**How to refer a student for an ASD assessment**

Before referring to the TSA assessment team:

* Cognitive assessment (within the last 2 years)
* Language assessment within 2 years (or recent language sample obtained by the speech-language pathologist)
* Parents havebeen consulted and the decision to pursue an ASD assessment is documented by the school and/or specialists involved
* Recent observations of the student by a specialist(s)

*When these steps are completed, school specialists can insert the child's name and information into the Excel* document "*ADOS – Student List" shared on Sharepoint Student Services.*

The ASD assessment team will offer 3 blocks of time (approximately 3-4 days per block) of the year to complete assessments with ADOS-2 (1 block in November, 1 block in January and 1 block in April). They will be able to assess up to 2 students per block, for a maximum of 6 students per year.

The ASD assessment team will meet prior to each assessment block to screen referred students and prioritize students for the next assessment block. The ASD assessment team will then share the selected students at the next school specialist team meeting for feedback from the specialists. Once a consensus has been reached, the families of the selected students will be notifiedand provided with an evaluation date/time.

The family will have to bring their child to the evaluation office of the ASD team (Centre de Santé à Ste Anne). For families who live remotely and accommodations will be required (VDN, SLZ, JDP, LASO), a 6-week notice will be required.

The ASD assessment team (supported by a divisional LES team member from the student's school) will send or complete ASD questionnaires (SRS-2, Socio-Pragmatic Questionnaire, Play Skills Questionnaire) to the child's family and teacher.

During an assessment block, up to two students will be assessed on the same day (1 – AM, 1 – PM). The other days of the evaluation block will be spent analyzing the data and writing the reports. A date for the interpretation of the report will bechosen with the respective specialists and schools.

**Prioritization factors:** The factors that will be considered by the ASD assessment team when selecting candidates to complete the assessment

* Severity of behaviour
* The impact of symptoms on the child's daily life
* Mental health (for older students)
* Dates of cognitive/language assessments
* Rural student VS urban student (who have easier access to MATC).

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| **Priority I:** |
| * Often in crisis
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| * Aggression towards others or oneself
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| * The child shows signs of pronounced depression and anxiety.
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| * The child has great difficulty following the routine of the school day with his peers
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| * Challenges also affect his life in other contexts (home, daycare)
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| * The child has very limited access to community mental health services (CMH)
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| * Cognitive and language assessments were done more than a year ago
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| **Priority II:** |
| * The child is sometimes in crisis, but in general the school can handle the challenges
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| * Mild social withdrawal that does not negatively affect the child
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| * Some adaptations are necessary for the child to follow the routine at school
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| * Challenges are noticed in other contexts, but with adaptation the child succeeds
 |
| * Child does not have access to community mental health services (CMH)
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| * Cognitive and language assessments were done very recently (less than a year)
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| **Priority III** |
| * The student has never had follow-up (or no follow-up in the last 3-4 years) in psychology or speech therapy and assessments are done only to refer to the ASD assessment team (few cognitive and language challenges observed)
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| * The student does not present behavioural challenges
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| * The student does not show signs of depression or anxiety and maintains a stable group of friends
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| * Parents' concerns are not observed at the same intensity at school (or not at all at school) – REQUEST FROM PARENTS
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| * The student can follow the daily routine independently
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| * The student lives in the urban area and may have easier access to MATC
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