

Carizon Encompass: Specialized Assessment Evaluation

Report prepared by:
T. Darisi & E. Dickson
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openly



HIGHLIGHTS & INSIGHTS

- **25** specialized assessments were provided to children in Carizon's Encompass program.
- Specialized assessments created **greater understanding** of the child among staff, teachers and parents, including **greater appreciation** of the child's strengths and needs.
- Assessments supported staff to access the **right resources**, **advocate more effectively** and **make referrals** for the child. For some children, assessment findings were said to be a **game-changer**.
- Staff, teachers and parents noted **improvements in children's experiences and behaviours**.
- Children were proud of their accomplishments over the year. One said the assessment helped them **learn how to ask for help**.
- **Overall the pilot achieved short-term outcomes**, demonstrating specialized assessments can be pivotal in adapting treatment plans, advocating, and identifying methods and resources for supporting children both while they are in the Encompass program and after they are discharged.
- Greater achievement of outcomes was **limited by the time it took to get assessments completed**, and at times, by **gaps in communication/collaboration** among staff, teachers, and assessors.
- To fully realize the potential for assessments to be a catalyst for improved outcomes, Carizon needs to strategize around how **to better embed assessments**, how **to more fully engage assessors**, and how **to further develop communications of findings**, especially to teachers.



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SPECIALIZED ASSESSMENT EVALUATION

This report presents the findings from the evaluation of the Specialized Assessment pilot, which was part of Carizon's Encompass program development strategy. This pilot was funded by Ontario Trillium Foundation for the 2016/2017 school year.

ENCOMPASS PROGRAM OVERVIEW

Offered through Carizon's children's mental health services, Encompass provides treatment to children and youth experiencing social, emotional, behavioral and mental health challenges that significantly impede their opportunity to learn and achieve at their full potential. Encompass includes a combination of residential, education, afterschool, home-based and recreational programs. These programs are designed to work with parents and children to identify their most urgent needs, and are grounded in a wellness/strengths-based approach for improving emotional, mental health, learning, and family relationship challenges.

Recognizing that children in Encompass programs were presenting increasingly more complex challenges, treatment centre staff identified the need to better understand children, including each child's strengths and needs, earlier in the treatment process. With better insight and understanding, staff could more effectively develop treatment plans for children in the Encompass program. They could also more effectively include a wider range of professionals (e.g. psychology, occupational therapy, speech and language therapy, etc.) within a multidisciplinary team of support. To help build the understanding of individual children, Carizon received funding from Ontario Trillium Foundation for specialized assessments and the engagement of multi-disciplinary teams. This funding launched a program development strategy for the 2016/2017 school year.

From September 2016 to June 2017, 25 assessments were provided throughout the year for children in the Encompass program, including 14 psychological, 7 occupational therapy and 4 speech and language.



THEORY OF CHANGE

Theory of change is used in evaluation to make explicit the connections between what it is you intend to do (activities) and the kind of change you want to make (outcomes). It surfaces assumptions about what is needed and how to best meet those needs. It also presents hypotheses about relationships, pathways and influences on social impact.

The theory of change for this initiative positions specialized assessments as a key to unlocking greater understanding about each child. It is expected that both completed assessments and an improved process for sharing insights and recommendations will equip staff, parents, teachers and multi-disciplinary treatment teams to better connect with children's unique strengths and meet their unique needs.

Increased understanding of children's unique strengths and needs is then expected to translate into recommendations for 1) connecting and engaging with the child, 2) modifying the environment, and 3) accessing the right professionals, technology and specialized equipment for each child.

Greater understanding, improved environments and greater use of professionals and resources will then lead better treatment plans and thus more positive outcomes for children, as well as for all those who provide support – parents, staff, and teachers.





EVALUATION

The Specialized Assessment Evaluation was grounded in a formative approach to support program development and refinement of strategies going forward. Questions guiding the evaluation included:

Process Questions:

1. How were staff, teachers and parents engaged? What was the experience like for each group?
2. What supported the use of psychological assessments? What were the challenges? Did assessments meet expectations?
3. What are our key learnings? What do we need to further develop the program?

Outcome Questions:

4. Did understanding of the children improve through the psych assessments?
5. How did staff, teachers, parents and professionals make use of this understanding?
6. What changes were made to process and practice?
7. What other outcomes were achieved? Who experienced these outcomes? What difference did these outcomes make for children and parents?

METHODS

To answer these questions, data were collected through a mixed-methods design. Tools were developed in collaboration with Carizon.

Method	Description	# Completed
Check in Conversations	Completed with staff to collect feedback on activities and progress	4
Key Informant Interviews	Completed with clinical staff, teachers, assessors, multi-disciplinary professionals	6
Clinical Staff Survey	Completed by clinical staff to assess outcomes and experience with assessments; completed for each child	20
School Staff Survey	Completed by clinical school to assess outcomes and experience with assessments; completed for each child	19



Method	Description	# Completed
Teacher Survey	Completed by teachers to assess outcomes and experience with assessments; completed for each child	19
Parent Survey	Completed by parents to assess experience with assessments and observations of children	14
Staff Observation Template	Completed by clinical staff to track observations of impact on children and capture children's feedback	8

Analysis & Limitations

Survey data were summarized using descriptive statistics while qualitative data were analyzed using a thematic analysis. Findings are triangulated across data sources. Assessments took much longer to complete than expected and in some cases, there wasn't a significant amount of time to assess the effect of changes in practice or outcomes experienced by children. The evaluation thus captures short-term rather than mid or longer-term outcomes.



EVALUATION FINDINGS

OUTCOMES

→ Improved understanding and appreciation of the child

For staff, teachers and parents, specialized assessments were found to create greater understanding of the child, and greater appreciation of their strengths and needs.

Clinical Staff reported assessments provided a better understanding of the child's needs and a greater appreciation of the child's strengths. The assessments helped clinicians "to better understand what is happening behind the behaviour," including finding trauma in the child's history. Some clinical staff noted they had 'hunches' about some of the child's needs, and having the assessment gave them strong validation.

In one case, clinical staff explained the speech and language assessment revealed that behind a child's strong speech was lower than expected comprehension, an insight which then changed their entire approach with the child.

School staff reported assessments offered new insights on the child, helping them better understand the child's needs and appreciate the child's strengths. The speech and language assessment was named as being particularly valuable in helping them understand what the child will understand and respond to.

Teachers reported assessments helped them to better understand the child's actions and reactions in school. The assessment increased their understanding of the child with one teacher saying the assessment results were a '**game changer**.' This teacher explained they had changed their entire approach to assigning work, making sure it was both challenging and achievable.

“Specialized assessments help staff to understand what is happening behind the behaviour”

“Assessments are helpful for programming, IEP development, classroom strategies and a better general understanding of the child's strengths and needs.” Teacher



Parents reported that the assessments provided them with new insights on their child, improved their understanding of their child's needs, increased their appreciation of their child's strengths and increased their understanding of their child's needs.

→ **Improved ability to provide support and find the right resources**

Clinical and school staff reported the assessments improved their ability to find the right resources and supports for the child. For nine of the children, clinical staff adapted treatment plans, and develop specific methods for treatment. The other assessments were said to be received too late in the year to make changes to the treatment plans.

Adaptations to treatment and resources that resulted from assessment findings included:

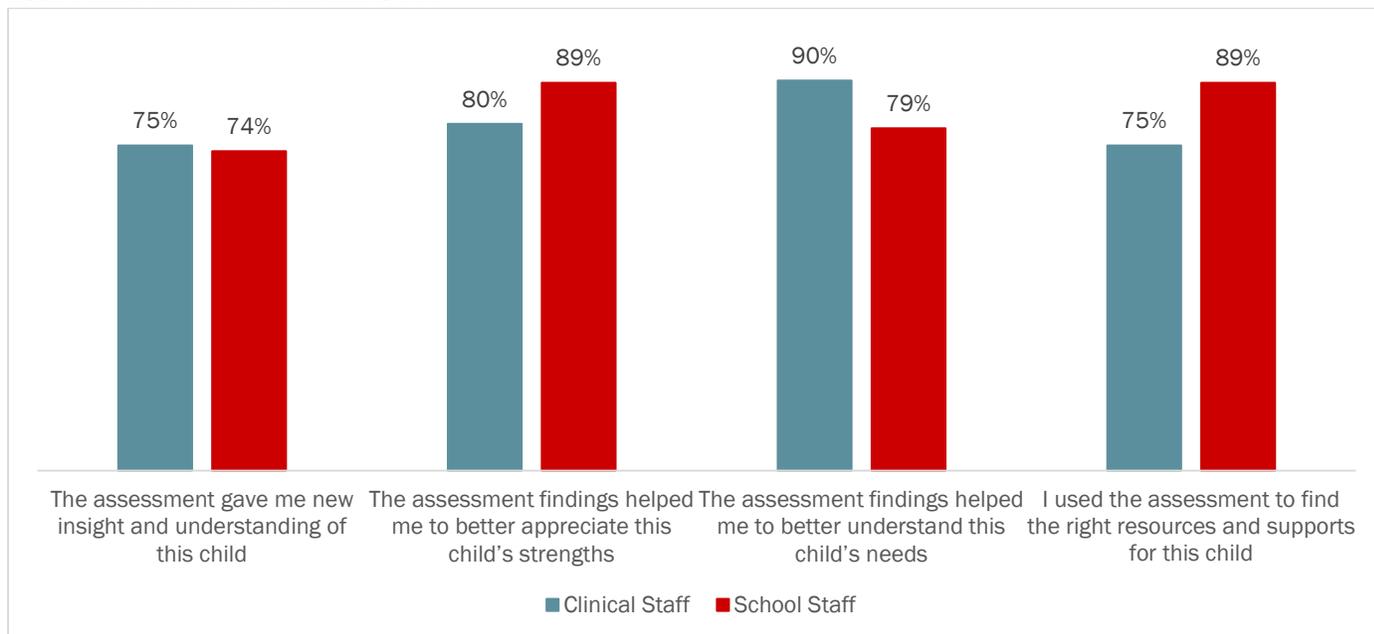
- Using speech-to-text software and changing how information is presented
- Changing from a behavioural approach to an autism-informed approach
- Using a special chair to sit on
- Ensuring sensory tools are available and incorporating sensory coping strategies into the child's safety plan
- Developing the discharge plan
- Taking a more trauma and attachment-informed perspective, leading to the development of new goals and treatment objectives

“Without the assessment, trying out treatments can feel like a shot in the dark”

100% of clinical staff and 95% of school staff noted that assessments helped them to advocate more effectively. Many staff also noted assessments helped them find the right resources and supports for the child. These resources included those for school, like learning tools, and those for families, like respite care for parents.



Staff Feedback on Assessment Use



Teachers also reported assessment were useful in helping them better connect with children through classroom activities. About half of the assessments were used to prepare lessons and academic work at a level more fitting to the child, and some were also used to help the teacher better connect with the children. Overall, however, teachers rated the usefulness of assessments lower than clinical and school staff.

Parents reported that assessment helped them access services they previously went without and that the assessments would be helpful when their child returned to a mainstream school. Two thirds of parents reported **the assessment recommendations help them feel better prepared as a parent.**

→ Improved experience for the child

Through applying new insights and methods to their work with each child, *clinical staff* identified improved behaviour and experiences for the children, including:

- reduction in aggressive behaviour
- increased ability to verbalize triggers
- better self-regulation
- more empathy for others
- better interpersonal relationships.



School staff noted children's progress at school following changes made based on assessment findings, including:

- being able to follow the rules and routines of school
- transitioning back to classrooms
- using the tools and strategies they learn
- being able to verbalize
- being better able to complete school work and tasks

Clinical staff further mentioned a positive impact on the child's family as a result of parents having a better understanding of their child, having new methods to use at home, and having access to more resources.

Parents: 93% reported assessments helped their child. When asked about what they were most proud of in their journey with their child, responses included seeing that their child has grown so much over their time at Carizon, that they are doing better in school, that their communication and empathy skills for others have grown, and that they are happier and more confident.

Children: For children, there was not always the connection between their assessment and the progress that they had made. A few did say that assessments were helpful, explaining that they "get more help when they need it". Some children said they did not mind taking the assessment, but one said they did not like how long the test took, and another saying they did not like the location it was held in. A few reported being proud of their progress overall in the program, including making more friends, being able to stay the full day at school, and getting better grades.

"I learned how to ask for help"

FEEDBACK ON ASSESSMENT PROCESSES

Communication of Assessment Findings

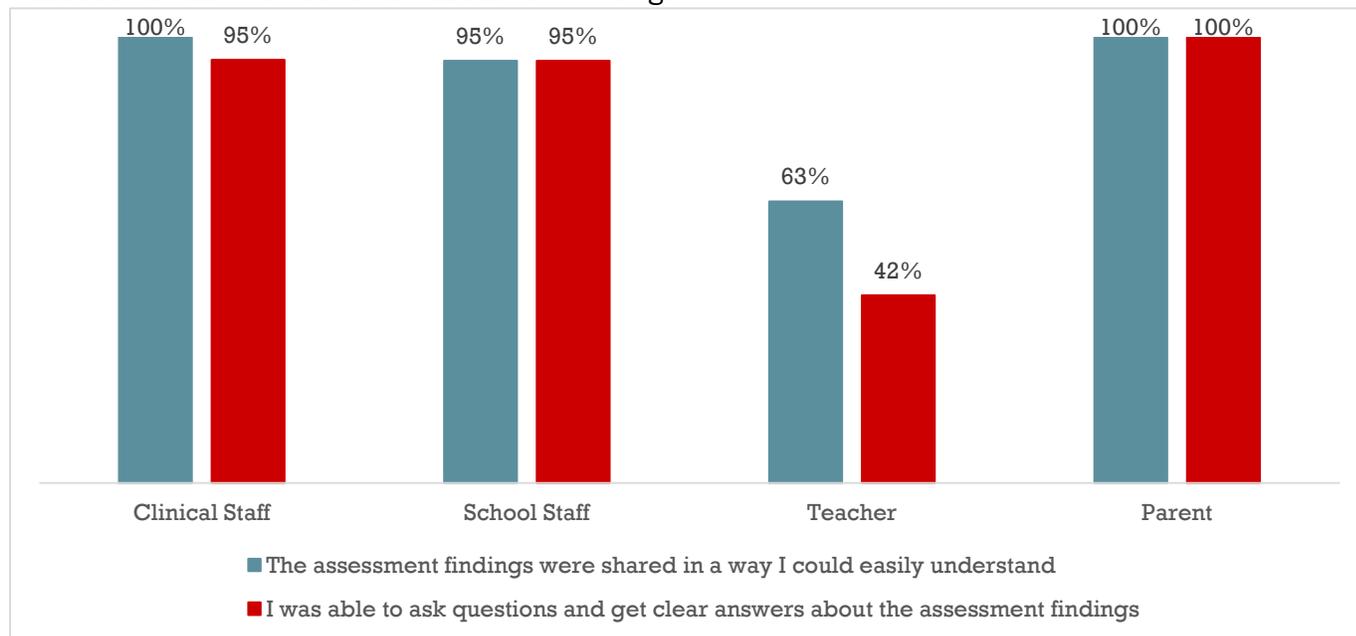
Staff and almost all parents reported no challenges with the communication of assessment findings. All parents found the findings communicated in a way they could easily understand. Clinical and school staff reported assessments helped to communicate with internal staff.

Teachers most often reported challenges understanding the assessment findings. Over half reported not having the opportunity to ask questions. Most teachers reported they had not received any findings from the assessments. Those that did noted it was helpful to speak



directly with the assessor. Teachers regularly noted it would be more beneficial to have the assessment earlier in the year.

Feedback on Communication of Assessment Findings



Feedback meetings were valued by those who had attended. Parents, assessors, clinical staff and sometimes teachers indicated that they benefited from having a meeting in person, and having the opportunity to discuss the findings and potential interventions.

Collaboration

Overall, assessments were seen to support communication and collaboration. Over half of the clinical staff reported assessments helped them communicate with external team; and about half of the school staff noted assessments helped them communicate with the school board. At the same time, staff who participated in key informant interviews noted that good communication was consistent with the collaborative way they already work.

Some staff mentioned that with so many people working on different aspects of a child's life there was, at times, a disconnect. These interviewees said that this disconnect was most noticeable with teachers. They noted it is important to keep teachers informed, especially on issues like cognitive profile, working memory and expressive language.



CONSIDERATIONS FOR MOVING FORWARD WITH SPECIALIZED ASSESSMENTS

The evaluation showed promising results for greater use of specialized assessments. The pilot achieved short-term outcomes, including improved understanding of the children, and adaptations to treatment methods and resources for the children. It is clear from the pilot that Encompass could become a stronger program were specialized assessments included as a more regular practice.

To more fully realize the opportunity presented by greater use of specialized assessments within the Encompass program, Carizon can consider the following feedback and recommendations that came through the key informant interviews.

- **Timeliness of receiving assessments:** Some interviewees mentioned that the process took a long time between scheduling a time to assess a child to developing a treatment plan based on findings. It was suggested that this process should take less time.
- **Timing of conducting assessments:** It was suggested that assessments needed to be completed earlier in the year. Children are in the program for one year. If the results of the assessment do not come until after 8 months, the team does not then get a lot of time to implement new methods and resources.
- **Implementation coordination:** It was mentioned that assessments were somewhat disorganized, between obtaining and setting up a classroom tool and training the team to use it. It was suggested that there should be coordination or a set protocol distributing those tasks. It was also suggested that a coordinator position be developed to coordinate the assessors and ease communication between assessors and between the school.
- **Consistent implementation:** It was suggested treatment should be implemented more consistently, as sometimes a strategy is implemented immediately after the assessment but then is forgotten.
- **Informing everyone of findings:** Having a face-to-face meeting with teachers was named many times as being very helpful and it was suggested that this continue. It was also suggested that teachers be a part of some meetings, for example those that are seminal or in cases where there has been a change in treatment methods.
- **Ongoing collaboration with assessors:** It was frequently suggested that there be a follow-up meeting involving the assessor which checks-in on intervention success.
- **More assessments:** Many believed that most, if not all, children in the Encompass program should get an assessment.



In processing these considerations, the theory of change can be a helpful touch point. Program leads and staff can consider what they might do differently in the next iteration of implementing specialized assessments to better achieve their intended outcomes. Asking and answering reflection questions (e.g. Where do we need to address the gaps? Given our resources and capacity what can we do differently? How would these new actions connection to our outcomes? What are our priorities? How do these align to our strategic directions?) The ideas and strategies that emerge from this conversation can then be connected more directly to the evolution of the Encompass program.



APPENDIX: DETAILED DATA SUMMARY

CLINICAL STAFF SURVEY

20 surveys were completed by clinical staff for children as follows:

- 9 who had a psychological assessment
- 7 who had an occupational therapy assessment
- 4 who had a speech and language assessment

Receipt of Feedback

Most assessment results (18), were received by clinical staff at the feedback meeting, in 1 instance it was received in a treatment team meeting, and 1 was received in a discharge conference.

Assessment Ratings

Impact of the assessment on work	Responded positively (out of 20)
The assessment findings were shared in a way I could easily understand	20
I was able to ask questions and get clear answers about the assessment findings	19
The assessment findings helped me to better understand this child's needs	18
The assessment findings helped me to better appreciate this child's strengths	16
The assessment gave me new insight and understanding of this child	15
I used the assessment to find the right resources and supports for this child	15
The assessment findings help me adapt the treatment plan to better reflect both the strengths and needs of this child	9
I used the assessment to develop specific methods for treatment	8
I found it challenging to implement assessment findings to our treatment plan	2

Changes made to the child's treatment plan included introducing new tools identified as potentially more helpful. With 3 assessments, changes were made the child's discharge plan because of the timing of when the assessment results were received.



With 1 assessment, proposed changes were refused by the child.

Did the assessment findings help you...	Responded positively (out of 20)
Advocate for the child	20
Collaborate more effectively	20
Connect with school board	20
Communicate with internal staff	19
Communicate with external team	12
Make referrals	11
Connect with paediatrician/physicians	6
Connect with Family & Children Services	4
Connect with hospital staff	0

- Some of the achievements that clinical staff were most proud of were the personal progress made by children in the program with their behaviour, resiliency and self-regulation. Clinical staff also named having a greater understanding of the child a significant achievement, progress of the family as a whole and being able to advocate for resources for the child.
- Clinical staff said that 19 assessments completed have made a difference in how they support the child. Some of the positive changes they have seen because of the assessments were: being able to better support the child because of a better understanding, make effective referrals to resources and programs, and a change in their approach to communicating with the child.
- Clinical staff identified some significant progress in children such as a reduction in aggressive behaviour, increased ability to verbalize triggers, better self-regulation, more empathy for others, and better interpersonal relationships. After one assessment, a child had been prescribed anti-depressants and had experienced significantly improved mood and motivation as a result.
- Some of the challenges that clinicians identified as still being present were integrating the child back into a mainstream classroom (6), the availability of the equipment needed to implement interventions (3) and family conflict (2).

2. SCHOOL STAFF FEEDBACK

A total of 19 surveys were completed by school staff.

- 8 of the assessments were psychological assessments, 7 were in occupational therapy, and 4 were speech and therapy assessments.



- With 15 assessments, school staff received the report verbally in person along with a copy of the written report, with 2 assessments the school staff received information over the phone along with a copy of the written report. With 1 assessment, the staff member was unable to attend the in-person meeting but still received a copy of the final report.

The assessment findings...	Responded positively (out of 19)
The assessment findings were shared in a way I could easily understand	18
I was able to ask questions and get clear answers about the assessment findings	18
I used the assessment to find the right resources and supports for this child	17
The assessment findings helped me to better appreciate this child's strengths	17
The assessment findings helped me to better understand this child's needs	15
The assessment gave me new insight and understanding of this child	14

- School staff said that every treatment plan that came from the assessments helped them to support the child. Treatment plans helped by introducing ways the child can communicate and complete their work, others helped by suggesting calming techniques, and others helped in a more general sense of increasing the staff members' understanding of the child.

Did the assessment findings help you...	Responded positively (out of 19)
Advocate more effectively	18
Collaborate more effectively	18
Communicate with internal staff	13
Communicate with the community school	11

- The school staff (5) were most proud of their children for effectively using some of the strategies that they have been learning, such as verbalizing feelings. 2 said they were most proud of the child's successful transition back to school, and 2 said they were proud of the child's hard work to stay focused in class.
- In 6 cases the assessments made a difference in how school staff could support the children. Some of the ways that it affected their ability to support the children were by increasing their understanding of the child, providing new strategies to try out, and



planning for future schooling.

- School staff identified a lot of progress made by the children such as being able to follow the rules and routines of school, transitioning back to classrooms, effectively using the tools and strategies they learn, ability to verbalize and being better able to complete school work and tasks.
- Some of the main challenges that school staff said children were still facing were academic struggling (4), transitioning from individual support to a classroom setting (2), verbalizing concerns, defiance, problem-solving skills, and segregation from peers.

3. TEACHER FEEDBACK

A total of 19 surveys were completed by teachers, about specific assessments that children had completed.

- 8 of the assessments were psychological, 7 were on occupational therapy, and 4 were assessments on speech and language.

The assessment findings...	Responded positively (out of 19)
The assessment findings were shared in a way I could easily understand	12
The assessment gave me new insight into the child's actions and reactions in school	11
The assessment recommendations help me prepare academic work that better reflects the child's strengths and needs	8
I have noticed the child is more now engaged in school	7
I was able to ask questions and get clear answers about the assessment findings	8
The assessment findings helped me better connect with the child through classroom activities	7
The assessment findings were confusing	1

- Teachers said that receiving the specialized assessments was helpful to them as a teacher. Teachers said that assessments were helpful in developing programming for the child, and were helpful in better understanding the child. With 1 assessment, the teacher said that in the future they would like to see an in-class assessment.
- In assessments completed early in the year, teachers said that they did not receive any information about 4 assessments, and with many other teachers not knowing that there was a feedback meeting and were not included in discussions on the results.
- In assessments that were completed later in the year, teachers had more positive



feedback about being shared the information and being included in meetings.

- In 4 assessments, teachers said it would have been helpful to have the information earlier in the year.
- It was flagged that being able to speak directly to the assessors would improve the process.

4. PARENT FEEDBACK

A total of 14 surveys were completed by parents of children who completed the assessments.

- Of the children, 8 had completed psychological assessments, 6 had completed occupational therapy assessments, and 1 had completed the speech and language assessment.
- Most parents (12) received the results of the assessments in person at a meeting, 2 received the results by phone.

The assessment findings...	Responded positively (out of 14)
The assessment results were shared in a way I could easily understand	14
I was able to ask questions and get clear answers about the assessment	14
The assessment findings helped me understand my child's needs	14
I could apply the recommendations to our activities and routines at home	12
The assessment findings helped me to appreciate my child's strengths	11
The assessment gave me new insight into my child's behaviour	9
The assessment recommendations help me feel better prepared as a parent	9
I found the assessment findings confusing	1

- When asked about what worked well about the assessment process, 5 parents mentioned getting a greater understanding of their child and the needs that they have in order to be successful in school. 4 mentioned that the logistics of the assessment was helpful, such as having them completed at Carizon, that they were completed in a timely manner, and that the assessor was flexible and worked hard to meet the needs of the children. Some also mentioned that they appreciated how the results were explained to them and that they could ask questions.
- When asked about parts of the assessment they did not like, most parents (7) said



nothing. 1 parent said they would have liked an assessment that was a bit more in-depth, particularly having ASD be assessed in the assessment.

Has the assessment helped you in the following experiences as a parent...	Responded positively
I am able to make good decisions about what service my child needs.	13
I feel confident in my ability to help my child grow and develop.	13
When helping my child, I focus on the good things as well as the problems.	12
I am able to get information to help me better understand my child.	11
I have a good understanding of my child's needs.	11
I feel confident in my ability to help my child grow and develop.	11
I believe I can solve problems with my child when they happen.	9
I am able to get information to help me better understand my child.	9
I believe I can solve problems with my child when they happen.	7
When problems arise with my child, I handle them pretty well.	7
I know what to do when problems arise with my child.	7
I feel our family life is under control.	7

- When asked whether the assessment helped the parent develop their understanding and approach with their child, 9 said 'very much' and 5 said 'somewhat'.
- When asked whether the assessment helped their child in any way, most parents (9) said 'somewhat'. 4 parent said it very much helped their child and 1 said it did 'not really' help.
- When asked about what they were most proud of in their journey with their child, some of the responses from parents were that the child has grown so much over their time at Carizon, that they are doing better in school, that their communication and empathy skills for others have grown, and that they are happier and more confident.

KEY INFORMANT INTERVIEW REFLECTIONS

Six interviews were conducted with people representing the following professions: specialized assessors, teachers, clinicians and child and youth counselors. The interviews were approximately 30 minutes long and inquired about the impact the specialized assessments have had on work with children, the collaboration among members of the multidisciplinary teams and feedback and suggestions for moving forward with the assessments.

Strengths of the assessments

- **Increased understanding of the child**

Most interviewees said that although the assessments did not really change their



relationship with the child, as they had a close relationship to begin with, it did increase their understanding of the child. Specifically, they said it helped to understand the reasoning behind some of the child's behaviour, which informs them on which treatments might work. (3)

The assessments were also seen to help to educate the different people in the children's life, like parents and teachers, on issues faced by this population (2).

- **Better able to tailor interventions**

Some (3) mentioned that having the assessment results assisted in developing informed, tailored interventions for the child. Some also mentioned that **without the assessment trying out treatments often felt like 'a shot in the dark'**.

- **Advocating for resources for the child:**

Many said that having the assessment completed, which sometimes meant having a diagnosis, meant that advocating for a child to get into certain programs of access to helpful resources. Resources listed were both in school, like learning tools, and outside of school, like respite care for parents (3).

- **Informing mainstream schools:**

Once the children are no longer at Carizon and are in a mainstream school, it was said that these assessments will be very helpful to workers in mainstream schools in working with the child.

- **Revealed trauma.**

It was raised that sometimes the assessments raised histories that no one was expecting, such as trauma. Those working with the child had not been using a trauma-informed approach prior to the assessment, but having this information altered this approach.

- **Long-term themes:**

It was raised that in the future, if these assessments are done consistently, the team might be able to identify themes common among children at the school, and therefore implement interventions at the class level rather than only at the individual level.

It was believed that without this program, the children would most likely not get assessed, which would hinder school success.

Children' progress

Although many interviewees said that it is very early to be able to see any positive outcomes of the assessments, as some have had the results for under a month, they still indicated



positive results with the children who had used interventions that stemmed from the assessments.

- **Work meets the needs of the child:**

Some said that the work being assigned the child, and the way that they could complete the work was fitting to the children' level. They are therefore able to do the work as it is hard enough to be engaging but not too difficult to be frustrating.

- **Improved behaviour**

Some (3) mentioned children being much less defiant because of new interventions that had been suggested in the assessment results. Some of this behaviour included being happy at school, more willingness to do school work, and being more productive while at school. Some mentioned a drastic change in mood, such as being defiant and depressed before the assessment results were implemented to being happy and productive.

- **Benefit to family**

It was named that there was a positive impact on the children' family because interventions can be used in the home as well as at school, the family has access to more resources like respite services, and they have a greater understanding of their child. (2)

Collaboration with other workers on the team

There was some inconsistency in what interviewees' experiences in collaborating with other members of the team.

- Some said that communication was good because the collaboration and communication was already a large part of the work prior to the assessments, and therefore that culture continued.
- There was a lot of positive experience with feedback meetings. Those who had attended case meetings with parents, assessors, clinicians and sometimes teachers had positive feedback. They indicated that they benefited from having a meeting in person, and having the opportunity to discuss the findings and potential interventions. (3)
- Some also mentioned that, with so many people working on different aspects of a children' life there was a disconnect between workers sometimes. These interviewees said that this was especially the case with teachers, as they were not previously part of treatment planning and so keeping them informed was not a routine prior to the assessments. They noted it is important to keep the teachers informed, especially on issues like cognitive profile, working memory and expressive language.



- It was also raised that the communication with assessors was sometimes disrupted, with workers who are at the school often not knowing when the assessors were available. It was also said that there was no communication between assessors, which was named as important both for assessment results, consistency in completing assessments and for scheduling assessments.
- There were some examples of new partnerships that could arise from the assessments, such as working with programs and resources that the children have now been referred to, and collaboration between the onsite doctor and the assessors.

Recommendations for improving the assessment process

Many of the interviewees had suggestions on how to improve the process of assessing children and implementing treatment plans. A key caveat that came with many of these suggestions, however, is that the program is new and therefore a lot of suggestions, especially those involving coordination, are a result of establishing a routine in a new program.

- **Timeliness of conducting assessments:** Some interviewees (4) mentioned that the process took a long time between scheduling a time to assess a child to creating a treatment plan based on findings. It was suggested that this process should take less time.
- **Timing of conducting assessments:** It was suggested that assessments were completed earlier in the year (2). Since the children are in the program for 1 year and often the results of the assessment come in after 8 months of working with them, not giving the team a lot of time to implement interventions.
- **Implementation coordination:** It was mentioned that how the interventions were implemented was someone disorganized, between obtaining and setting up a classroom tool, and training the team and child to use it. It was suggested that there should be coordination or a set protocol distributing those tasks.
- **Consistent implementation of tools:** Treatment should be implemented consistently, as it was raised that sometimes a strategy is implemented immediately after the assessment but is forgotten after a few months.
- **Informing everyone of findings:** Having a face-to-face meeting with teachers was named many times as being very helpful and it was suggested that this continue. It was also suggested that teachers be a part of some meetings, for example those that are seminal or in cases where there has been a change in treatment.
- **Assessment coordination:** With many freelance assessors who are not in contact with one another or in frequent contact with school staff, some said there were scheduling issues or breaks in communication. It was suggested that a coordinator position be



developed to coordinate the assessors and ease communication between assessors and between the school (2).

- **Ongoing collaboration with assessors:** It was frequently suggested that there be a follow-up meeting involving the assessor which checks-in on intervention success (4)
- **Framework for determining who gets assessment:** Most children who are in this program should get an assessment of some sort, ideally all should. But there should be a formal process to getting kids an assessment, I don't know how it currently works but it should be the kids who need it most get it. Should be some form of discretion for determining assessment, some not appropriate referrals.