



REFERRAL TO COMMUNITY CARE ACCESS CENTRE/SCHOOL HEALTH SUPPORT SERVICES (CCAC/SHSS) FOR NURSING, OCCUPATIONAL THERAPY, PHYSIOTHERAPY AND NUTRITION COUNSELLING

Responsibility:	<i>Superintendent, Student Achievement & Well-Being (Special Education)</i>
Legal References:	<i>Education Act: Subsection 1(1)</i>
Related References:	<i>SES-06-CCA Referral to Community Care Access Centre/School Health Support Services (CCAC/SHSS)</i> <i>IS-98-QQ Students Continuing to School Health Support Services</i>
Revisions:	<i>April 2016</i>
Reviewed:	<i>April 2016</i>

1. Preamble

- 1.1 The following procedures provide guidelines and expectations for referring a student to Community Care Access Centre/School Health Support Services (CCAC/SHSS).

2. General

- 2.1 Nursing, Occupational Therapy, Physiotherapy and Nutritional Counselling are used to moderate the impact of student's disabilities on students' educational programs. Community Care Access Centre is the lead agency and contracts services from external agencies. Students referred to Community Care Access Centre/School Health Support Services (CCAC/SHSS) must have a medical condition of therapeutic need, which requires the services of a nurse, physiotherapist, occupational therapist or registered dietician.
- 2.2 Students must also have a valid Ontario Health Card Number and would need to be registered or attend school under the jurisdiction of the Ministry of Education, as defined in the Education Act – subsection 1 (1).

3. Procedure

- 3.1 School discusses the student at a school-based team where a description of needs is identified.
- 3.2 The school obtains parent/legal guardian permission to refer the student to CCAC/SHSS.
- 3.3 If a CCAC/SHSS referral is deemed appropriate, school staff and parents/legal guardians complete the *Referral to Community Care Access Centre/School Health Support Services (CCAC/SHSS)*, form SES-06-CCA, including a description of the concerns.

- 3.4 Both school principal and the parent/legal guardian signatures are required on the referral form.
- 3.5 The original form should be sent to CCAC/SHSS, 800 King Street West, Kitchener, ON, N2G 1E8. Schools may also fax the referral to CCAC/SHSS at 519-883-5555.
- 3.6 Copies of the original form are made for the school and parents/legal guardians. One copy of the referral form can be sent to the parents/legal guardians and another copy placed in the Documentation File of the student's Ontario Student Record. If the referral form is faxed, the original should be placed in the Documentation File.
- 3.7 For Occupational Therapy referrals, schools should complete the detailed questionnaire/checklist* and include a copy with the referral form. *For students with fine motor issues **only** a copy of the Fine Motor Screening tool* should accompany the Occupational Therapy referral.*
- *All questionnaires, checklists and screening tools are available in the CCAC/SHSS referrals packages or through the CCAC/SHSS website at www.ccac-ont.ca