



TDSB Psychological Services: Wait Lists (2018-2019)

To: Program and School Services Committee

Date: 6 May, 2020

Report No.: 05-20-3867

Strategic Directions

- Transform Student Learning
- Provide Equity of Access to Learning Opportunities for All Students
- Create a culture student and staff well-being

Recommendation

It is recommended that the report on the Psychological Services Wait List (2018-2019) be received.

Context

The goal of all staff is to complete assessments quickly and effectively to support students' well-being and learning. Psychology staff delivers a variety of services to students and staff. The majority of their time is devoted to understanding students' strengths and needs through consultation and assessment. The purpose of this report is to provide information regarding TDSB Psychological Services' wait lists and referral management processes. A wait list is defined as the total number of students waiting for assessment at any given time. It doesn't describe the length of time it took for an assessment to be completed. Historically, caseload information has been collected directly from Psychological Services staff on a monthly basis to enable the monitoring of assessment referrals and ensure accountability for work completion. This report is based on the best effort to reconcile the data from these monthly statistics, across the four Learning Centres.

Assessment referrals are continuously generated through monthly School Support Team (SST) meetings held throughout the academic year; meetings are attended by Principals, Teachers, parents/guardians and a variety of members of Professional Support Services Staff (including Psychologists, Social Workers, and Speech & Language Pathologists). Positive and clear communication between the psychology and

school staff enables a good workflow and ensures dialogue regarding the priorities of the assessment in the school.

Reasons for staying on the wait list include:

- School staff or parent/guardian request that the assessment be delayed.
- The student has made progress and the referral is no longer a priority.
- The school prioritizes new, urgent referrals.
- Parents/Guardians are reluctant to give consent for the assessment.
- Other reasons (e.g., illness, family crisis, out of country, etc.)

Wait List and Caseload Data

Depending on the circumstances, students may be seen promptly or placed on a wait list. It is noted that wait list figures do not reflect how long a student has waited for an assessment (i.e., it does not distinguish whether a student was referred on the first or last day of school). The new online database will provide information about response times which will support the identification of strategies to improve the delivery of assessments.

Appendices A and B show wait list data for 2018-19 and 2019-20, respectively, as entered on the current electronic system. The first table in Appendix A presents the cumulative information as of June 2019 and the second table updates this data to August 2019, which includes the summer assessments completed through additional funding from the Ministry of Education. It shows that in the 2018-2019 academic year, 77.4% of all assessment referrals were resolved by the end of June (67.1% completed and 10.3% removed). By the end of August 2019, psychology staff resolved 79.3% of all referrals (68.9% completed and 10.4% removed); 19.6% remained on the wait list.

Appendix B details the statistical data regarding psychological assessments for the current academic year, up to the end of February 2020. In spite of the range of adverse circumstances during the present school year, over 72% of current referrals were completed, removed, or were in progress as of end of February, 2020.

There are a number of factors which have contributed to the wait lists. They are as follows:

- Prioritization of new referrals over older referrals based on students' needs.
- Rate of new referrals received in each school.
- Variability of time taken to complete a referral. While some assessments can be completed relatively quickly, others are complex and require more time.
- Referrals received in May and June are likely to be carried over to the next school year.
- Requests to complete assessments without compelling evidence rather than seeking alternative solutions or interventions.
- There are a range of services delivered which results in the staff being extended across many responsibilities.

- Gaps in staffing due to short-term absences and inability to replace staff quickly and effectively.
- There is a limited supply of well-qualified School Psychologists leading to some staff taking on additional supervision responsibilities.
- Parents/Guardians are reluctant to give consent for the assessment.
- Other reasons (e.g., illness, change of schools, out of country, etc.)

Action Plan and Associated Timeline

What is being done to reduce wait lists?

Despite staffing reductions, several strategies are being considered in order to ensure timely service and address the backlog:

- Consideration of targeted or brief assessments, when appropriate.
- Starting in September 2020, a new referral and database system for all Professional Support Services is scheduled to be implemented. This new system will allow for the tracking of time intervals between when referrals are received and when service begins, provide information about actual wait times for service, and offer detailed data on the completion time of referrals.
- Continue to implement the MYSP's Action Plans for Inclusion. Ensure all staff understand the goals in the plan and have the skills required to meet students' needs.
- Review School Support Teams and In-School Support Team processes to ensure they are effective based on their purpose.

Prior to the Emergency Closure Order by The Ministry of Education due to COVID-19 a review was initiated in conjunction with the Managers of Psychological Services. The overall purpose of this review is to address the current challenges and develop a modern, coherent and highly effective service delivery model for Psychological Services. Specifically, the review will:

- build on the clinical skills and strengths of the team,
- identify the core services required to address student needs,
- strengthen the leadership model;
- consider new and effective approaches to service delivery, and
- improve the use of limited and valuable professional resources.

Resource Implications

There are no resource implications associated with receiving this report.

Communications Considerations

NIL

Board Policy and Procedure Reference(s)

Not applicable.

Appendices

- Appendix A: Assessment Statistics from September 2018 to Late August 2019
- Appendix B: Recent Assessment Statistics

From

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Appendix A

Psychological Services: Assessment Statistics (2018-2019)

Cumulative Statistics for each LC from September 2018 - June 2019

	LC1	LC2	LC3	LC4	Total	Percentage*
Removed	220	256	136	230	842	10.3
Completed	1518	1387	1092	1471	5468	67.1
In Progress	11	26	13	39	89	1.1
Waiting	518	250	349	639	1756	21.5
Total Referrals	2267	1919	1590	2379	8155	

Waiting as of end of June: **1756**

Cumulative Statistics for each LC as of August 31, 2019

	LC1	LC2	LC3	LC4	Total	Percentage*
Removed	220	256	136	230	842	10.4
Completed	1550	1407	1113	1515	5585	68.9
In Progress	11	26	13	39	89	1.1
Waiting	486	230	328	551	1595	19.6
Total Referrals	2267	1919	1590	2335	8111	

* The calculations for each category were determined on the basis of total referrals

Summary:

Completed to June reporting period	5468
Removed to June 2019	842
In Progress Cases	89
Completed in July/August 2019 EPO	117

Total Completed/Removed by end August 2019 **6427**
 Remaining end of August 2019 **1595**

Appendix B
Psychological Services: Recent Assessment Statistics
(As of Late February 2020)

	LC1	LC2*	LC3	LC4	Total	Percentage**
Removed	156	259	75	115	605	10.2
Completed	739	671	567	729	2706	45.5
In Progress	210	217	226	322	975	16.4
Waiting	445	286	387	545	1663	27.9
Total Referrals	1550	1433	1255	1711	5949	

* LC2 figures are incomplete as staff that is on leave or retired could not provide some necessary data.

** The calculations for each category were determined on the basis of total referral.