



Regional Assessment and Resource Centre, Queen's University
Mackintosh-Corry Hall, Suite B100
68 University Ave, Kingston, ON K7L 3N6



Dear Parents/Guardians:

Thank you for your interest in the Successful Transition from Elementary to Post-Secondary (STEPS) program offered by the Regional Assessment and Resource Centre (RARC) at Queen's University. STEPS is a program for students with neurodevelopmental conditions affecting learning (including learning disabilities and ADHD). Applications to the STEPS program are assessed during the Grade 7 year, and programming commences in the fall of Grade 8 and continues until the student attends Grade 9.

Our experience of over 10 years running this program has taught us that by providing students, their parents, and teachers with a deeper understanding of the student's learning profile and challenges, it increases the chances of students succeeding in secondary school and beyond.

There is no cost for the intervention sessions. However, all students need a recent psychoeducational assessment to participate in this program. If you do not have a recent one, RARC will schedule one. The cost is \$2000, and we offer flexible payment options over a 2-year period. Please see the attached Financial Contract form for full details.

To hear from former students and parents, click on [Steps Testimonials](#).

STEPS Virtual Information Zoom Sessions will run on:

Thursday, November 2nd, 2023, at 6:30 pm-7:30 pm; and
Wednesday, January 17, 2024, at 6:30 pm – 7:30 pm
[Click here to access the Zoom Meeting Link](#)

For Students Accepted into STEPS, the Program Provides:

- An updated psychoeducational assessment
- Student intervention sessions focusing on self-advocacy and self-esteem
- Parent training sessions
- Summer high school transition program (includes assistive technology training)

Eligibility Requirements:

- Must apply for the program during the fall/winter of their Grade 7 year
- Have impairments in academic achievement
- Be previously diagnosed with a relevant disability (e.g., a learning disability, ADHD), or have a history that strongly suggests a relevant disability
- Have average intellectual functioning, based on previous assessment findings

Acceptance in the STEPS Program:

There is a limited number of spaces in the STEPS program each year. Applications will be screened and scored to determine acceptance into the program. Families can expect to hear whether their child is accepted by March 31, 2024, or sooner.

The Psychoeducational Assessment

Traditionally, each student who is accepted to the program will receive a psychoeducational assessment in Grade 7, unless they have had a comprehensive assessment in the past two years. Having an updated assessment is a critical part of this program, and incredibly valuable to starting Grade 9 with up-to-date learning and accommodation information in place for students. The detailed and comprehensive assessment consists of cognitive and academic testing by RARC practitioners.

Participation in the assessment involves the following elements:

- Completion of a background questionnaire and writing sample
- Submission of relevant academic and clinical records
- Virtual intake interview and consent appointment (1 hour)
- Attendance of student at **2 in-person testing sessions of approximately 3 hours each**
- 1-hour virtual feedback meeting with the family

All testing sessions take place in-person during office hours. Following the testing and feedback meeting, parents will be given written reports which they may choose to share with the school. The cost of the psychoeducational assessment is \$2000, with flexible payment option over a 2-year period.

Intervention Sessions/Parent Training Sessions

Students will participate in group intervention sessions in Grade 8 with the focus on increasing self-esteem and self-advocacy skills. Parents will also participate in sessions to increase their knowledge of learning differences and develop specific strategies to aid their child. The first series of sessions will take place in October/November of the student's Grade 8 year and the second series of sessions will take place in May. Each series includes up to four in-person evening sessions. These are held on Queen's campus.

Summer Program

Students will attend a one-week camp to prepare them for the transition to high school. This camp is typically run at a Kingston area high school. During this week, students will explore a variety of AT (assistive technology), practice the rotary system, hear from current high school students, and celebrate their journey through the STEPS program.

Mandatory Participation

Full participation of all aspects of the program is mandatory, and families who withdraw/skip programming sessions will be charged a fee. For this reason, we require all participants to provide an undated cheque for \$200 upon their child being accepted into the program. All cheques will be returned (uncashed) at the end of the 2-year program. Should a family withdraw during the program, we will cash the cheque at that time.

Interested in Applying to the STEPS Program

Please fill out the **Registration Form, Background Information Questionnaire** and **Financial Contract** (if previous assessment is more than two years old) and return these to your child's Special Education teacher along with the **Teacher Contact Form** as soon as possible. We are accepting application packages until March 1, 2024. To prepare for the assessment, the practitioner needs to have **all specialist assessment reports** (psychoeducational, occupational therapy, speech language, psychiatric, etc.), **report cards from each year**, and the **most current Individual Educational Plan**. With your permission, school personnel will copy the above documents and send them to RARC staff.

You can choose to send in the Registration Form, Background Information Questionnaire, and Financial Contract directly, rather than going through your child's school. Please refer to the Teacher Contact Form to see what additional documentation is required with your registration package. Please send complete applications.

Completed Registration Packages – Methods of Delivery to RARC

- Email to steps@queensu.ca (for security and confidentiality, please password protect all files, or send securely through [SecureDocs.ca](https://www.securedocs.ca))
- Fax to 613-533-6564
- In-person during RARC operating hours (Monday-Thursday 9:00 am-12 pm or 1 pm-4:00 pm).

Program capacity is limited. Applications will be reviewed as they are received, and families will be notified of their application status no later than March 31, 2024. Some families may hear earlier than March 31. Families who are accepted into the program will be scheduled for an intake interview (virtual meeting over Zoom) to discuss the program and answer any questions about participation.

Please contact our Program Coordinator at steps@queensu.ca if you have any questions.

Sincerely,



Dr. Beth Pollock, Ph.D., C.Psych
Clinical Director, Regional Assessment and Resource Centre



Successful Transition from Elementary to Post-Secondary (STEPS) Registration Form

To be completed by the parent/guardian

Student

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: _____ Pronouns: _____

Elementary School: _____ Current Grade: _____

Expected High School: _____

Parent/Guardian 1 (primary contact)

Name: _____ Relationship to child: _____

Home #: _____ Work #: _____

Cell #: _____ Email Address: _____

Preferred method(s) of contact:

Home Phone Work Cell E-mail

Home address:

Parent/Guardian 2

Name: _____ Relationship to child: _____

Home #: _____ Work #: _____

Cell #: _____ Email Address: _____

Preferred method(s) of contact:

Home Phone Work Cell E-mail

Home address: *Same as above*

Child is living with:

- Both parents Mother Father
 Legal Guardian Other (specify) _____

Status of parents' relationship:

- | | |
|--|--|
| <input type="checkbox"/> Married (How long? _____ years) | <input type="checkbox"/> Never married |
| <input type="checkbox"/> Separated (Child's age at separation _____) | <input type="checkbox"/> Divorced (Child's age at divorce _____) |
| <input type="checkbox"/> Single | <input type="checkbox"/> Widowed |

Please indicate whether there are stepparents:

- Stepparent (Name: _____)
- Stepparent (Name: _____)

Is your child adopted? No Yes (If yes, age at adoption _____)

In the case that the parents/guardians cannot be reached – Emergency Contact:

Name: _____ Phone #: _____

Please return the completed registration form to the Special Education teacher, for them to forward to the STEPS Coordinator. You can also choose to send in the registration package directly, rather than going through your child's school. Please review the list of required documentation on the Teacher Contact form to see what additional documentation is required with your registration package.

Completed packages may be sent to us through the Secure Docs system to steps@queensu.ca. If you would like to drop the package off in-person, please only do so during operating hours: Monday - Thursday between 9:00 am-12 pm or 1 pm-4:00 pm. If you deliver in-person, please do not leave outside the office doors. Packages must be handed over to a staff member at RARC directly. You may also wish to send them directly by fax to 613-533-6564. We kindly ask that you let us know via email which method of delivery we can expect your documents to arrive by.

We will accept applications until March 1. Due to a limited number of spaces, not all students who meet eligibility requirements will be accepted into the program. Participants are asked to provide a \$200 undated commitment cheque, which will be returned uncashed once they complete the program. If a family decides to withdraw during the program, the cheque will be cashed at that time.

I support my child's participation in the program for the 2023-2025 school years. I agree that copies of my child's IEP, report cards, assessment reports may be copied from the Ontario Student Record (OSR) and provided to personnel at the Regional Assessment and Resource Centre at Queen's University.

Parent/Guardian Signature: _____ Date: _____

Background Information Questionnaire

The space provided for your answers to questions 1 through 28 is limited. If you require more space, please use the last page in this questionnaire to add additional details that you wish to include.

1. Who is completing this form? What is your relationship to the student?
2. What problems or questions have caused you to seek help for your child at this time? What would you like to gain out of your child's participation in our program?
3. What interventions/strategies have you already used to address these problems? What was the outcome?

Academic

4. Current teacher (if multiple, who knows the student the best):
5. Past schools attended:
6. Please describe any academic challenges experienced at school.
7. Please describe any behavioural or psychological difficulties experienced at school.

8. Has your child been previously assessed?

Yes No

If yes, when and by whom?

Medical/Developmental

9. Were there any abnormalities in terms of pregnancy or delivery?

10. Were motor or language developmental milestones attained within normative expectations? If not, what delays were observed?

11. Has your child received occupational therapy, speech and/or language therapy, or physiotherapy? If yes, please indicate what they received treatments for and when.

12. Have any major injuries been sustained (including concussion)? Yes No

Details (if yes):

13. Has your child experienced any major illnesses? Yes No

Details (if yes):

14. Have there been any surgeries or hospitalizations? Yes No
If yes, when and for what condition?

15. Are there any issues with vision or hearing? Please explain: Yes No
If yes, please explain:

16. Does your child take any regular medications? If so, what medications, at what dosages, and for what conditions? Please fill in the table below.

Medication	Dosage	Condition

17. Are there concerns regarding sleep or appetite?

Family/Social

18. Please indicate place of birth and primary language spoken within the home. Are there any other languages spoken within the home?

19. Family composition – who lives in the home? Please note the ages of any siblings. If applicable, what are the current custody and access arrangements?

20. Please list the current educational status (such as completed high school, completed a college diploma or university degree, completed graduate studies, etc.) and current job title for biological parents.

Parent	Educational Status	Current Job Title

21. Has anyone in the immediate or extended family experienced learning challenges, attentional issues, mental health difficulties? If so, who and what difficulties have they experienced?

22. Please describe any social/interpersonal challenges experienced.

23. Please list any extracurricular activities.

Psychological/Behavioural

24. Please check all that apply regarding your child:

- | | |
|--|--|
| <input type="checkbox"/> Depression/sadness | <input type="checkbox"/> Mean to people |
| <input type="checkbox"/> Changes in eating or sleeping habits | <input type="checkbox"/> Steals |
| <input type="checkbox"/> Feelings of worthlessness, hopelessness, or low self-esteem | <input type="checkbox"/> Lies easily |
| <input type="checkbox"/> Suicidal ideation or behaviours | <input type="checkbox"/> Skips school |
| <input type="checkbox"/> Anxiety/nervousness | <input type="checkbox"/> Rapid mood changes |
| <input type="checkbox"/> Excessive fears or phobias | <input type="checkbox"/> Euphoria (feel on top of the world) |
| <input type="checkbox"/> Nightmares | <input type="checkbox"/> Visual or auditory hallucinations |
| <input type="checkbox"/> Recurrent intrusive thoughts | <input type="checkbox"/> Toileting accidents |
| <input type="checkbox"/> Poor frustration tolerance | <input type="checkbox"/> Inattentive |
| <input type="checkbox"/> Explosive anger | <input type="checkbox"/> Easily distracted |
| <input type="checkbox"/> Aggressive/violent | <input type="checkbox"/> Restless/difficulty sitting still |
| <input type="checkbox"/> Destroys other people's property | <input type="checkbox"/> Impulsive |
| <input type="checkbox"/> Mean to animals | <input type="checkbox"/> Exhibits sexually inappropriate behaviour |
| | <input type="checkbox"/> Other: |

26. Please describe any major family or parental stressors or events that may have impacted your child in the past or that may impact him or her now (please give details, include incidents you feel were traumatic for this particular child, though they might not have been for another child):

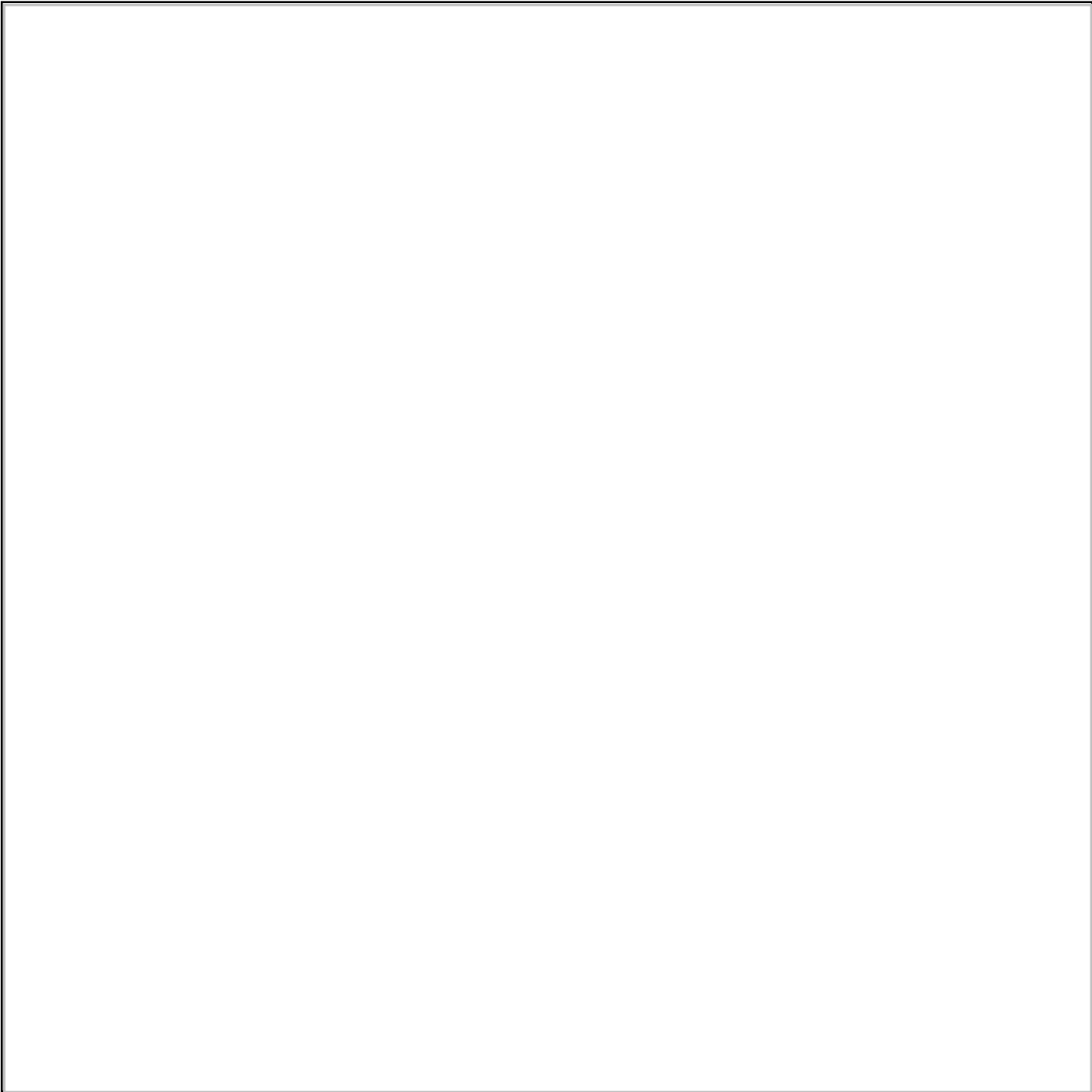
27. Please list any previous experiences with Psychologists, Psychiatrists, Social Workers, and/or Counselors:

Therapist Name	Dates of Treatment	Details

My child has never had psychological therapy or counseling.

28. Please note any additional concerns or information that you feel is pertinent to know regarding your child that has not been covered in this questionnaire:

Writing Sample. Please have your child hand write a short story or 'essay' on a topic of his or her choice (i.e., favourite sport, video game, activity, etc.). He/she may write about anything, but it must be printed or written in cursive (i.e., not typed) on this page. Click on the box below to insert a picture file of the sample.



Additional Space. Please use this space to add any comments or information for questions 1-28 as you need (if you did not have enough space with what was provided). Please indicate the question number(s) your comments are in relation to.