

## **Diagnostic Assessments: Understanding & Operationalizing Assessment Outcomes**

### ***Week 5***

#### ***Referral***

This section usually contains information about who referred the individual for assessment and why (see the two examples below)

#### **Sample Referral: Miguel**

**Miguel** is a second-year law student who self-referred to the Student Psychological and Testing Center. He presented with concerns about a slow reading rate that is affecting his ability to keep up with course work and to complete exams within the allotted time.

#### **Sample Referral: Christiana**

**Christiana** was diagnosed with ADHD in 2007 when she was 14 years of age. At her initial appointment with the disability services provider, here at the University, it was recommended that she be re-evaluated to update her documentation. Re-assessment was recommended because while a cognitive battery and an achievement battery were administered and reported on in 2007, no sustained attention assessment was administered. The current assessment made it possible to observe Christiana before, during and after a sustained attention test and to evaluate how her attention disability impacts her cognitive processing and her academic abilities.

Faculty (elementary, secondary and postsecondary) are constantly watching students process information – they know better than most when a student “just isn’t getting it.” In fact, faculty have a 95% “hit rate” when they refer a student for a diagnostic assessment; counselors and academic advisors are much less accurate than faculty. But then, you’d expect that because they aren’t “teaching” the student on a regular basis. Parents and other family members are right about learning problems the majority of the time, but aren’t usually right about where the “glitch is in the learning process” for their student. As far as students referring themselves for a diagnostic assessment – it just depends on how much schooling the student has already completed, whether or not he/she has been out of the educational pipeline for more than five years, whether or not English is a second language, and the individual’s background.

Consider the Referral section of the psychoeducational testing report as you would the “preface” to book. It can be brief, long or somewhere in between, but it will always be the “build up” for the rest of the report because it addresses “why” the testing was being undertaken. Even psychoeducational testing reports that contain very little useful information, will state who referred the individual for testing!

#### ***Background Information***

In the Background Information section, medical information (including developmental information), biographical information, educational information, social information, and information about the individual’s family, is found. (see the two examples below)

### **Sample Background Information: Patsy**

Patsy, a twenty-nine year old, Caucasian, female, is a student in the micro-computer specialist program.

Patsy recalls participating in resource classes from the third grade through high school...she claims she got bored very quickly in high school and that she spent most of her time daydreaming in class.

At the beginning of the 2013 spring semester, Patsy was enrolled in nine hours of classes. However, she has since dropped one of her courses (Painting I). She is still attending her Intro to Computers and Information Systems class and her Intro to DOS class.

Patsy explained that she enjoys these classes very much. While the DOS class is the most challenging one for her, she's still making progress in the class.

She explained that she learns best by simply experimenting with the computer and asking questions. She stated that she has not actually read the textbook yet, but has managed to stay ahead of the class with her hands-on activities. When asked why she hadn't attempted to read the book, she explained that she can't learn that way. She further stated that the book didn't make sense to her, that reading was boring, and that she needs to manipulate the keyboard to see the effects on the screen to learn.

### **Sample Background Information: Christiana**

Christiana is a twenty year-old, environmental science major at St. Mary's University; she is a freshman with a current GPA of 2.47.

Christiana was the product of a 37-week pregnancy. Infancy was normal with the exception of a six week period of crying in the evenings. Other developmental milestones were not reported, but she walked at one year old.

Christiana was referred in 2007 for testing by her mother. Her mother had referred her because Christiana had significant trouble staying focused and organized. She also had difficulty keeping up with assigned school work and required a fair amount of constant supervision. Even when Christiana completed her homework, she tended to lose it on the way to school, which caused massive point deductions. It was also easy for Christiana to feel overwhelmed and then she would have a difficult time getting started on her work because the task seemed so large.

Christiana shared that she uses several techniques when studying. First, she prefers to study in a quiet environment, with soft music in the background. Second, she uses mnemonics to help her remember information. She also goes to tutoring and when she is working on math problems she usually needs the tutor to sit with her so she can ask questions as she works through the problems. In addition, she utilizes a note-taking system to take notes in class and a daily planner to ensure that she doesn't forget anything she needs to complete.

The studying techniques she indicated that she didn't use on a regular basis include: (1) long-term planning, (2) preparing and utilizing a regular study schedule, (3) having and utilizing an assignment notebook, (4) creating margin notes when reading, (5) highlighting while reading

and/or studying, (6) outlining, (7) utilizing flashcard, and (8) conducting a timely review of her notes.

Christiana indicated that she has a short attention span, gets distracted and anxious and is fidgety, in class (especially during lectures). She stated that she gets anxious when thinking about and/or when taking tests.

Christiana, shared that on a daily-basis, she has the most difficulty with: (1) concentrating during class lectures or when studying, (2) managing time, (3) procrastinating, (4) beginning assignments, (5) being prepared for class and/or tests, (7), concentrating when studying, (8) meeting new people, and (9) talking to instructors. She also shared that she reverses letters and/or numbers and that she tends to cram for tests.

Christiana almost always understands the directions on tests and she utilizes a multi-modal approach when taking tests: she eliminates incorrect answers when answering multiple-choice, true/false, and matching questions, skips difficult questions, outlines answers to essay questions and she uses mnemonics to remember information. She also indicated that she prefers multiple-choice, matching, short answer and essay questions on tests.

Christiana feels that her learning strengths are in writing essays, memorizing vocabulary and in completing projects; her learning weaknesses are in being focused enough to start studying and being able to study more than one subject at a time.

Background Information is one of those areas in the psychoeducational testing report where one should find rich details of the student's medical history, educational history, psycho-social history, etc., but usually doesn't. The purpose of the Background Information section is to let the "reader" know about all the other aspects of the student (that could interfere with learning) that have been researched and rejected as factors contributing to the student's problems in the educational environment.

### ***Activity***

This week you'll be answering some questions about J.T.'s psychoeducational testing report. Please be sure to upload your answers to the questions by Saturday.

### ***Reminder***

Don't forget to address the Week 5 Discussion Question.