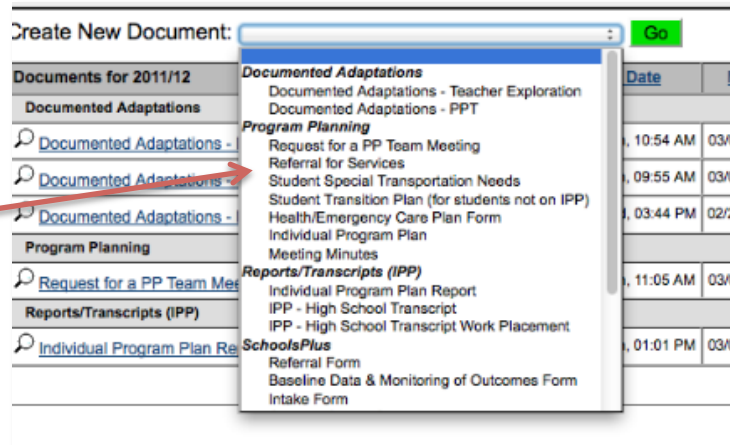1. After searching for a student, choose **Referral for Services** by opening the drop-down list of documents.

2. Click on **Go**, name the service in the **Label/Comment** box. (Ex. – AT, OT/PT, Psych, SLD, SLP, etc). Click **New**
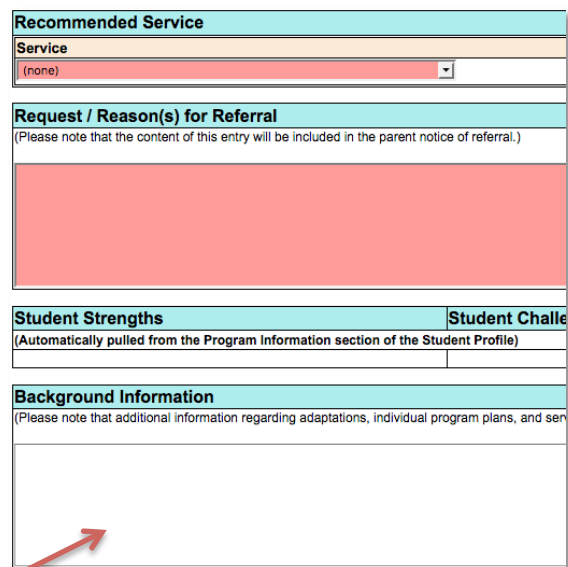
3. Choose **Referral Source** from the lookup link.

4. Choose the **Recommended Service**.

5. Complete the **Request/Reason(s) for Referral** section. (The service provider needs to know *why* the service will be important for a student.)

6. **Strengths/Challenges/Interests** are entered on the **Program Information** page in a student's **Profile.** (The S/C/I are automatically pulled when a Referral document is created. If the S/C/I are incomplete click on **Save, Done Editing**, complete the S/C/I and return to the Referral.)

7. Enter the applicable **Background Information** relating to the requested service. (See pages 3 and 4 of this document and consider all checkboxes related to the requested service.)

8. Click Save, Done editing.

9. The following message will appear to notify parent(s) of the referral in the form of a letter. **SSRSB schools notify parent(s) personally, regarding the referral, in lieu of this letter.**
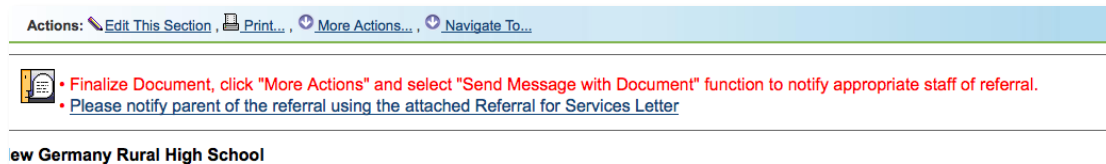
10. Under **Set Document** click S**tatus from Draft to Final.** Click **Accept**.
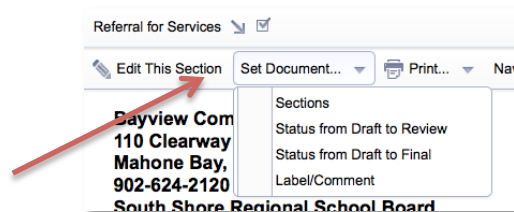
Notes:

➢ Each service can only have one open service at a time. For a new referral of the same service, the status of the existing one must be changed to **Service Discontinued** or deleted, if appropriate, by the SSRSB TIENET Administrator.

➢ The Service Provider updates Services Data information.

➢ A referral is only visible to the Service Provider when the document is set to Final.

➢ A report can be run at the school level to determine if there are unfinalized referrals. Go to *Reports | Standard Reports | Documents | Incomplete (Not Finalized) Service Referrals.*

Specify goal(s) of referral in the *"Request / Reason(s) for Referral"* section.

Note any additional diagnosis/disorder/supports, *not recorded in TIENET/PowerSchool*

Diagnosis/Disorder	**Early Intervention**	**Guidance**
IWK	**Mental Health/Rehab**	**Occupational Therapy/Physical Therapy**
Pediatrician	**Reading Recovery**	**SchoolsPlus**
Speech Language Pathology	**Other**	

Assistive Technology Services	❑ **AT used in the past, if applicable** **Area of Concern(s)** ❑ Physical, Communication, Hearing, Vision, Cognitive**,** Positioning and Seating, Writing, Reading, Math, Organization, Recreation, Activities of Daily Living **Setting for use of AT** ❑ Classroom, Learning Center, Other **Goal of AT in** ❑ **Reading:** Letter Recognition, Phonemic Awareness, Phonological Sequencing, Rhyming, Sound/Symbol Correspondence, Sight Word Recognition, Background Knowledge, Fluency, Motivation, Vocabulary, Comprehension, Memory ❑ **Writing:** Fine Motor Skills, Visual Skills, Organization and Attention, Written Expression / Mechanics Skills, Spelling Skills ❑ **Math:** Number Sense, Problem Solving, Reasoning, Computation, Geometry Spatial, Measurement, Patterns and Relationships, Fractions and Decimals, Word Problems ❑ **Classroom strategies utilized, to date, to address the issues above** ❑ **Available technology for student use, within the school setting**
Occupational Therapy/ Physical Therapy Services	**Fine motor/Handwriting** ❑ Functional fine motor/Activities of Daily Living/Handwriting impacting participation in school ❑ Continued assessment /intervention from previous years ❑ Program/Supports currently in place **Behavior/ Sensory** ❑ Safety risks ❑ Sudden decline resulting in crisis ❑ Self regulation/behavior needs ❑ Formal/Informal supports in place **Gross Motor/Coordination** ❑ Sudden decline/change resulting in crisis or post surgery ❑ Multiple physical needs ❑ Needs impacting meaningful participation in school/access **Transfers/Equipment** ❑ Need for equipment/assessment to attend school ❑ Skin integrity issues ❑ Safety risks ❑ Training required for staff

School Psychology Services
 	
(Behavior Consult/ Support or School Psychology)
	Nature of the concerns
	  ☐ Experiencing difficulty with meeting grade level outcome
	  ☐ Behavioural difficulties
	  ☐ Emotional/social difficulties
	
	Service being referred
	  ☐ Behavior Consult
	  ☐ Psychological Assessment
	
	☐ **Interventions implemented, and not currently documented in TIENET**
	☐ (i.e. Resource, Behavior Support, Mental Health, Guidance, Math Intervention)
	
	☐ **Describe relationships with peers, teachers, etc.**
	
	☐ **Describe behaviors at school**
	☐ (i.e. socially isolated, active, restless)
	
	☐ **Medication at school/home**
	
	☐ **Details of Resource, Learning Centre, Behavior Support**

Specific Learning Disability Services
 	
(in TIENET as: Severe Learning Disability Services)
	*Document LD diagnosis and date in the Profile section of TIENET.
	
	Source of Assessment
	  ☐ School Psychologist Psycho-Educational Assessment
	  ☐ Private Psycho-Educational Assessment
	
	Location of Assessment
	  ☐ Uploaded to TIENET Confidential File
	  ☐ Filed in paper Confidential File
	  ☐ Report not yet received by the school
	    *Note: Contact LD Services when the report is received

Speech Language Pathology Services	**Language**
	  ☐ Difficulty understanding language
	  ☐ Difficulty using language to express thoughts or ideas
	  ☐ Difficulty with phonological awareness skills
	  ☐ Difficulty with social language/social interaction
	
	Speech
	  ☐ Mispronounces one or more sound(s), difficult to understand
	  ☐ Stutters
	
	Voice
	  ☐ Characteristics such as hoarseness, nasality, too low/high pitch
	
	Hearing
	  ☐ Known or suspected hearing loss