student achievement and well-being, and in dealing with students' mental health and learning difficulties. Examples of these types of interventions by school psychologists include:

- **In-service education** through district-wide professional development for educational staff on issues such as child and adolescent development, mental health literacy and support, behaviour support and classroom management, exceptionalities, suicide prevention, and assessment.
- **Screening** by developing and carrying out early screening programs in the schools to support appropriate programming and to ensure that students at risk for academic or behavioural problems in the classroom are identified in a timely

- fashion so that appropriate interventions can be implemented to address the individual student's needs before they become chronic difficulties.
- **Evaluation** by assisting with data collection and evaluation of system-wide mental health, special education or other interventions.
 - **Best practices support** by reviewing and providing information on current educational and psychological research on topics of relevance to educators.
 - **Intervention programs** by assisting in developing, implementing, or consulting with system-wide intervention programs (e.g. positive behaviour interventions and supports, conflict resolution, social skills, bullying prevention programs, drop-out prevention, violence prevention, crisis intervention and response, alternative education programs).
 - **Outreach** by developing and implementing inclusive, multicultural parenting programs and information sessions on a variety of topics.
 - **Networking** by serving on multi-agency committees and programs, and collaborating with various agencies in program planning and development.
 - **Advocacy** for children and adolescents with learning, developmental, socio-emotional and behavioural exceptionalities.

E. Research

The training of psychologists involves the completion of an undergraduate degree followed by a graduate degree in psychology. It includes the study of, and training in, the science and practice of psychology. Both are equally important to ensure competency as a psychologist. Psychologists ascribe to practice-based science (i.e. experiences in practice should direct research) as well as science-based practice (i.e. the results of research should shape best practices).

Psychologists are skilled in the areas of research design and statistical analysis and this enables them to direct or advise on research projects in the educational setting. A psychologist's role in school-based research can include project design and planning, data collection, data analysis, interpretation of results, and translation of findings into practical applications. Examples of school-based research projects include assessments of the effectiveness of different types of behavioural and educational interventions and programs and evaluations for the effectiveness and validity of various group and individual assessment measures.

There is a large body of national and international educational psychology journals devoted to the publication of school-based psychological research. Although not all practicing psychologists are actively involved in research, it is accepted within the profession that research literature should guide their practice and they have an ethical responsibility to keep their knowledge up to date.

Psychological Assessment in Ontario Schools

Within an inclusive school system, a psychological assessment is focused on understanding the individual student in terms of his or her strengths and needs, in order to assist school staff in providing appropriate programming.

A psychological assessment is an objective measure of samples of behaviour including its causes, significance and consequences. It may include the evaluation of

- social adjustment
- emotional status
- personality
- cognitive / developmental functioning
- language processing
- information processing
- visual-motor development
- executive functioning (i.e. attention, impulse control)
- aptitude
- academic achievement
- motivation

Information obtained in an assessment is used to plan specific instructional and behavioural interventions for the student, as well as to set realistic, attainable goals for success. The psychological assessment, along with information from numerous sources and other professionals, contributes to a further understanding of the whole child or adolescent. A psychological assessment involves the use of formal, psycho-diagnostic procedures requiring a considerable degree of training, expertise, and continual upgrading of knowledge.

Psychological tests and procedures utilized in an assessment are scientific and research-based tools. The understanding, administration and interpretation of psychological tests requires many hours of graduate psychology coursework as well as supervised practical work both pre and post-registration as a psychologist. In the hands of inexperienced, unsupervised, or unqualified individuals, the administration of a psychological test and assessment results in inaccurate interpretation of assessment data, misdiagnosis and inappropriate, ineffective and possibly harmful interventions. For example, there can be serious and significant consequences for a student mistakenly determined to be of borderline intelligence when in fact the student has a learning disability or attentional disorder. This could easily lead to negative school experiences, closed doors and missed opportunities all because the student's actual problem was incorrectly identified and improperly accommodated.

Professionalism and Psychological Assessments

A psychological assessment involves much more than mere administration and scoring of tests. Observations of important aspects of test behaviour such as anxiety, fatigue, attention and motivational factors are very important. The psychologist is trained to be sensitive to the effects of the assessment procedures on the student. Special techniques

are often required to elicit optimal performance from some children and adolescents. The interpretation of the student's performance has to take into consideration a variety of factors that influence performance. The psychologist integrates these factors into a larger context of knowledge concerning test construction, theoretical knowledge of child and adolescent development, learning theory, psychological processes and child and adolescent exceptionalities. An experienced and well-trained psychologist can do this best.

A thorough understanding of statistics and psychometrics (test construction) is required to interpret psychological tests accurately. In order to interpret various types of scores, it is necessary to have an understanding of how they are derived, what they mean and how they compare to other types of statistical measures. In addition, the examiner must be capable of reviewing the technical merits of selected instruments in terms of such characteristics as validity, reliability, standardization and test construction. As new instruments come on the market, this particular capability becomes even more essential. It is incumbent on psychologists to be able to demonstrate that the tests and procedures used to arrive at diagnosis and interpretation are valid, reliable, and have been used appropriately.

Appropriate interpretation of psychological assessments requires familiarity with new developments and with current independent studies of assessment instruments. Accurately making psychological diagnosis is a very challenging task, even for an experienced clinician. The diagnosis of many disorders may result in some very specific prescriptions for therapy, prognosis for outcome and medication treatment. Non-psychologists, including teachers, should be cautious about making suggestions that a child or adolescent may have some specific type of psychological disorder. The Diagnostic and Statistical Manual of Mental Disorders (DSM IV) recognizes over 40 psychiatric disorders usually first diagnosed in childhood and adolescence. In addition, there are also a number of psychological disorders that may be diagnosed in both adults and children. The DSM will be updated in 2013 and it is incumbent on school psychologists to familiarize themselves with the new diagnostic system. The new revision of the International Classification of Diseases (ICD 11) by the World Health Organization will also be released by 2015.

Those engaged in psychological assessments must take into consideration ethical standards, confidentiality and protection of the student's rights. Informed consent from a student of legal age or from a parent or legal guardian of a younger student is absolutely essential. Information obtained from assessments should only be shared with those persons involved with the teaching and learning process of the student. Reports or test protocols should not be transferred to other agencies or professionals without informed consent. Psychological reports are the property of the school district, and should be kept in secure areas. Once a student is no longer in school, there must be clear policies regarding the length of time a psychological report and/or file is kept. (Refer to the Standards of Professional Conduct by the College of Psychologists of Ontario.)

Psychologists who conduct psychological assessments may find themselves required to defend or explain their assessment in a court of law. School personnel will want to ensure that psychological assessments are carried out by, or under the supervision of a registered psychologist for two reasons. First, school boards want to ensure that, in offering a service or intervention, it is of the highest possible quality and best meets the needs of the child. Second, school boards will have exposure to legal liability claims if a

service, carried out under their aegis, is not done in accordance with regulated professional standards, by a provider licensed to render the service. In Canadian jurisdictions, “psychologist” and “psychological” are legally protected titles reserved for the use of registered (licensed) psychologists. Further, many psychological tests in use within the school system can only be sold to registered psychologists. The right of a registered psychologist to carry out the accepted tasks of his/her profession are not at risk to a legal challenge in the courts. However, individuals performing tasks of a psychological nature who are not licensed or qualified to do so, may find themselves in an indefensible position, all the more so when their actions negatively impact on the life and well-being of a person.

Controlling Access to Psychological Tests and Procedures

A specific responsibility of school psychologists involves the ethical requirement to protect test security and to ensure that access to psychological tests is restricted to registered (licensed) psychologists. All distributors of psychological tests have restrictions on the credentials required for the purchase of different types of instruments. School districts employing psychologists must take reasonable steps to ensure that the purchase and distribution of psychological tests are for the use of psychologists only.

Non-psychological School Testing

Although psychological testing in the context of assessment requires training and licensure as a psychologist, there are a number of excellent academic tests that can be comfortably and competently administered by resource teachers and guidance counsellors. Results of these tests offer teachers valuable direction for immediate interventions with students. They also indicate when psychological testing and assessment should be undertaken by the school psychologist. Because of their expertise in test construction, administration and interpretation, school psychologists can assist resource teachers and guidance counsellors in interpreting scores on various standardized academic tests. Psychologists also can provide in-service training for educational staff on statistics, test construction, validity, reliability, and the meaning of variously derived test scores (e.g. standard scores, percentile ranks, age and grade equivalencies).

How Should A Psychological Assessment Be Requested?

An initial consultation with the school psychologist prior to an assessment referral is an essential best practice for school systems. This practice results in a more timely response because several consultations can occur in the time it takes to do one assessment. The initial consultation enables the psychologist to have input into establishing the need for, and the goals of, the assessment and assists the school in determining assessment priorities. In some cases, a review of the student’s file, assistance with interpretation of school based educational assessments, and consultation may be adequate to address the concerns. An initial consultation allows for some immediate intervention to take place, even if the student has to be placed on a waiting list for an assessment.

School psychology is an educationally-based support service. Requests for school psychological services, including assessments, should go through the school team of

which the psychologist is a member. The school team is in the best position to establish school referral priorities and, because of its knowledge of the students, is best positioned to screen all requests for formal assessment. Although school psychologists do not accept direct referrals for assessment from parents or professionals outside of the school system, they do provide consultation to help a student or outside professional best meet the student's needs.

When Is a Referral to a School Psychologist Indicated?

The following are some examples of appropriate referrals:

- The classroom and resource teachers have worked with the student and have carried out some individual academic testing. The student appears in need of special education but is not responding to the strategies outlined in the special education program and teachers do not know why. School personnel believe that they require more information regarding the student's learning style, and cognitive and developmental profile, in order to tailor the student's special education program to his or her needs.
- Teachers are uncertain about a student's developmental level and cognitive abilities and need assistance in developing realistic long-term expectations for the student.
- Teachers suspect, in daily observations, that the student may have a neurologically-based disorder or a mental health problem (e.g. Autism, Attention Deficit Hyperactivity Disorder, Tourette's Syndrome, Mood Disorder) that is impacting the student's school success and adjustment. Diagnostic confirmation, advice on referrals to health care professionals, and intervention strategies are required.
- There is a discrepancy between the teachers' and the parents' expectations and perceptions of a student's learning and/or behavioural needs. In some of these cases, a psychological evaluation is believed to be required to provide objective and standardized information to establish the student's needs and status and to assist in resolving the differences in expectations between parent and teacher so that learning and school success can be enhanced.
- Teachers believe that the parents need assistance in understanding or accepting their child's needs. Involving a school psychologist in such discussions can assist the parents to develop a better understanding of their child's strengths and needs and the value that special programming or planning can provide.
- A student has serious behavioural and/or emotional problems and the teachers want to know what (i.e. neurological, socio-emotional, environmental, and personality) factors might be affecting the student's behaviour. An assessment in this case may lead to suggestions for specific types of intervention strategies within the school environment or identification of the most appropriate psychological or other health treatments for which referral to other professionals might be indicated.

Best Practices and Guidelines for Access and Referral to School Psychological Services

Teachers and parents are often uncertain as to how to access psychological services within the school system.

This section describes common/best practices for accessing psychological services at all levels of the system, including psychological services that are focused directly on students, consultative services for students and teachers, and school-wide and district/system-wide interventions and supports. The information and suggestions are intended to facilitate referrals for school psychological services, and to ensure that the most appropriate service is provided to those requesting the assistance of the school psychologist.

The types and levels of service/interventions provided by a school psychologist will depend on a number of factors, including the priorities established by the school district(s) and schools served by the psychologist, as well as the training, experience, background and skills of the psychologist.

The best practices for access and referral processes described here include examples from all tiers of the school system including entire school populations, individual students, teachers, families, community health professionals and social service agencies. The services and interventions may include:

- Student-focused consultations and direct services such as:
 - consultations regarding targeted intervention and prevention services;
 - behavioural assessment and consultation;
 - full psychological assessment; and
 - other direct services such as individual psychological counselling or group intervention.

- Whole class, school-wide or district-wide psychological services including teacher-centered instructional consultation, and responses to emerging student population needs.

A. Access to Student-Focused Psychological Services

Access to student-focused school psychological services for consultation, assessment, or other service normally follows a referral process.

Teachers are usually the first observers of learning, social-emotional, or behavioural difficulties in the school setting. School-based team meetings, which usually involve a variety of school, district, and community services representatives, afford an opportunity to address these concerns. During this collaborative process, a referral for school psychological services may be initiated. Psychologists may be available for informal consultation and classroom observation at this time.

The referral resulting from the school-based team meetings may result in collaborations involving teachers, parents and the psychologist to plan specific interventions. Alternatively, direct services from the psychologist may be the appropriate response, such as behavioural assessment and consultation, psychological counselling, group intervention, or a full psychological assessment. The decision regarding the most suitable psychological service to be provided rests, appropriately, with the psychologist.

Informed Consent

All psychological activity within the school and the practice of psychology itself is governed by informed consent provisions in legislation and by standards of practice to which psychologists are held accountable by regulatory bodies of psychology. Informed consent is one of the core standards of practice. Any psychological activity with or on behalf of a student cannot proceed without “informed consent”. Consent covers topics such as what assessment or interventions the psychologist plans to carry out, to whom and how the information will be communicated and to what use the information will be put.

Before a formal assessment is conducted, consent in writing is required from students eighteen years of age and older, or from parents or legal guardians for students under the age of 18 or incapacitated students who are over the age of 18 (Education Act, Regulation 298, 1990, Standards of Professional Conduct, College of Psychologists of Ontario). For any other service, informed consent is required by the student if the student has the capacity to consent, or by the parent if the student does not have the capacity to consent (Health Care Consent Act, 1996). The student’s age of consent for counselling and group interventions may vary amongst boards according to board policy. Consent is not required if there is a present danger to self, others or severe incapacity (Health Care Consent Act, 1996). According to the Child and Family Services Act “A service provider may provide a counselling service to a child who is twelve years of age or older with the child’s consent, and no other person’s consent is required, but if the child is less than sixteen years of age the service provider shall discuss with the child at the earliest appropriate opportunity the desirability of involving the child’s parent.”³

Referral for Student-Focused Indirect Service: Student-Focused Consultations

- **Consent.** Informed consent (verbal or written) is required for student-centred consultation.⁴
- **Referral procedures.** These may vary among school boards, cities and jurisdictions. Typically referrals are made in writing, and follow a consultation with the school psychologist, either directly, or at a school-based team meeting or case conference.

³ According to the Child and Family Services Act, R.S.O. 1990, c. C.11, s. 28.

⁴ Personal Health Information Protection Act, 2004 – PHIPA

- **Type of service.** The decision to do a psychological assessment (of behaviour, mental health or learning) or to engage in direct intervention (e.g. such as behavioural or cognitive-behavioural therapy) rests with the school psychologist and is based on the information obtained during the consultation process.

Referral for Student-Focused Direct Service:

1. Student-Focused Behavioural Assessment and Consultation

- **Consent.** Consent must be obtained by the school principal⁵ and informed consent by the psychologist⁶ **prior to the assessment.**
- **Referral procedures.** The school team may refer to psychological services for behavioural assessment and consultation. The purpose of this level of school psychology consultation is to look at an individual student's behaviour in depth in order to formulate a more specific/individualized program for that child or adolescent in the classroom.
- **Type of service.** The psychologist may provide a diagnosis of the behavioural, emotional or developmental disorder that explains the behaviour, and, as a result, may advise and/or facilitate support from community groups (such as parenting courses or local associations dedicated to assisting parents with the special needs of their child or adolescent) **or** assist with a referral to an appropriate community agency (such as Mental Health, Family Services, Physicians, Psychiatrists, etc.). Activities the psychologist may choose to complete at this level might include participation in or coordination of:
 - behavioural observations
 - functional behavioural assessments
 - file review
- **Documentation** will be kept in the psychology file as well as in the Ontario Student Record (OSR).

2. Psychological Assessment

- **Consent.** Written consent must be obtained by the school principal **prior to** any formal assessment from students 18 years of age or older, and from the parent of students under the age of 18⁷. Also, as stated previously, informed consent should be obtained by the psychologist prior to the assessment⁸.

⁵ Education Act, Regulation 298, 1990

⁶ Standards of Professional Conduct, College of Psychologists of Ontario

⁷ Education Act, Regulation 298, 1990

⁸ Standards of Professional Conduct, College of Psychologists of Ontario; Health Care Consent Act 1996

- **Referral procedures.** Referrals are made in writing, and follow a consultation with the school psychologist, either directly, or at a school-based team meeting or case conference.
- **Type of service.** During the psychological assessment process, as with student-centered behavioural assessments and consultations, the psychologist provides a diagnosis that explains the student's behaviour or performance and develops recommendations for further action and follow-up.

The psychological assessment may include all or some of the following components:

- assessment of intelligence, development, adaptive functioning, perceptual processing, memory, academic skill mastery, learning strengths and weaknesses
 - clinical interviews
 - behavioural rating scales from parents and teachers
 - self-report rating scales
 - projective measures
 - assessment of risk of threat of harm to self or others
 - review of school record (Ontario Student Record)
 - observation
- **Reporting procedures.** In accordance with professional standards to which registered psychologists are accountable, the psychologist is responsible for communicating the diagnoses resulting from an assessment to the client who was assessed. In the school setting, whenever possible, feedback should be given to the student, his or her parents or guardians, as well as (with consent⁹) to the teacher or staff working with the student. The school and the parent and/or guardian have a right to information in the psychological assessment report.
 - **Documentation.** Psychological assessment reports may be housed in the Ontario Student Records (OSR) file at the school, in a confidential psychology file, and/or in the Student Services file at District office. Each jurisdiction will have its own protocols for storage of student information, complying with the Personal Health Information Protection Act (PHIPA), and the Standards of Professional Practice by the College of Psychologists of Ontario.

Psychological reports must be authored or co-signed by a registered psychologist.

- **Record keeping.** Psychology files and district office copies of psychological assessment reports should be stored in a secure location according to the Personal Health Information Protection Act (PHIPA) and the Standards of Professional Practice by the College of Psychologists of Ontario.

When a psychological assessment has been completed but the parent refuses to have the report placed in the OSR, or requests that the report be removed from the OSR, the report will be retained in the confidential psychological file maintained by

⁹ Personal Health Information Protection Act, 2004 (PHIPA)

the Board and the information will be released only on consent of the parent or student if having attained the age of 18.

3. Other Student-Focused Interventions: Counselling / Group Intervention

In addition to assessment and planning for a student, there may be interventions required to aid his or her performance in school. These interventions might include:

- individual psychological counselling
 - small group intervention
- **Consent.** For all interventions, informed consent is required. The student's age of consent for counselling and group interventions may vary amongst boards according to board policy¹⁰.

B. Access to Whole Class, School-Wide and District / System-Wide Psychological Services

Access to school psychological services in response to school-wide or system-wide concerns is usually initiated by school and/or district administrators. The concerns may include issues such as student achievement and well-being, facilitating a positive school environment, crisis intervention, and supporting students with learning, mental, emotional, behavioural, and other exceptionalities.

In districts where there is a supervising/chief psychologist, services are normally coordinated by this individual, who works closely with other district supervisors. Another approach to accessing school psychological services for system-wide or school-wide concerns is through a collaborative process involving other members of the district student services team.

School psychologists have training in system level interventions and evaluation and can provide expert resources and vital skill sets for the efficacy of such services.

Referral for Whole Class / Whole School Prevention Approaches: Teacher-Focused Instructional Consultation

Teachers have a right and a responsibility to consult with professionals in the system to help provide the best learning environment for all students in the classroom. Entry to the consultation process may be the school-based team or a case conference. School psychologists serve the total school system. As such, they provide consultation services to school based teams, and, upon request of the school based team, to individual teachers, paraprofessionals or school staff as required. The psychologist is in the role of a resource person to the school teams.

The purpose of this level of school psychology consultation is to help the teacher with teaching and classroom management strategies. This level of consultation **is not**

¹⁰ Governed by the Health Care Consent Act, 1996.

designed to develop a diagnosis as to what type of behavioural, emotional or developmental disorder the child and adolescent might have but looks only at reported individual behaviour and classroom dynamics. (A psychologist must interview/assess the person in question in order to provide a diagnosis.) In this situation, the psychologist assists or advises the teacher / team regarding methods of observing students or in using teacher-made tools and teaching strategies which lead to a better understanding of learning and behaviour. Supportive services that can be accessed through the instructional consultation process include:

- classroom observations
- teacher and paraprofessional coaching
- staff in-service education
- facilitation of functional behavioural assessments
- feedback and discussion with the teacher and the school-based team and others (e.g., parents) as required
- student risk/threat assessment procedures
- school-based crisis team responses following a trauma

Conclusion

This document reflects best practices in school psychology in Ontario and across Canada. Those practices stem from a primary prevention model of service delivery and a philosophy that the school psychologist works with the total population of the school and the district. Best practices in school psychology foster knowledge translation, and are consistent with, and supportive of, the inclusive and equitable practices promoted in the Ontario public education system. School psychologists are mindful of the special and integral role they play in collaborating with, and supporting the work of teachers and parents in the education of all students, and in contributing to resource development and wellness initiatives within their school districts.

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Appendices

Appendix A: Ethical Use and Reporting of Psychological Assessment Results for Student Placement (Canadian Psychological Association, 2004)

It is often the case that funding for, and access to, special services and placements in schools are contingent on psychological diagnoses that are derived, in part, from scores obtained on standardized psychological and educational tests. In some provinces, regulations are specific in requiring that such identification should be based, not on a full psychological assessment, but rather on a single score obtained on a standardized intelligence test designed for use only by appropriately educated and certified individuals. In the hands of highly skilled professionals, psychological tests and other assessment strategies may offer considerable insights into a student's specific difficulties, strengths, and needs. However, an approach that is limited to the exclusive use of single test scores to identify and classify students with learning, behavioural and emotional issues certainly will lead to a number of problems for the professionals working within such a system as well as to a disservice for affected students. Of primary concern is the fact that there is no single psychological construct, test, or test score that can capture the complexity and totality of a student's personal, social and educational needs. When placement and funding decisions are based on a single test score on a standardized instrument, an accurate and comprehensive picture of the student's abilities and challenges cannot be obtained. Such a practice is inappropriate, therefore, and does not serve the best needs either of the student or of the educational system.

Psychologists are placed in an ethical confound when school personnel request that they use psychological instruments for inappropriate purposes that violate professional standards as well as best practices guidelines. In complying with such a request, psychologists are being asked to contravene the *Code of Ethics for Psychologists (2000)* with respect to proper use of psychological knowledge and with respect to appropriate care of the client. Specifically, such limited use of psychological test results to label and place students is a breach of the following ethical principles:

Principle I - Respect for the Dignity of Persons

General Rights

#7 Make every effort to ensure that psychological knowledge is not misused, intentionally or unintentionally, to infringe on human rights.

Non-Discrimination

#9 Not practice, condone, facilitate or collaborate with any form of unjust discrimination.

#10 Act to prevent or correct practices that are unjustly discriminatory.

Principle II - Responsible Caring

General Caring

- #5 Make every effort to ensure that psychological knowledge is not misused, intentionally or unintentionally, to harm others.

Principle IV - Responsibility to Society

Development of Society

- #23 Provide thorough discussion of the limits of their data if their work touches on social policy and structure.
- #26 Exercise particular care if reporting the results of any work with vulnerable groups ensuring that the results are not likely to be misinterpreted or misused in the development of social policy and practices (e.g., used to manipulate the persons concerned).

It is the position of the Canadian Psychological Association that psychological assessment in schools is a process of approaches, comprised of various assessment strategies and tests, intended to better understand the cognitive, social, emotional and academic functioning of a student. This comprehensive process is employed to determine strengths, needs and appropriate services for the individual student. Within the variety of approaches used, there should be formal and informal assessment tools, including interviews with teachers and parents, student work samples and file reviews, curriculum based assessment, and standardized psychological and educational tests. No single measure or test score is comprehensive enough to fully represent the student's psychological, social and educational functioning, and hence, no single measure should be used to determine programs or placement for students.

Psychologists providing services in schools are aware of their professional and ethical responsibilities, and employers must respect the psychologists' duties to their clients and to the profession. Psychologists have an obligation to inform employers of appropriate uses of psychological instruments for placement and other critical decisions.

Appendix: B: Conflict of Interest Avoidance Procedures for School Psychologists in Conducting a Private Practice¹¹

The demand for psychological services to school-aged children and adolescents sometimes exceeds the resources available in the public sector. Since school psychologists have the skills needed to meet these demands, they may find themselves in the position of being asked to provide services to school-aged children and adolescents outside their normal work environment; i.e., the schools. Such requests must be handled very carefully to avoid any real or perceived conflict of interest on the part of the psychologist. The following conflict of interest procedures, established in keeping with the Canadian Psychological Association's **Canadian Code of Ethics for Psychologists, 3rd Edition (2000)**, are points the school psychologist may want to consider when working in private practice.

1. Before undertaking to provide private services for school-aged children and adolescents, school psychologists must obtain the permission to do so from the chief administrator of the school jurisdiction in which they currently work.
2. School psychologists may not provide privately the same services normally provided in the course of their work to school-aged children and adolescents from the school jurisdiction in which the psychologists are employed.
3. Referrals for private services are restricted to those received from sources other than the school jurisdiction in which the psychologist is employed, such as medical practitioners, lawyers, or parents through their employee assistance plans.
4. Services offered privately are either not available or are different from those that the school psychologist would provide in their normal work role.
5. School psychologists who are engaged in private practice are not permitted to advertise their services within the school environment in any way to potential clients.
6. School psychologists should refer all inquiries concerning private practice to the administrator of the school jurisdiction. Regional school jurisdiction offices may provide parents with a list of private practitioners who provide services to school-aged children and adolescents.
7. School psychologists offering private services must do so outside of working hours.
8. School psychologists must not use their employer's materials or resources in their private practice.

¹¹ From: Canadian Psychological Association Professional Practice Guidelines for School Psychologists in Education (2007)