BEST PRACTICES IN PSYCHOEDUCATIONAL ASSESSMENTS AND REPORTS

Tiffany Christine Goodson
B.A., University of California, Berkeley, 2002
M.A., California State University, Sacramento, 2009

Renee Teresa Rodriguez
B.A., University of California, Davis, 2007
M.A., California State University, Sacramento, 2009

PROJECT

Submitted in partial satisfaction of the requirements for the degree of

SPECIALIST in EDUCATION

in

SCHOOL PSYCHOLOGY

at

CALIFORNIA STATE UNIVERSITY, SACRAMENTO

FALL
2010
BEST PRACTICES IN PSYCHOEDUCATIONAL ASSESSMENTS AND REPORTS

A Project

by

Tiffany Christine Goodson

Renee Teresa Rodriguez

Approved by:

______________________________, Committee Chair
Stephen E. Brock, Ph.D.

______________________________
Date
Tiffany Christine Goodson
Students: Renee Teresa Rodriguez

I certify that these students have met the requirements for format contained in the
University format manual, and that this project is suitable for shelving in the Library and
credit is to be awarded for the project.

___________________________, Graduate Coordinator   _________________
Bruce A. Ostertag, Ph.D.   

Department of Special Education, Rehabilitation, School Psychology, and Deaf Studies
Abstract

of

BEST PRACTICES IN PSYCHOEDUCATIONAL ASSESSMENTS AND REPORTS

by

Tiffany Christine Goodson

Renee Teresa Rodriguez

The authors collaborated and shared equal responsibility in all aspects of the development of this project, which reviews current research on best practices for school psychologists completing psychoeducational assessments and reports. Practicing school psychologists must be aware of changes in law and familiar with accepted best practices for following the law. For school psychologists new to the field it can be challenging to remember the various assessment and report guidelines, and experienced school psychologists may not be current in their knowledge of legal and ethical practices. The goal of this project is to collect current information on the best practices in conducting psychoeducational assessments and writing reports, and prepare a training workshop to present the information to practicing school psychologists. Referral guidelines and protocols for conducting legally defensible assessments are based on a review of federal law and psychoeducational literature. Best practices in report topics include information to include in the report, considerations for recommendations, strength-based writing, readability, ethical considerations, and the presentation of results. Research guiding best practice is widely cited, emphasizing the ideals of conducting a comprehensive psychoeducational assessment and writing a report that leads to a well-informed decision about a child’s eligibility for special education and their access to an appropriate education.

The prepared project is a 3-hour training workshop with a presenter’s manual, slides, and presenter notes. Any school psychologist can train a target audience of school psychologists working in schools. Workshop participants will evaluate a sample report. Participants will better understand legal and ethical challenges in conducting assessments and writing reports.

__________________________, Committee Chair
Stephen E. Brock, Ph.D.
ACKNOWLEDGEMENTS

First and foremost we offer our sincerest gratitude to our supervisor, Dr. Stephen E. Brock, who has supported us throughout our most recent educational careers. His patience and knowledge have allowed us the ability to work in our own way. We attribute attaining the degree of Educational Specialist to his encouragement and effort. We appreciate and respect Steve’s guidance throughout the project. We also wish to acknowledge Dr. Catherine Christo and Dr. Leslie Cooley, whose knowledge and expertise in school psychology have helped form us into knowledgeable professionals in the field.

We also owe our deepest gratitude to our loving and encouraging families. To our parents and siblings for their unending support for all of our studies in education, and especially to our fiancées, John Meissen and Thomas Bielawski. We attribute the completion of our Education Specialist degrees and school psychologist credentials to our family’s continued support and unending patience. This project would have not been possible without the all of the encouragement we have received.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgments</td>
<td>v</td>
</tr>
<tr>
<td>List of Tables</td>
<td>vii</td>
</tr>
<tr>
<td>List of Figures</td>
<td>viii</td>
</tr>
<tr>
<td>Software Specifications</td>
<td>ix</td>
</tr>
<tr>
<td>Chapter</td>
<td></td>
</tr>
<tr>
<td>1. INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>Background of the Problem</td>
<td>2</td>
</tr>
<tr>
<td>Statement of the Research Problem</td>
<td>3</td>
</tr>
<tr>
<td>Purpose of the Project</td>
<td>5</td>
</tr>
<tr>
<td>Limitations</td>
<td>5</td>
</tr>
<tr>
<td>Statement of Collaboration</td>
<td>7</td>
</tr>
<tr>
<td>2. LITERATURE REVIEW</td>
<td>8</td>
</tr>
<tr>
<td>Psychoeducational Assessments</td>
<td>8</td>
</tr>
<tr>
<td>Psychoeducational Reports</td>
<td>27</td>
</tr>
<tr>
<td>Summary</td>
<td>45</td>
</tr>
<tr>
<td>3. METHODOLOGY</td>
<td>47</td>
</tr>
<tr>
<td>4. RESULTS</td>
<td>49</td>
</tr>
<tr>
<td>Summary</td>
<td>49</td>
</tr>
<tr>
<td>Workshop Objectives</td>
<td>51</td>
</tr>
<tr>
<td>Recommendations</td>
<td>52</td>
</tr>
<tr>
<td>Appendix A. Presenter’s Manual</td>
<td>53</td>
</tr>
<tr>
<td>Appendix B. Workshop Handout</td>
<td>55</td>
</tr>
<tr>
<td>Appendix C. Workshop Slides</td>
<td>57</td>
</tr>
<tr>
<td>References</td>
<td>127</td>
</tr>
</tbody>
</table>
TABLE

1. Table 1 Text from IDEA (2004): Section 614............................................ 15
<table>
<thead>
<tr>
<th>FIGURE</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Figure 1 Steps in the Assessment Process (Sattler &amp; Hoge, 2006)</td>
<td>27</td>
</tr>
</tbody>
</table>
SOFTWARE SPECIFICATIONS

The project appendix includes presentation note pages designed to be used with slides in a workshop presentation. Slides should be viewed using Microsoft® PowerPoint software.
Chapter 1

INTRODUCTION

School psychologists play an important role in the special education process. Federal law guides procedures for assessment prior to a child’s entry into special education. These psychoeducational evaluations include information about a child’s mental processes and emotional state and how these affect educational performance. Knowledge of how psychological processes can influence school outcomes makes school psychologists unique and important contributors in the identification of students with disabilities.

Despite their important role, it can be difficult for school psychologists performing psychoeducational assessments and writing reports to determine best practice guidelines. School psychologists are legally and ethically required to assess students for disabilities amid often confusing and even contradictory factors. Legal requirements for school psychologists change with each revision or addition to federal or state educational laws or their regulations. New court cases provide case law which can be difficult to interpret, and professional opinions may differ between lawyers and school psychologists (Prasse, 2008; Yell, 2006). Familiarity with accepted best practices in the field and awareness of updates in law are necessary for practicing school psychologists. Graduate training programs provide current expertise in these areas. However, practicing school psychologists may not have the time or resources required to remain experts in best practices. Training workshops are necessary provide current information to school-based professionals.
Background of the Problem

Federal law addressing the education of children with disabilities was first passed by the United States Congress in 1975. At that time Public Law (PL) 94-142 was called the Education for All Handicapped Children Act. The law has been changed and reauthorized several times, most recently as PL 108-446 or The Individuals with Disabilities Education Improvement Act of 2004 (IDEIA; referred to by the law’s prior name The Individuals with Disabilities Education Act or IDEA). Part B of IDEA, Assistance for Education of All Children with Disabilities, spells out requirements for states and school districts in providing special education and related services to students with disabilities between the ages of 3 and 21. Two of the requirements in IDEA are school personnel must evaluate students prior to determining if they require special education services and prepare a written report of the assessment findings.

Psychological assessments are one of the core activities of a professional psychologist. Clinical and psychoeducational evaluations are defined as “a set of assessment procedures administered and interpreted to obtain information about the child’s development, learning, memory, academics, behavior and mental health” (Sandoval, 2009, p. 535). Typically, school-aged individuals are referred for assessment due to specific concerns associated with academic achievement and/or school performance. Different assessment procedures or combination of procedures are used depending upon the referral questions and presenting problems, with careful consideration of cultural differences and possible impairments in speech and language, hearing, vision and motor development.
Both educational and school psychologists are relied upon to perform psychoeducational assessments for students and create psychoeducational reports summarizing their assessment data and findings. The evaluation is conducted using various assessment methods which may include: norm-referenced tests, criterion-referenced tests, screeners/checklists, self-report ratings, observation, and review of history and development. At the very least, psychoeducational evaluations generally contain measures of aptitude and ability including tests of intelligence and other cognitive functions. Additional assessments may be conducted to explore the student’s neuro-psychological functioning, speech and language, visual-spatial perception, visual-motor integration, achievement, or attention and concentration. Scales measuring social and emotional skills are also weighted in the assessment process. Finally career or vocational aptitude may also be considered for children over the age of fourteen (Burns, Jacob, & Wagner, 2008).

Statement of the Research Problem

Educational and school psychologists are often relied upon by school districts, child advocates, and parents to provide “expert” opinion in educational due process proceedings (Walsh, 2007). This means that the psychologist must have the education, experience, training and knowledge to render an expert opinion regarding the appropriateness of a student’s program and placement.

Psychoeducational evaluations and the ability to provide expert testimony are critically important to meeting the needs of children who require special education services. Psychologists who are well trained, current in their knowledge of special
education research, aware of best-practice guidelines for assessment and intervention, and who conduct comprehensive, reasoned “process assessment” are invaluable to the process of obtaining appropriate educational programs and placements for children with special needs (Groth-Marnat, 2009). Alternatively, psychologists who are not comprehensive and confident in their testing procedures and delivery may find themselves in a compromised position under IDEA. Similarly, Salvia, Ysseldyke, and Bolt (2010) point out the importance of the assessment process:

Educational assessments always have consequences that are important for students and their families. We can expect that good assessments lead to good decisions—decisions that facilitate a student’s progress toward the desired goal (especially long term) of the student becoming a happy, well-adjusted, independent, productive member of society. Poor assessments can slow that progress, stop progress, and sometimes reverse progress. (p. 17)

Knowing the procedures and guidelines necessary in order to conduct assessments which help students and are legally defensible is an important part of being a successful school psychologist.

Existing research guides most aspects of psychological assessment. However, research on the psychological report itself is scarcer. As a result, clinicians usually rely on things such as precedents, sample reports, folklore, habits, and intuition when writing, leading to a vast array of ideas and forms of psychoeducational reports (Groth-Marnat, 2006). This project has been organized to present a summary of what is known regarding research and issues related to psychological assessments and reports. The information presented here will be the basis of a training workshop intended for school psychologists. The intended result is that clinicians will have more solid, empirically based guidance on how best to write their reports.
Purpose of the Project

This study aims to help the reader better understand the psychoeducational evaluation process, from the pre-assessment procedures through the reporting of the assessment results to the Individualized Education Plan (IEP) team. The primary purpose of the project is to discover current research relevant to this topic as it relates to psychoeducational assessments and reports, and best practices under IDEA. Secondary purposes include ideas for measurable objectives and possible ideas to consider in the development of a comprehensive evaluation.

Information in this project has been developed into a three hour training workshop for school psychologists. The workshop is designed for an audience of experienced or new school psychologists. A manual and presentation guidance allow the workshop to be delivered by any trained school psychologist. It is hoped that through the development of this project readers or workshop attendees will obtain the basis for what is considered sound and legally defensible psychoeducational assessment and report writing procedures.

Limitations

The current work focuses on the requirements of federal law as outlined in IDEA and its regulations. It is considered best practice and indeed necessary for individual practitioners to be familiar with the laws, regulations and court decisions of the state and jurisdiction in which they practice. Additionally school psychologists working in public schools may be required to follow preferred methods, procedures or formats which their Special Education Local Plan Area (SELPA) or district may have for psychoeducational
assessments and reports. The current research is not intended to replace any directives or laws regarding assessment and report writing. Furthermore, new technology, research, and development of diagnostic criteria require constant reevaluation of past practice. When psychological reports were initially instated within the school environment, even dating back to the 1950’s, a psychoeducational report was well defined in terms of what it should look like (Tallent & Reiss, 1959). However with the advent of lengthy and complicated federal and state educational codes, understanding current laws governing criterion of psychological evaluations has become daunting.

In addition, practitioners must be aware of the ethical guidelines put forth by professional organizations to guide practice. It is beyond the scope of this project to summarize these guidelines. The National Association of School Psychologists (NASP, 2000) and American Psychological Association (APA, 2010) each provide ethical guidance covering many aspects of assessments.

In an effort to research the psychoeducational assessment process as a whole, the authors encountered difficulty in obtaining a vast quantity of information. Due to the varying opinions and biases in report develop and production, there has yet to be thorough research conducted in this area. Additionally, research was found to be limited in due process case studies, especially those which affect all states. Higher court cases involving students in special education tend to center on questions of Least Restrictive Environment or appropriate education, not the specific assessment practices or reports. Although the reader may not fully agree with procedures and policies described
throughout the project, every effort was made to ensure each idea was based upon current research.

Statement of Collaboration

This project was developed collaboratively. Each co-author had equal responsibility in the research, collection, and data gathering. Subsequent titles and subtitles were divided amongst the two individuals to create a comprehensive project. All duties performed in the development of the project and training workshop were shared equally.
Chapter 2

LITERATURE REVIEW

Before a child can be placed in a special education program, IDEA requires qualified personnel to perform an evaluation of the student’s psychological and educational abilities and needs. Personnel must then prepare a written report to share assessment results with IEP team members and the student’s parents. This document reviews current literature in the school education field related to best practices in conducting a psychoeducational assessment and writing a psychoeducational report.

Psychoeducational Assessments

The assessment is the first step towards receiving services; Yell (2006) states “The evaluation of a student is an incredibly important part of the process that leads to the development of a Free Appropriate Public Education for a student” (p. 249). An assessment gathers information that can guide an IEP team in determining if a student will receive services.

*Purpose of Assessment*

The purposes of the assessment are to determine a) whether a child meets the legal requirements of a disability, b) if the disability leads the child to require special education and related services, and c) what areas of academic and functional need the student has that will need to be addressed by the IEP. For a student who is found to both have a disability and require special education services an IEP is written to best meet their specific needs.
IDEA defines 13 areas or criteria for special education eligibility; states may choose to alter or combine these categories. These categories are autism, hearing impairment or deafness, visual impairment including blindness, deaf-blindness, serious emotional disturbance, mental retardation, orthopedic impairment, specific learning disability, speech or language impairment, traumatic brain injury, other health impairment, and multiple disabilities. In addition children between three and nine years old can be identified with a general, non-specific developmental delay (Mandlawitz, 2007). The evaluation process will enable the IEP team to determine if the child needs special education and related services to succeed in school.

It is important to note that just because a child has a disabling condition he or she does not necessarily qualify for special education. For example, a child with a hearing or visual impairment that is correctable with a hearing aid or glasses may not be eligible since with the corrections they are able to hear or see as well as their peers. Similarly a child with a specific learning disability may have learned coping strategies or alternative methods that allow him or her to successfully access the curriculum. An assessment will help determine if a student is able to learn within the normal classroom environment without accommodations or modifications to the curriculum.

Assessment Referrals

IDEA (2006) requires schools to assertively look for children with disabilities in a process referred to as Child Find (34 C.F.R. § 300.111), which prevents school districts from not providing services to children by specifying that even if a child is not enrolled in a school, the district is responsible. However, this is not to say that all students will need
services or even that all students need to be evaluated. Generally when someone, such as a parent, teacher, or state agency personnel, believes a child may have a disability the referral is considered by a multidisciplinary team. Team members may include school administrators, general and special education teachers, and a school psychologist (Yell, 2006). Teams should first define the referral concern and determine what the referral source expects the team to accomplish. Sattler and Hoge (2006) state:

If you can’t identify these areas, you will have difficulty formulating an appropriate assessment strategy. If you understand the referral question and the referral source’s expectation about what you can and cannot accomplish, then you will begin the assessment on a firm footing. (p. 59).

Teams can consider existing data, including screening measures that were given to all students (even those given without parent consent for an evaluation; Mandlawitz, 2007). The team may decide on a course of action other than a special education assessment, for example recommending an intervention or asking for help from an outside agency or medical specialist (Sattler & Hoge, 2006).

According to Jacob (2008), a referral for special education assessment should never be made lightly. Testing will result in the child missing class time. Psychoeducational assessments are not infallible; there is a possibility for harm in misdiagnosing a child. Further, testing and diagnosis may reinforce learned helplessness and an external locus of control (i.e., students may believe that there is nothing they can do to succeed academically; Ormrod, 2008). Following an assessment if the child is placed in special education an IEP identifies and labels a child as having one (or more) of 13 disabling conditions. When a student receives services from a special education specialist the IEP team has decided the student is unable to succeed in a regular
classroom without additional services. The success rate of special education is unclear; achievement results among students receiving services vary widely. Students who have been identified as having a disability and are placed in special education are less likely to receive a high school diploma and are more likely to drop out of school (Truscott et al., 2005). These correlations are why the emphasis within special education is on serving students in the least restrictive environment, or as close to general education as possible.

Assessment Process

IDEA emphasizes the importance of parental involvement in the IEP decision making process, including the requirement of informed consent before an assessment and parent involvement in the development of the IEP. Informed parental consent must be obtained before an initial evaluation or a re-evaluation. Ethical guidelines, such as the Ethical Principles of Psychologists and Code of Conduct put out by the APA, also require informed consent regarding the purpose of testing (APA, 2010). Parents must be informed of, and agree to, the evaluation procedures the school plans to perform. This is accomplished in special education eligibility evaluations by obtaining a parental signature on an assessment plan. Informed parental consent means first revealing the potential negative aspects of special education. Parents must understand what the school is proposing, what procedures will be used, what their due process rights are, and the potential benefits and risks (Jacob, 2008). Once consent is given IDEA requirements state the evaluation must be conducted within 60 days; this timeline may vary by state.

Currently a reevaluation for students on IEPs must be conducted at least once every three years. Reevaluation results are intended to revise the IEP to meet current
levels of performance and need. The 1973 Rehabilitation Act, commonly referred to as Section 504, requires a reevaluation before a major change in placement; courts have applied this requirement to IEP placement changes as well (Yell, 2006). While triennial reviews are legally required, development of a carefully considered assessment plan and informed parental consent are still necessary. Alternatively the parent and school may agree a reassessment is unnecessary. In the 2002 report from the President’s Commission on Excellence in Special Education, Truscott, Catanese, and Abrams (2005) suggest triennial evaluations should be replaced with more comprehensive Annual Yearly Progress reviews; this recommendation may become law in the future.

Assessment Alternatives

Special education resources are vital to many students with severe impairments in one or more of the eligibility areas. These students have academic challenges that are different from their peers and thus need additional resources to access the curriculum and have the same chance of success. It can be tempting to want to give all students with academic difficulties access to special education resources, which often far exceed what general education teachers can provide. Special education departments receive federal funding in addition to funding from the district’s general fund. The teacher/student ratio is often much smaller in special education due to the presence of paraprofessionals and limits on teacher caseloads. Students with IEPs are assigned a case manager who ensures the accommodations and modifications specified in the IEP are carried out by all teachers and often provides direct services to the student. In addition special education teachers
are trained in multiple methods of targeting areas of difficulty to aid low performing students.

The negative aspects of special education previously discussed must be weighed against the potential benefits; thus there are compelling reasons to first consider general education interventions for struggling children. No Child Left Behind and IDEA both emphasize the importance of research-based interventions. Parents may look to a special education assessment simply because they feel the school is not doing enough to help their child and they are unaware of any alternatives; best practice is to avoid the need for special education with quality instruction and interventions. Meeting with the child’s parents and teacher and consulting with knowledgeable general and special education staff can generate ideas for effective general education accommodations and interventions. Regulations for the newest adoption of IDEA (2006) allows districts to only use data regarding how a child responded to evidence-based intervention, such as from a Response to Intervention (RtI) model, when determining if a child has one of the disability categories: specific learning disability (SLD; Burns, Jacob, & Wagner, 2008). Some states require schools to use RtI to identify a SLD (Zirkel, 2009). In an RtI model, high-quality instruction (Tier 1) and targeted interventions with progress monitoring (Tier 2) are expected to assist between 90 and 99% of all children (Reschly, 2008; Tilly, 2008).

An important question for school psychologists considering SLD eligibility and using the RtI model involves informed consent. Legal requirements, ethical standards, and practical considerations seem to conflict on when consent is necessary. Zirkel (2009)
asserts consent is not legally required before implementing RtI or conducting progress monitoring during an intervention, just as it is not required before Child Find screenings, but it is required before a special education evaluation. A clear guideline of at what point RtI becomes special education, especially for schools that do not require testing data beyond that gathered in the RtI process to determine eligibility, is not yet available.

What is clear is the current educational trend and the increased availability of high quality intervention options means schools have more general education options when considering alternatives to special education assessment.

Initial Evaluations

IDEA (2004) requires a “full and individual initial evaluation” (PL 108-446 § 614 Stat. 2702) in “all areas related to the suspected disability” (PL 108-446 § 614 Stat. 2705) before a student is considered for special education services. An appropriate evaluation is one based on specific concerns regarding the child and why he or she may require special education services. When multidisciplinary teams are considering an evaluation the first step is to determine what the referral concern(s) is (are), which will guide the team in determining what specific areas of disability are suspected and thus need to be explored during the evaluation. Best practice therefore dictates that not all students are given the same type of evaluation, but rather that the assessment will vary for each student. IDEA (2004) also states a variety of assessment procedures must be used and that no single test or procedure may be used alone as the sole method or criteria for determining a student’s eligibility (PL 108-446 § 614 Stat. 2704-2705; see Table 1.) Not only will the specific tests given vary by child and referral concern, but a well conducted
Table 1 Text from IDEA (2004): Section 614.

**Evaluations, Eligibility Determinations, Individualized Education Programs, and Educational Placements**

(b) Evaluation Procedures

(2) Conduct Of Evaluation—In conducting the evaluation, the local educational agency shall

(A) use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information, including information provided by the parent...

(B) not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability or determining an appropriate educational program for the child; and

(C) use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

(3) Additional Requirements—Each local educational agency shall ensure that

(A) assessments and other evaluation materials used to assess a child under this section

   (i) are selected and administered so as not to be discriminatory on a racial or cultural basis;
   (ii) are provided and administered in the language and form most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is not feasible to so provide or administer;
   (iii) are used for purposes for which the assessments or measures are valid and reliable;
   (iv) are administered by trained and knowledgeable personnel; and
   (v) are administered in accordance with any instructions provided by the producer of such assessments;

(B) the child is assessed in all areas of suspected disability;

(C) assessment tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the child are provided...

(4) Determination Of Eligibility And Educational Need—Upon completion of the administration of assessments and other evaluation measures

(A) the determination of whether the child is a child with a disability as defined in section 602(3) and the educational needs of the child shall be made by a team of qualified professionals and the parent of the child in accordance with paragraph (5); and

(B) a copy of the evaluation report and the documentation of determination of eligibility shall be given to the parent.

(5) Special Rule For Eligibility Determination—In making a determination of eligibility under paragraph (4)(A), a child shall not be determined to be a child with a disability if the determinant factor for such determination is—

(A) lack of appropriate instruction in reading, including in the essential components of reading instruction (as defined in section 1208(3) of the Elementary and Secondary Education Act of 1965);

(B) lack of instruction in math; or

(C) limited English proficiency
evaluation will include information other than from testing. Examples of additional information the law refers to are discussed in the next section.

**Record Review**

Special education evaluations require a review of existing data on a student. Data sources listed in IDEA include “evaluations and information from the parents, current classroom assessments and observations, and observations by teachers and related service personnel” (Mandlawitz, 2007, p. 73). A review of records does not require informed consent and may be conducted when exploring explanations and alternatives to special education assessment, but it must be part of an assessment. This requirement generally means looking at a student’s cumulative file that will include report cards, state testing results, and even work samples. Personal home data such as race, ethnicity, and language(s) spoken can help determine if English proficiency, environmental, cultural or economic factors must be ruled out before determining eligibility. Previous report cards, school records, teacher reports, and attendance records should indicate if the student has received sufficient instruction in reading or math. See below for further discussion of the special factors portion of the law.

The review should not stop at the student’s cum file but include interviews with parents, teachers, and other staff who work with the student. Observations should also be conducted (Lichtenberger, Mather, Kaufman, & Kaufman, 2004). Parent consent is not required for screening level observations, for example of entire classrooms, though observations targeted to an individual student and environments will be part of the assessment process after consent is granted. Interviews and observations will be
discussed further in later sections. The knowledgeable school psychologist looks for patterns and considers questions such as:

- Was the child progressing normally and then began a decline, or has there been a concern for years?
- What is the child’s school history?
- How frequently does the child attend school?
- Is there any record of previous multidisciplinary team meetings?
- What interventions have been tried, and what was their outcome?
- Are there health concerns?

These questions can further clarify the referral concern if needed, and may provide some explanation as to the child’s struggles or suggest areas requiring further exploration.

*Standardized Testing*

Standardized testing is generally considered the primary element of the psychoeducational report. Standardized testing can provide a better understanding of a student’s relative strengths and weaknesses by comparing them to their peers on a wide scale level. Standardized achievement tests measure academic performance, though these tests reflect national norms and have limited usefulness in determining what a child is learning in class. Curriculum based measurements, district level assessments, and state testing scores can also provide useful information and should be considered in addition to, if not in lieu of, standardized achievement tests (Rhodes, Ochoa, & Ortiz, 2005).

School psychologists are recognized as the school personnel who administer cognitive tests. Cognitive testing, especially when used with contemporary cognitive
theories such as the *Cattell-Horn-Carroll* (CHC) model, provides a profile of a student’s mental strengths and weaknesses (Horn & Blankson, 2005). A cognitive profile can identify areas where the student excels as well as areas of difficulty which may explain academic trouble; interpreting cognitive test results and their academic implications is a crucial skill for a trained school psychologist. Cognitive testing is required for the mental retardation eligibility category, which is defined in IDEA (2006) as “significantly subaverage general intellectual functioning, with deficits in adaptive behavior” (§300.8). Historically cognitive testing was also required to determine if a discrepancy existed between a student’s cognitive ability and academic achievement, which defined SLD.

School psychologists also have the specific expertise to evaluate social and emotional concerns. The mental health training of school psychologists, which meets the APA test user qualifications, is unique amongst school personnel (Sattler & Hoge, 2006). The initial referral and conversations with the child’s teachers and parents can determine if adults are noticing any concerning behaviors. Because emotional challenges can be so pervasive it is best to rule out any possible concerns. Interviews are an important step in this process. However younger children may not be able to articulate their problems and older children may hide them; observations, especially if the child is unaware he or she is being watched, can also provide insightful information. Rating scales are also useful but not always necessary. When using rating scales best practice is to first administer a broad-band scale that considers a wide variety of emotional and behavioral areas including internalizing and externalizing disorders. Any areas of concern should be followed-up by a narrow-band scale (McConaughy & Ritter, 2008). Best practice also
suggests the least pathological explanation for an apparent weakness is often the best one (Cooley, 2008).

Federal law requires all tests to be valid for the purposes for which they are used. This requirement must be true, regardless of any statement that may be present in the psycho-educational report. Professionals must educate themselves on the purposes and limitations of their tests. For example, while the Peabody Picture Vocabulary Test is commonly used by speech-language pathologists and school psychologists and can provide valuable information, it is not and should not be used as an intelligence test (Keyes & Edwards, 1996). One factor in determining validity is test age. School psychologists must be aware of new editions or updates to norms of current tests as well as new tests that they may want to add to their repertoire. Urbina (2004) points out significant changes that alter the scoring or scale require a test revision, which is actually a new and different test. Best practice is to always use the newest version of a test, although a universal timeframe for when the transition to a new version of a test must occur has not been established (Lichtenstein, 2010). Part of the reason for using updated tests is the Flynn effect, or the tendency for normative groups to perform better on newer tests (Flynn, 1999). Thus, student scores are expected to be higher on older versions of tests; this difference in scores can be especially important when a discrepancy model based on comparing achievement and cognitive scores is used to determine eligibility for SLD (Lichtenstein, 2010; Urbina, 2004). Using only the newest version of tests can be difficult to justify given the expense of some tests and limited budget allotments. It may be tempting to use a readily available test rather than purchase an updated test that seems
essentially the same or a manual just because it uses a new normative group, but these practices can invalidate an assessment.

The validity requirement means tests must also be reliable. Urbina (2004) suggests four considerations regarding test reliability: determine all potential sources of error that may contaminate the scores; consider the test’s reliability data and how this was collected; evaluate additional areas of the test such as validity data, the size and representation of the normative sample, administration time, and cost; and finally if all else is equal select the test that will produce the most reliable scores for the child and testing purpose. Some testing materials go through more rigorous validity testing during development than others. Psychologists also need to ensure the student’s ethnicity is represented in the norm sample, which can be a challenge for students from small minority groups. For these cases best practice suggests focusing on alternative or additional types of information rather than standardized testing data (Rhodes et al., 2005).

To aid in determining if a specific test is psychometrically sound, valid, reliable, and designed to measure the desired construct, testers can read a test review conducted by a respected and impartial reviewer. Test reviews are available from the Buros Institute of Mental Measurements, either online through their Test Reviews webpage (http://www.unl.edu/buros) or in the Mental Measurements Yearbook, which is available for purchase. Additional sources are the Educational Testing Service Test Collection database (http://www.ets.org/testcoll/index.html), which is the largest in the world, or the U.S. Department of Education’s Educational Resources Information Center (ERIC) system (http://eric.ed.gov; Urbina, 2004).
Interviews and Observations

Standardized tests offer only a snapshot of how the child functions; a comprehensive assessment will include more than standardized testing alone. Observations and interviews can offer just as much or even more information about the child’s general functioning and behavior than traditional testing (Lichtenberger et al., 2004). As discussed previously a specific referral concern is critical to understanding where the problem does, and does not, occur; therefore interviewees and observation locations should vary for each case. Awareness of situations where the student is successful can be just as insightful as knowledge about the referral concern. Comparing observations and staff interviews from multiple settings can help the IEP team understand exactly what is causing the difficulty as well as offer suggestions for solutions that may work in different environments. Some students form close relationships with classified staff such as janitors, yard duties or lunch monitors. A home visit can provide essential information as well. When presented with an unusual or intricate case and if a home visit is undertaken, the school psychologist should always exercise precaution and go with another school staff person (Rhodes et al., 2005). Lichtenberger et al. (2004) offer a helpful review of interview techniques and questions to ask, including how to approach sensitive subjects such as drug abuse or strained family relationships.

Additional Considerations

IDEA identifies several additional concerns during an assessment. When choosing which tests to administer, special consideration must be made regarding the child’s cultural background. IDEA (2006) specifically mentions the concern of test
discrimination. Understanding the multiple and often nuanced ways that culture can influence a child’s performance, beliefs, and behavior is of particular importance when assessing a student from a non-dominant culture. Specific court cases such as California’s *Larry P. v. Riles* (1984) found schools cannot use racially discriminatory tests. Because specific legal guidelines often result from lawsuits, Rhodes et al. (2005) suggest practitioners consider the spirit or intention behind the law rather than the specific regulations. School psychologists’ training should include cultural sensitivity and awareness that will allow them to consider cultural factors during an assessment; unfortunately this is not always the case (Rhodes et al., 2005).

Assessing students who speak English as a second language is especially common when working with children from groups for whom English is not the primary language. Expressive and receptive language skills grow separately and should each be assessed (Rhodes et al., 2005). IDEA (2006) prevents testing children in a language they do not understand, and the Civil Rights Act (1964) says whenever possible children should be assessed in English as well as their native language (Yell, 2006). The special rule in IDEA (2006) specifically prevents children from being identified as having a disability solely because they lack knowledge of English. These considerations relate back to the validity discussion above.

Another aspect of the law requires students to have been provided with appropriate instruction. Students who are behind grade level because they have not attended school or have missed large portions of instruction are not considered disabled. Jacob (2008) states, “Ethically, a child should not be exposed to the risk of misdiagnosis
unless deficiencies in instruction have first been ruled out” (p. 1927). While school psychologists can objectively observe a classroom they may lack the necessary training to determine if the curriculum and teaching is appropriate and high quality; teachers and administrators have an important role in helping IEP teams consider this facet of the law.

Referrals for English language learners mean appropriate instruction must be considered in addition to the assessment challenges highlighted above. Rhodes et al. (2005) consider the effectiveness of several types of bilingual and English Second Language programs. For all students the National Reading Panel recommends direct instruction in phonemic awareness, phonics, vocabulary, fluency, and reading comprehension (Carnine, Silbert, Kame’enui, Tarver, & Jungjohann, 2006; National Institute of Child Health and Human Development, 2000). Similarly the National Mathematics Advisory Panel (2008) determined math instruction should follow a coherent progression that allows for proficiency in key topics rather than continually revisiting topics. Instruction should develop conceptual understanding, computational fluency, and problem solving skills in topics related to algebra including whole numbers, fractions, and geometry/measurement.

While not part of education law, creating a relationship with the student is an essential aspect of best practice in assessment. While parent, not student, consent is legally required prior to an assessment there is an ethical obligation to inform students of the nature of the assessment (Jacob, 2008). Urbina (2004) states:

In order to maximize the reliability and validity of test results, a friendly atmosphere needs to be established from the beginning of the testing session and rapport ideally should range from good to excellent… to the extent that rapport is lacking, test performance is likely to be deleteriously affected, even to the point
where test scores are invalidated. In order to build rapport, the examiner should attempt to engage the interest and cooperation of test takers in the testing process so that they may react to test tasks in an appropriate fashion, by putting forth their best efforts in tests of ability and by responding openly and honestly as possible on instruments designed to assess personality. (pp. 271-272)

Test results may not be valid if the student is not reasonably comfortable with the examiner and the test taking environment. As mentioned previously, assessment can be uncomfortable for the student. They are singled out, removed from class, and asked to do challenging tasks. Because standardized tests rely on several incorrect answers to reach a ceiling the student is given items beyond their ability level. For some students achievement tasks can be especially frustrating. For example a student who struggles with reading will likely not enjoy a spelling test or timed reading test.

Assessment personnel must be skilled at establishing rapport. APA’s ethical guidelines (2010) suggest the test taker’s preferences and best interests should be considered. Begin the assessment with a conversation about the student’s likes and dislikes. Smile during testing and tell the student they are doing a good job and trying hard (Schrank, Flanagan, Woodcock, & Mascolo, 2002). Allow students to take breaks between subtests. Younger children or those with attention difficulties may need to earn rewards. Offering students a choice between tasks may help them feel more control and increase their willingness to work. As Urbina (2004) noted, students who establish rapport are more likely to put forth their best effort and have valid results.

Additional Assessment Personnel

Special education assessments may include tests administered by various personnel. A health survey including vision and hearing screenings should always be
conducted before the psychoeducational assessment. Best practice is to involve the school nurse early in the evaluation process to rule out hearing and vision concerns. Testing performed on a child with uncorrected hearing or vision problems may not be valid because the obtained scores may reflect poor vision or hearing rather than the construct the test purports to measure (Brock, 2008). Some health concerns may have a large impact on assessment planning. For example a child with a physical handicap and limited movement may require special considerations for testing. Similarly a child with known vision or hearing impairments, especially those considered hard of hearing or blind, will require special care in test selection and likely consultation with an experienced practitioner. Federal law mandates evaluators have experience and knowledge of the disability they are assessing, which can be challenging for school psychologists working with children with low incidence disabilities (Braden & Joyce, 2008; Mandlawitz, 2007). Additional health and developmental information can be helpful in identifying risk factors for disabilities and help the psychologist present several strands of evidence that assist in the diagnosis or identification of a disability. Developmental considerations will be explored in a later section.

Speech and language pathologists and occupational therapists (OT) are able to offer more detailed analyses of a child’s speech and motor needs, respectively. A school psychologist is typically experienced with some of the batteries these professionals use, however only these specialists can determine the need for speech or OT services. A thorough understanding of the referral concerns will lead to an appropriate assessment
plan that should indicate if testing in these areas is necessary, and if so which practitioner will complete each portion of the assessment.

Summary of the Assessment Process

Considering a child for a special education evaluation is a serious endeavor. Special education has positive and negative aspects. As discussed, best practice suggests all referrals be considered by a multidisciplinary team, which can consider alternatives to assessment. Recent educational law changes focus on preventing low achievement using high quality general education instruction and research-based interventions.

Assessments must follow specific procedural requirements outlined in IDEA. Procedural requirements include obtaining parental consent prior to assessment, using a variety of valid, nondiscriminatory assessment tools, when possible administering tests in the child’s native language, and completing a comprehensive evaluation of all areas of suspected disability. Best practice suggests specific substantive requirements. The assessment must be individualized to the student’s referral concerns and designed to provide guidance to the IEP team (Yell, 2006). Sattler and Hoge (2006) outlined the steps in the assessment process (see Figure 1). The assessment and the resulting report, which will be explored next, provide the basis for the IEP team’s decisions regarding the child’s eligibility, areas of need, goals, and placement. When the assessment is well planned, thoughtfully laid out, and guided by clear referral concerns a well considered and ideally successful IEP will naturally result.
Psychoeducational Reports

Following the completion of the psychoeducational assessment, testing personnel must record their findings and share them with the IEP team members. Single author or multidisciplinary team reports are acceptable.

**Report Requirements**

As previously stated, IDEA (2004) requires “a full and individual initial evaluation” prior to providing special education services (PL 108–466 § 614 Stat. 2702). Children with suspected disabilities must be assessed “in all areas related to the suspected disability” (PL 108–446 § 614 Stat. 2705), including, as appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities. Federal law also requires schools to provide a
written copy of the evaluation report and documentation of the determination of eligibility to the child’s parents following an assessment. After obtaining all required assessment data, a psychologist must synthesize the information gathered and incorporate it into a written product for the IEP team. Lichtenberger et al. (2004) state:

The central objectives of assessment reports are to answer questions, describe the individual within his or her situation, interpret and integrate qualitative and quantitative data, and then recommend appropriate treatment, therapies, or interventions. (p. 3)

While final decisions regarding special education eligibility are determined by the IEP team, the psychoeducational report should consider and discuss the evidence regarding eligibility or ineligibility. The report must be written in such a way that it is understandable to the recipient, namely the child’s parent and teacher. Much information must be conveyed in a concise yet thorough manner. Early on, many school psychologists learn the art of report writing and must find his or her own style of written interpretation.

In contrast with the assessment, IDEA has few specific requirements for the psychoeducational report. The written report for a child with a specific learning disability must include statements determining if the disability exists and, if the child participated in research-based interventions, the instructional strategies and student-centered or progress monitoring data, but no such requirements exist for the other eligibility categories (Mandlawitz, 2007). Therefore it has been left to practitioners to determine what standards and requirements guide best practices in assessment report writing. The following discussion will outline the report sections that best practices consider necessary. However, it is important to note that each state, region, and even
SELPA or district may adopt their own report protocols, templates, and methods of delivery.

Reason for Referral

The initial section of the psychologist’s report typically describes why the child was referred for testing. The reasons may include concerns regarding the child from the referral persons and any further issues that warrant an evaluation. This section may also be considered a statement regarding the purpose of the assessment. Here, the reader is oriented to the report’s content and is provided a framework for evaluation findings.

According to Groth-Marnat and Horvath (2006), recent case study law findings show initial referral concerns is a section often cited. Although more thorough and explicit in some reports over others, the tendency to site reasons for an evaluation (i.e., an initial or triennial evaluation, academic or behavioral concerns) it is almost always present within the report. However, special consideration must be taken when wording the referral concerns. In a 1982 study referred to by Truscott et al. (2005), multidisciplinary teams were given similar test results with different teacher referral information. When the teacher referral included the suspicion that the child had a disability, the teams were more likely to conclude the child was disabled. The researchers concluded much of the variance in special education classification can be attributed to the referral rather than the test scores. Care must be taken to accurately portray concerns without influencing the interpretation of assessment results.
History and Background Information

A psychoeducational evaluation represents an appraisal of the child’s current functioning against the backdrop of the child’s past. Therefore, the school psychologist needs to obtain a thorough history of the child and include all relevant historical information within the report. For children who may be in need of special education services, it is critical that the historical section include all relevant medical history. Information to be included consists of any pre- and perinatal issues that may affect subsequent child development (Burns et al., 2008). Factors to consider are: the child’s acquisition of developmental milestones in accordance with a developmental timeframe; the child’s history of infection, illness and injury; and anecdotal observations regarding the child’s health and early development. Developmental history information regarding the child’s development of fine- and gross-motor skills and ability to interact, play and socialize with peers should also be considered.

Research has shown that various adverse perinatal factors may predispose the child to subsequent learning problems (Michaels, 2005). For example, prematurity puts the child at risk for developing later problems with language and other forms of information processing. Adverse reactions to vaccines, the experience of frequent and chronic ear infections, seizure disorders, attention problems, social and/or emotional difficulties, surgeries, or strep infection can provide important clues regarding the risk factors that may predispose the child to learning problems (Clopton & Etscheidt, 2009).

Ideally the background section of the report should take the reader from the beginning of the child’s life and leave the reader at the point where the evaluation begins.
Information related should also include a complete review of the child’s educational history, beginning with any preschool experiences and concluding with the child’s present educational placement. As discussed previously, it is critical that school psychologists access and review the child’s complete educational record including all report cards, anecdotal records, and the results of prior evaluations including standardized test results and teacher and parent observations (Clopton & Etscheidt, 2009). Interviews with individuals who regularly interact with the child should be included, especially in situations when behavior is an area of concern such as when a child is referred for a possible emotional disturbance. Interviews from teachers, parents and other professionals can provide important insight into the child’s functioning from a variety of settings.

For children with a history of prior evaluations particular attention should be paid to how the child has tested over time. Whenever possible, psychologists should seek to obtain actual test scores and not just written summaries from previously completed evaluations. It is important to note that it is not unusual for children who receive appropriate educational programs to demonstrate growth, not only on standardized academic achievement tests but also on measures of cognitive functioning (Lichtenberger, 2006). In contrast, it is not unusual for a child placed in inappropriate educational programs to decline in his or her measured abilities. Accessing prior information before beginning an assessment can even aid the evaluator when testing by providing an idea of performance expectations and prior baselines.
Behavior During Testing

Behavioral observations of the child under standardized test conditions are critical to the compilation of the psychoeducational evaluation reports. It is not only important to how the child tests in terms of validity of scores, but what the child does during the process of the evaluation can be very informative (Clopton & Etscheidt, 2009). Whether the child is attentive or inattentive, hyperactive or hypoactive, established good or poor rapport with the examiner, has an impulsive or methodical response style, or is motivated verses unmotivated in completing tasks, it is crucial to interpret all noted behaviors.

As many psychologists know, some children with special needs are extremely difficult to test. Their problems with attention, concentration, impulse control and limited frustration tolerance can create continual interferences during the testing process, which in turn may compromise the reliability and validity of the obtained test scores. If negative behaviors are observed during testing, these should be reported by the examiner and obtained test scores should be interpreted with extreme caution (Fives, 2008). On the other hand, many children are extremely hardworking and motivated to do well during testing. They put forth an extraordinarily strong amount of effort, which contributes to the reliability and validity of obtained test results. These behaviors also need to be noted when they are observed.

More importantly, reporting the process through which a child comes to a conclusion or response to a task is just as crucial to report as the response itself. For example, if two children of average intelligence each obtain a standard score of 90 on a reading decoding test, both students are considered to be functioning within an expected
range given their measured abilities. However, the process by which each child obtained this score may be dramatically different. If, for instance, one child was an extremely slow and laborious reader who had to reread each word to decode it, and the other child was a very fast and efficient reader who was able to easily and fluently decode, then although the scores were identical in numerical value the process by which each child accomplished the task is critical to understanding how the child actually reads.

Furthermore, qualitative data can be more important in decision making than just quantitative or numerical data. Often, if reports are presented with only numbers in mind, members of the IEP team will become focused on and heavily weigh the quantifiable numbers rather than what the data actually represents. Reports must emphasize assessment results that lead to an eligibility determination, regardless of if the results come from test data or direct observations. Both qualitative and quantitative information are critical to the compilation of a useful psychoeducational report.

_Test Results and Analysis_

In this section of the report, the psychologist presents all relevant information obtained during testing followed by an analysis and interpretation of results. This critical section of the report provides the psychologist with an opportunity to discuss and interpret both the quantitative and qualitative information obtained during the course of the evaluation. If prior testing was accomplished or if the child has been receiving special education, this section of the report should include information as to whether the child is making a reasonable degree of educational progress (Hurwitz, 2009).
Additionally, the examiner should state whether the child is benefiting from specially designed instruction and educational interventions.

Simply reporting test scores, even classification labels, is not sufficient to explain results in such a way that parents and teachers will understand them. Urbina (2004) states when reporting scores the examiner should include, at a minimum, the following components: what the test covers; the meaning of the test scores; the limitations of test score; precision resulting from measurement error; common misinterpretations of some particular scores, such as intelligence quotients (IQ); and how the test results will be used. Additionally, Urbina (2004) states that best practice of score interpretation uses informed professional judgment to integrate behavior samples with other data to create useful inferences about the examinee.

Considerable debate exists regarding the usefulness and accuracy of test interpretation. IDEA definitions of disabilities are often vague or broad, with much room for personal interpretation. Truscott et al. (2005) states the lack of standardization specifically in the interpretation of specific learning disabilities (LD):

In our experience, both in school psychology practice and training, school psychologists use a variety of interpretations to try to reach classification criteria. This is most evident in LD where there is some need to determine a significant discrepancy between expected and actual achievement. School psychologists can be very creative in identifying either. We have seen ‘expected achievement’ based on IQ, IQ scales (e.g. VIQ [Verbal IQ] and PIQ [Performance IQ]), factor scores, single IQ subtests, a variety of IQ tests or even obsolete IQ tests. We have seen ‘actual achievement’ based on achievement tests, specific achievement tests, sub-scales of achievement tests and classroom grades. We have seen the ‘discrepancy’ calculated using standard scores, grade equivalents, percentile ranks and NCEs [Normal Curve Equivalents] using different charts, programs and formulae. Clearly, with that many variables it is usually possible to find creative ways to establish a significant difference. (p. 166)
A common criticism of psychoeducational reports is interpretations vary depending on the psychologist. In research, this varying interpretation has also been referred to as “irresponsible interpretations” (Groth-Marnat, 2006; Tallent & Reiss, 1959). Even dating several decades back, Tallent and Reiss (1959) claimed that many psychiatrists referred to psychological reports as “reflecting the examiner’s personality, being text bookish and not adequately related to theory, as well as being ambiguous and too long” (p. 446). When viewing different accounts, the most widely cited concern was that psychological reports were too general and not personalized to each student or client (Reed, 2001; Tallent & Reiss, 1959; Tidwell & Wetter, 1978).

Summary and Recommendations

The final section of the psychoeducational evaluation contains a summary of test results and the recommendations for intervention. This section should not only contain an overview of all major test findings, but also a determination of the child’s eligibility for special education services and specific recommendations for the implementation of specially designed instruction (Holdnack & Weiss, 2006). In essence, this section of the report provides a blueprint for the writing of the child’s IEP.

Often, the summary and recommendation portion becomes the most viewed and considered section of the report. Here, psychologists should not only summarize findings but restate the referral question(s) and/or concerns and state special education eligibility criteria. Depending upon the educational setting, the classification and placement is based on the severity of his or her disorder. As such, it is not possible to use a single criterion and generalize each student’s need for services. For instance, school districts
that choose to continue with the discrepancy model must establish flexible cutoffs that accurately reflect the student population being served (Holdnack & Weiss, 2006; Mueller, 2009). Additionally, at least one additional criterion that relates to the specific academic weakness should be present (e.g., impaired phonological processing or slowed naming speed). School districts that have adopted an RtI model must establish coherent, replicable rules for identifying severity (Holdnack & Weiss, 2006). Under these circumstances, coherent and replicable data should utilize multidisciplinary teams to access the same data and reach the same conclusions. Therefore, high reliability should be reached across multiple evaluative reports.

Regardless of the eligibility conclusion reached in the summary, recommendations to address the referral concern need to be suggested. The child was referred for assessment due to legitimate and often severe concerns and a well-planned assessment will lead to a greater understanding of the child’s difficulties; it is appropriate and ethically necessary for the school psychologist to provide suggestions and guidance to help alleviate the problem. Lichtenberger et al. (2004) suggest several principles for creating recommendations; they also provide a list of web sites related to common disorders and sample recommendations, accommodations, and interventions for various school-based concerns. The most important consideration in developing recommendations is a focus on the child and his or her referral concerns; “The goal is to select specific modifications and interventions that will enhance an individual’s opportunities for success and lead to the resolution of concerns” (Lichtenberger et al., 2004, p. 154). Considering the child’s strengths or first indicating what the child can do
may make the recommendations more realistic and appealing. Recommendations should be individualized and will vary for each child; while there may be overlap between similar cases, it is not best practice for a school psychologist to have a predetermined list of recommendations that he or she adds to every report. Rather, “when creating recommendations, provide a clear link between the concern and the recommended solution” (Lichtenberger et al., 2004, p. 169). Care must be taken that the recommendations match the child’s referral concerns, age, and what may reasonably be expected to work within their environment.

Organization when presenting recommendations is important. Lichtenberger et al. (2004) advise evaluators to place recommendations in the final section of the report following the summary rather than embedded throughout the report, and group them by categories with headings. The most important may go first, or they may follow a developmental order. The number of recommendations will vary depending on the complexity and scope of the case. A significant adjustment or accommodation should be justified with a clear rationale of the child’s need and how the need will be addressed. Recommendations must not be so complex that they cannot be followed; regardless of how effective it may be, “recommendations that are not clear will be ignored” (Lichtenberger et al., 2004, p. 156). Recommendations may be general, specific, or very specific depending on the evaluator’s knowledge of the intervention, the setting it will be implemented in, and the available resources. General recommendations are often preferred because the psychologist making the suggestion is most often not the person implementing the strategy. Broad suggestions enable the teacher or parent to fit them
into their class or home, which in turn increases the likelihood the recommendation will be followed. Before writing their reports psychologists may wish to speak to parents or teachers to find out what types of strategies they may be willing or able to implement. In fact Goldstein, Struckland, Turnbull, and Curry (1980) indicate that parents' reaction to recommendations can be the most significant predictor of student academic outcomes. Recommendations that are “prescriptive, positive, practical, and possible to implement” (Lichtenberger et al., 2004, p. 162) are more likely to be considered by those who must execute them.

Best practice is to avoid specific recommendations unless the writer has a solid background in that area, and instead refer readers to more knowledgeable individuals. For example, a school psychologist may note a child’s weakness with fine motor skills and recommend further evaluation by an OT but should not suggest specific exercises or OT services. School psychologist may suggest parents take their report to a medical doctor or psychiatrist but should never recommend medications. Another technique is to write a short general recommendation, then include information about a specific methodology or service as an addendum to the report.

Though it is not best practice, some districts may discourage recommendations or restrict types of recommendations, such as those pertaining to counseling, to avoid potential law suits or demands for services. In these cases it may be appropriate for the school psychologist to write in the report that recommendations will be developed by the IEP team, and to come to the meeting with proposals to address the referral concerns.
Report Writing

The previous section highlights some specific concerns to address when writing a psychoeducational report. Specifically, care should be taken when interpreting test results so that the discussion reflects the student and his or her needs, not the examiner’s bias or preconceived notions. Sufficient information should be provided regarding the meaning and limitations of test results. Additional factors to consider when writing the report follow.

Audience and Readability

Psychoeducational assessments require much time and energy; it is the hope of school psychologists that they will be useful beyond the IEP and eligibility determination. Reports are more likely to be read, understood and utilized by parents and teachers if they are written in a way so as to be understandable. Through the presented data and eligibility classification, these reports often encompass much of the focus during IEP meetings. Although clear communication has continuously been stressed in law, research has repeatedly found that “psychologists often write reports that are very difficult for non psychologists to read” (Smith-Harvey, 2006). The majority of psychologists believe their reports are clear (Slaney, Masha, Gabriel, & Maraun, 2009). In contrast, Smith-Harvey (2006) points out that this is seldom the case. Lichtenberger et al. (2004) suggests “the language in your report should not be more complex than that used in a daily newspaper” (p. 29).

Due to the overwhelming amount of information to report on each child, there appears to be a trend with psychologists using nonstandardized or research based
methods such as precedent, sample reports, folklore, habits or tradition to write reports (Groth-Marnat, 2006). Unfortunately, practicing psychologists often are guilty of redundant report writing. According to Smith-Harvey (2006), novice psychologists only recently made the transition from “nonpsychologist” to “psychologist,” therefore these individuals are more likely to comprehend the difficulties that nonpsychologists, such as teachers or parents, encounter when attempting to understand psychological reports and terminology. Newer psychologists might, therefore, be expected to have less jargon and more understandable terms in their reports.

Current research shows a significant reason why psychoeducational reports often lack clarity lies in the highly advanced reading level of most of the report’s readers (Delclos, Burns, & Vye, 1993; Goldfinger & Pomerantz, 2010). If the reader, for example, is a psychologist or another mental health care professional, then the report might indeed be understandable. However, in current practice and with the IDEA requirement of providing a copy of the evaluation data to the parents, the report’s readership has extended to a much larger, and often less highly educated, audience. As a result, psychologists must now challenge themselves to try to write reports that are accessible to this larger audience.

Use of Visual Aids

Although some people may understand information when presented solely through a comprehensive written description, the use of multiple modes of delivering information should be considered. For instance, the use of visual aids such as tables for each test description often provides supplemental understanding to the scores being
reported. Miller and Watkins (2010) found that parents who read a report with graphs recalled significantly more information correctly than parents who read a report without visual aids. Parents who read a report with graphs or charts also expressed greater satisfaction with the information. Furthermore, regardless of the type of report, parents with a college degree performed better on the recall measure than parents without a college degree. This study emphasizes that multiple means of presentation such as visual graphs or charts along with written explanations within the psychological report enhances the communication and thus increases the level of understanding for all participants.

Ethical Considerations

When writing reports, consideration of legal and ethical concerns must be taken into account. A number of ethical issues relate primarily to writing psychological reports and are available from the APA or NASP. It is essential to be aware of these issues given not only the importance of providing high-quality care to students, but because ours is a litigious society. IDEA requires us to think more about the children we are serving instead of mechanically applying one method to all students. This ultimately means integrating information from multiple sources to develop a comprehensive picture of a child’s abilities, not just filling in numbers on an impersonal report template and labeling them. School personnel must meet new challenges and allow the intelligent use of prevention, intervention, assessment, and accommodations in helping children succeed.

Child-Centered Writing

A less researched aspect of report writing is the idea of child-centered writing. Snyder (1994) says a more traditional focus on tests and numerical results does not help
the IEP team better understand the child. Simple steps in writing with a child-centered approach such as using the child’s name before the test name, as in “Bob was given the WISC-IV” rather than “The WISC-IV was given to Bob,” can make a huge difference in writing style. Taking the test names out of the summary is another simple step towards developing a child-centered report. A third aspect of this style is focusing on strengths, which will be discussed in the next section.

Strength-Based Focus

The goal of a psychoeducational assessment should be to provide a fuller understanding of the child’s abilities. All children have both strengths and weaknesses. However, too often referral questions are based upon a child’s weaknesses and thus focus assessments on the student’s deficits or negative traits. Unfortunately, this creates potential for harm through examiner or teacher biases or if students develop a negative self-fulfilling prophecy (Snyder, Ritschel, Rand, & Berg, 2006). Various aspects of the total person and his or her environment need to be explored to produce a comprehensive and balanced assessment. When analyzing test results, always look for the highest results first rather than only reporting the student’s deficits or weaknesses. Doing so provides information that can be used to target interventions by identifying what works or what does not need to be addressed. In addition a determined focus on strengths can help ensure the school environment is also focused on positive aspects of student growth.

In support of identifiable strengths, Snyder (1994) cites the “Hope Theory,” or goal directed thinking, as a possible framework. This theory focuses on the importance of including information about client-centered goals. Similar accounts described as
“Positive Psychology” that identify and focus on student’s strengths are becoming increasingly recognized and emphasized within psychological assessments (Snyder et al., 2006). Strengths may include having good interpersonal skills, maintaining appropriate eye contact, showing compliant behaviors, or engaging in age appropriate conversation. It is important to note that strengths can easily become weaknesses when they are overused or used inappropriately. For example a child’s great sense of humor may be displayed at inappropriate times during class and become disruptive. Discussing strengths within an appropriate categorization and emphasizing them as such should be the goal.

Strength-based assessments are appropriate and encouraged for every student, regardless of the severity or intensity of the disability. This idea is based on the notion that every student has strengths that need to be recognized. This is not to say, however, that strength-based assessments will be an effortless evaluation for each case. On the contrary it may be more difficult to find strengths based on the severity of the student’s referral concerns. These challenging students, however, are often the ones who benefit most from having their strengths assessed (Snyder et al., 2006). The ultimate goal of the psychoeducational assessment, then, influences the discussion and implementation of optimal interventions through a student’s strengths and future potential.

Summary of Report Writing

The psychoeducational report is a critical item in the determination of eligibility for special education services. It provides a wealth of information about the functioning of a child based on a comprehensive assessment process. Furthermore, when a
psychoeducational evaluation is done well it offers a virtual blueprint for the construction of the student’s IEP. Those psychologists who perform their testing using a variety of assessments look not only at the quantitative data obtained during testing but also qualitative data regarding the child’s functioning. In addition, test results obtained during the evaluation provide an indication of how the student has progressed over time and create a baseline that can be used to measure future educational progress. Merely reporting test scores without interpreting results does not result in an accurate understanding of the child or provide a basis for specially designed instruction. Therefore, accurate and thorough interpretation of test results is critical to the formulation of an appropriate educational program for the child.

Presentation of Psychoeducational Reports to IEP Teams

Best practice in reporting assessment results to the IEP team is to begin as the report does, with an explanation of why the testing was conducted (i.e., referral question) and what concerns were addressed. This sets up the framework for what information will, and will not, be discussed. An explanation of the testing process, a description of standardized testing (i.e., explanation of standard/scaled scores, standard error of measure, etc.), and a summary of relevant background information including home, school, and health history, all serve as foundational information and should be expressed at the start of the IEP meeting.

Similar to the written report, the verbal presentation should include parent friendly language, take the audience into consideration, and provide visual aids to assist in the description of the assessment results. Most importantly, the primary focus should
be on the child’s strengths, which will aid interventions supporting any noted weaknesses. Additionally, as required by IDEA parent involvement should be incorporated into discussion of results, recommendations, and eligibility and placement decisions. The true psychological assessment and report serve as the foundation for the IEP as it addresses the child’s specific needs.

School psychologists may have a role beyond presenting reports at the IEP meeting. Many parents, and in some cases teachers, come to the meetings ill prepared to play the role expected of them. Gallagher and Desimone (1995) suggest there is a need for orientation meetings or workshops for parents and teachers about the IEP process. Outlined handouts of what an IEP process is and how it should be conducted may ease the concerns of many parents and teachers. In addition, school psychologists can work to ensure students are included in the IEP process. Students are often curious about the results of the testing they participated in, and may have clear ideas on what recommendations will or will not work for them. Studies show that students who have strong parental and teacher involvement and are themselves involved in the IEP process have a greater potential for progress and developing self-advocacy (Test et al., 2004). Lessening the anxiety that can surround especially an initial IEP meeting may lead to a more open reception of the assessment results and recommendations as well as a productive dialogue about how to best meet the student’s needs.

Summary

The topics approached throughout this project are ones that have raised a wide range of issues and controversies both from legal and ethical standpoints. The
psychological assessment is often at the core of many challenges because the psychological evaluation communicates and summarizes the results of an entire assessment. It is within the assessment that the evaluator interacts with the student and often where major decisions regarding a person’s psychological status are made. The findings, content, tone, and recommendations of a psychoeducational evaluation may affect the student for many years to come. Thus, school psychologists have a significant responsibility to present a report that exemplifies the best of what practitioners can provide. Our hope is that this project will aid fellow practitioners to better understand the challenges we face both in legal and ethical terms. Research guiding best practice is widely cited, emphasizing the ideals of conducting a comprehensive psychoeducational assessment and writing a report that leads to a well informed decision about a child’s eligibility for special education and their access to an appropriate education.
Chapter 3

METHODOLOGY

This project primarily gathered information from current educational law and psychological research and review. Participation in graduate courses through the Department of Education, Rehabilitation, School Psychology, and Deaf Studies at California State University, Sacramento, between Fall 2007 and Spring 2010 as well as the authors’ personal experiences within the field of school psychology were all incumbent.

The project idea originated in the California State University, Sacramento, graduate course EDS 239 Education Specialist Seminar in Spring 2010. Guidelines for an Education Specialist degree culminating project in the form of a training workshop were presented by the instructor Dr. Melissa Holland. The specific workshop topic was arrived at through a collaborative effort based on member’s experience in the field working with practicing school psychologists and reading their reports. A review of literature was performed during the Spring of 2010 and a 30 minute outline of the projected workshop was presented to classmates in May 2010.

The final literature review was created in Fall 2010 based on feedback from EDS 239 class members, Dr. Holland, and Dr. Stephen Brock as part of the California State University, Sacramento, graduate course EDS 542 Education Specialist Thesis/Project. The information in the literature review was utilized to create the project addendum workshop and manual. Introductory, methods, and summary chapters were added. Dr. Brock provided feedback and suggestions on materials prepared during EDS 542.
The project’s development was based upon current federal law and regulations according to IDEA, current and previous case law, the National Association of School Psychology and American Psychology Association ethical guidelines, and published accounts of professional personal experience and recommendations found in research. It is important to note that this project was constructed and heavily influenced through the most recent definitions and laws under IDEA. Best practice and ethical standards were supported through additional school psychology associations and educational personnel, and as such, the workshop’s basis was developed accordingly.
Chapter 4

RESULTS

Information obtained in the completion of Chapter Two of this project, Literature Review, was used to create a training workshop for new and experienced school psychologists. The workshop is designed to last three hours. The manual, slides with presentation notes, and activities are included in the project addendum and are designed for any trained school psychologist to be able to present. This research project and related workshop review federal requirements guiding psychoeducational assessments and best practices to use when conducting assessments and writing psychoeducational reports. Finally, the authors provide guidelines for presenting psychoeducational assessment results to parents or an IEP team.

Summary

School psychologists are relied upon to evaluate students before a team determines if they are eligible for and require special education services. The 2004 revision of the Individuals with Disabilities Education Act (IDEA) requires the evaluation as well as a written report presenting the assessment findings. Psychoeducational evaluations are critically important to meeting the needs of children who require special education services. Psychologists who are well trained, current in their knowledge of special education research, aware of best-practice guidelines for assessment and intervention, and who conduct comprehensive, reasoned “process assessment” are invaluable to the process of obtaining appropriate educational programs and placements for children with special needs (Groth-Marnat, 2009).
Assessment Guidelines

The assessment is designed to gather information and data which can guide an IEP team in determining if a student will receive services. IDEA states the purposes of the assessment are to determine a) whether a child meets the legal requirements of a disability, b) if the disability leads the child to require special education and related services, and c) what areas of academic and functional need the student has which will need to be addressed by the IEP. For a student who is found to both have a disability and require special education services an IEP is written to meet their specific needs.

Assessments include several specific requirements under federal law. They must be valid for that student, which means considering a specific referral concern, language and cultural effects. The assessment must also be comprehensive, which includes gathering data about the student’s school and developmental history, standardized test results, observations, interviews, and consideration of social and emotional factors.

Report Guidelines

After obtaining all required assessment data, a psychologist must synthesize the information and incorporate it into a written product for the IEP team. A psychoeducational evaluation presents the child’s current functioning as well as the child’s past. The report should include all relevant historical information, medical history, educational record, and the child’s behavior during the evaluation (Burns, Jacob, & Wagner, 2008; Clopton & Etscheidt, 2009). Summaries analyzing quantitative and qualitative information using informed professional judgment provide useful inferences (Urbina, 2004). Common criticisms of psychoeducational reports are that interpretations
vary depending on the psychologist and that reports are not personalized to each student (Reed, 2001).

Children have strengths and weaknesses, yet referral questions focus assessment on the student’s deficits or negative traits. Unfortunately this creates potential for harm through examiner or teacher biases or if students develop a negative self-fulfilling prophecy (Snyder, Ritschel, Rand, & Berg, 2006). Various aspects of the total person and his or her environment need to be explored in order to produce a comprehensive and balanced assessment. This approach helps to target interventions, while a determined focus on strengths can ensure the school environment is centered on student growth.

Guidelines for Presentation of Results

Similar to the written report, the verbal presentation should include parent-friendly language, take the audience into consideration, and provide visual aids to assist in the description of the assessment results. The primary focus should be on the child’s strengths, which will aid interventions supporting any noted weaknesses. As required by IDEA parent involvement should be incorporated into discussions of results, recommendations, and eligibility and placement decisions.

Workshop Objectives

The workshop is designed as a summary of what is known regarding research and issues related to psychological assessments and reports. It is hoped that workshop participants will obtain the basis for what is considered universally sound and legally defensible psychoeducational assessment and report writing procedures. Attendees will better understand the evaluation process from pre-assessment procedures through
reporting assessment results to the IEP team. The intended result is that school psychologists will gain empirically based guidance on how best to write their reports and that they will learn strategies to make their reports strength-focused and helpful to teachers and families.

Recommendations

It is recommended that school personnel view the contents of this project with the understanding that the workshop is intended for use under existing educational law. This project serves as a template for both the universal educational requirements as well as the possible ethical and best practices for IEP protocol. It is the goal of this project that the workshop produced serves as a guideline for special educational personnel, most notably school and licensed educational psychologists.
APPENDIX A

Presenter’s Manual

Best Practices in Psychoeducational Assessments and Reports

Introduction

It can be difficult to determine best practice guidelines for school psychologists performing psychoeducational assessments and writing reports. Legal requirements for school psychologists change with each revision or addition to federal or state educational laws or their regulations. New court cases provide case law that can be difficult to interpret. School psychologist’ professional opinions may differ from those of lawyers (Prasse, 2008; Yell, 2006).

This manual and accompanying PowerPoint presentation are designed to educate school psychologists in best practices related to assessments and reports. The information is based on a literature review performed between March and October 2010.

Nature of the Presentation

The presentation is designed for an audience of school psychologists. Other special education personnel who conduct assessments may also find some of the information useful.

The presentation is designed to last four hours. Two breaks are incorporated, each scheduled for 15 minutes. Audience participation is an integral aspect of this presentation. Presenters must use quality presentation techniques such as pausing for questions, demonstrating active listening, and validating audience input. To foster participation it is recommended that presenters and participants wear name badges that can be read from a distance. Before beginning the workshop, the presenter will need to make copies of the handout for each participant. The handout is available at the end of this manual.

In preparation for giving this workshop, presenter(s) should read over the slides and accompanying notes thoroughly. Presenter(s) may add their own names and contact information to the initial slide. In addition, it is recommended that presenters become familiar with the information cited and referenced at the end of the presentation. It is possible audience members will have questions that are not directly answered within the scope of the presentation. The final informational slide also includes the author’s contact information as an additional resource.

Guidance for Presenters

The workshop is presented as a series of Microsoft PowerPoint slides. The slides are prepared with all necessary information for presenting the workshop. On the notes section of each slide is general information about the slide and its purpose. The presenter
may use his or her own language when presenting, however sample language has also been provided in *italics*. Many slides include discussion points after certain bullets. The notes will direct the presenter to first READ the slide or a portion of the slide, then SAY wording provided in *italics*.

The workshop is designed to include audience participation. Questions and activities are embedded throughout the slide notes. To highlight these important notes questions the presenter should ask of the audience are prefaced with the word “ask” in bold (**ASK**) in the notes section of the slides. Directions for activities are provided.

Some slides use the animation feature of Microsoft PowerPoint. Some information on the slide may emerge only after a secondary click of the computer mouse or slide progress button. This feature allows the presenter to discuss part of a slide before exposing more information. It is also a useful tool when posting and asking a question before showing the answer. When this feature is used, the word “click” in bold (**Click**) indicates when the next portion of the slide should be exposed. The slide should progress and animation allowed to finish before continuing with the sample language.

The presentation can be performed with one or multiple presenters. If there are two presenters, a natural place to change is after the first break when the topic changes from assessment to reports. Additional presenters may be in charge of activities. There are no firm rules regarding presenter changes or segments. However, it is recommended that presenters introduce themselves at the beginning of the presentation and again before they begin a later segment (other than the first presenter).

A recommended timeline for the workshop follows:

<table>
<thead>
<tr>
<th>Slides</th>
<th>Topic</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1-4</td>
<td>Introduction and Outline</td>
<td>10 minutes</td>
</tr>
<tr>
<td>#5-6</td>
<td>Pre-Information</td>
<td>5 minutes</td>
</tr>
<tr>
<td>#7-34</td>
<td>Referrals and Assessment</td>
<td>60 minutes</td>
</tr>
<tr>
<td>Break</td>
<td></td>
<td>15 minutes</td>
</tr>
<tr>
<td>#35-53</td>
<td>Report Sections</td>
<td>65 minutes</td>
</tr>
<tr>
<td>Break</td>
<td></td>
<td>15 minutes</td>
</tr>
<tr>
<td>#54-67</td>
<td>Report Writing</td>
<td>70 minutes</td>
</tr>
</tbody>
</table>

**About the Authors**

Tiffany Goodson and Renee Rodriguez are Nationally Certified School Psychologists. They both completed their Masters and Education Specialist degrees at California State University, Sacramento. This workshop was completed to satisfy part of the requirements of their Education Specialist degrees. Tiffany Goodson is a school psychologist in the Washington Unified School District. Renee Rodriguez is a school psychologist in the Twin Rivers Unified School District.
APPENDIX B
Workshop Handout

SAMPLE PARTIAL INITIAL PSYCHOEDUCATIONAL EVALUATION
CONFIDENTIAL

| NAME: SUsie Q | SCHOOL: GREAT ELEMENTARY SCHOOL |
| BIRTH DATE: 10/12/95 | GRADE: 3rd |
| AGE: 8 YEARS – 7 MONTHS | PRIMARY LANGUAGE: ENGLISH |

REASON for REFERRAL
Susie was referred for an initial evaluation to determine why her reading is below grade level.

BACKGROUND INFORMATION
Susie is a 3rd grader at Great Elementary School. She has attended Great Elementary school since beginning 2nd grade. Suzie enjoys math, science, art, drawing, and music. Her mother describes her as very sweet and smart in her own way; her father says she has street smarts. She dislikes reading and writing, though her teacher notes she has a comprehensive vocabulary and does better when allowed to respond verbally. Suzie finds reading difficult; she will practice by herself before reading to her mom. She also struggles with writing; she writes several letters backwards and becomes overwhelmed if asked to write too much. Her teacher says she has received preferential seating, intervention, and works with a peer tutor. There has been minimal growth in her reading fluency. Suzie’s latest grades are D- in reading and C in math, B+ in science and A in PE.

Suzie has many friends and is well established socially. According to Susie’s mom, Susie was about a year behind in her social development until she repeated 1st grade. Now, her mother and English teacher report she has many friends and is very social.

Suzie’s family speaks English. She lives with her parents and younger sister. She is described as generally healthy and has no diagnosed medical conditions. She does not take medications. She passed hearing and vision screenings.

METHODS of DATA COLLECTION
• Parent and Teacher Interview
• Clinical Observations
• Wechsler Intelligence Scale for Children, Fourth Edition

BEHAVIOR DURING TESTING
Susie came willingly with the examiner for testing. She was polite and easily established rapport. She had good attention and focus. While she did get tired and needed frequent breaks, she was motivated by stickers and seemed eager to please the examiner. She liked to receive feedback and responded well to encouragement.

The tests used in this assessment were individually administered, current, reliable, normed on representative samples, and were age- and language-appropriate. Due to Suzie’s focus on test items, these results are considered a valid assessment of her current ability to function.
COGNITIVE FUNCTIONING

The *Wechsler Intelligence Scale for Children, 4th Edition* (WISC-IV) is a comprehensive test designed to assess general and specific cognitive abilities. It can be used to provide information on overall intellectual ability and to identify specific strengths and weaknesses in cognitive functioning. Suzie was given ten of the WISC-IV subtests; four composite index scores consisting of two to three subtests represent the child’s functioning in discrete domains of cognitive functioning. All ten subtest scores are also combined to create an overall intellectual ability score. Suzie’s Full Scale Intelligence Quotient (FSIQ) score of 85 places her at the 16th percentile. Her score is in the below average range.

The Verbal Comprehension Index is a measure of verbal knowledge and understanding. It measures verbal reasoning and acquired knowledge, and performance reflects the application of verbal skills to new situations. On the Verbal Comprehension Index Suzie performed in the below average range with a score of 83 which places her at the 13th percentile. Similarities (SS=7) measures verbal reasoning, concept formation, and verbal problem solving. Vocabulary (SS=7) measures acquired knowledge and verbal concept formation. Comprehension (SS=7) involves the ability to evaluate and use past experience and demonstrate practical information.

The Perceptual Reasoning Index is designed to measure the ability to interpret and organize visually perceived material and to generate and test hypotheses related to problem solving. This index includes the ability to reason and solve problems using novel information, spatial processing, attentiveness to detail, and visual-motor integration. Suzie’s Perceptual Reasoning score of 102 is at the 55th percentile and places her in the average range. Block Design (SS=10) measures the ability to analyze and synthesize abstract visual stimuli. Picture Concepts (SS=13) measures abstract, categorical reasoning ability and is the nonverbal counterpart of Similarities. Matrix Reasoning (SS=8) measures novel nonverbal problem solving, nonverbal reasoning, analogical reasoning, and spatial visualization.

The Working Memory Index measures the processes required for complex cognitive functioning, including the mental capacity where incoming information is temporarily stored, calculations and transformation processing occurs, and products of the processing are held. Working Memory is a key component of learning. Suzie’s Working Memory Index score of 77 is at the 6th percentile and places her in the low range. Digit Span (SS=5) measures auditory short-term memory, attention and concentration and requires cognitive flexibility. Letter-Number Sequencing (SS=7) involves the same abilities as well as sequencing, mental manipulation, and visual-spatial imaging.

The Processing Speed Index is an indication of the rapidity with which an individual can process simple or routine information without making errors. It is the ability to process visually perceived nonverbal information quickly, with concentration and rapid eye-hand coordination being important factors. Suzie’s Processing Speed score of 88 is at the 21st percentile and places her in the below average range. Coding (SS=6) involves copying symbols that are paired with geometric shapes and measures visual-motor processing speed as well as short-term memory, learning ability, visual perception, attention and motivation. Symbol Search (SS=10) also measures visual-motor processing speed as well as short-term visual memory, cognitive flexibility, visual discrimination, and concentration.
Sample Presentation Language: *Welcome to this workshop on Best Practices in Psychoeducational Assessments and Reports. I am...* [Introduce yourself. Tell audience about your experience with assessment and writing reports and your personal interest in the topic. Have any additional presenters do the same. Allow approximately 3 minutes per presenter.]

- If the group is small (i.e., 15 or fewer) give each participant a chance to identify him or herself. **ASK** each participant to share approximately how many assessments he or she completes in a school year and how much time he or she generally spends on each student.
- If the group is large (i.e., 20 or more) **ASK** questions such as the following: *How many of you conduct less than 50 psychoeducational assessments in a school year? Between 50 and 100? More than 100? More than 150? Raise your hand if your reports are generally 1-2 pages, 2-5 pages, 5-10 pages, 11-15 pages, 16 or more? Now raise your hand if you think anyone reads your reports.*

**Then SAY:** *This presentation will help you target your assessment so it is appropriate and useful. In turn we will discuss what information should be included in a thorough report and ways to make your reports readable and helpful to parents and teachers. This workshop includes activities and discussions that call for the active involvement of all participants. There will be chances for you to work in pairs, and activities where you will consider a sample report based on the best practice information we will present.*
Sample Presentation Language: Before we begin let us review the logistics. This workshop is scheduled to last 4 hours. We will have two 15-minute breaks. We will start by considering the limitations of the information that will be presented here and additional sources for best practice guidance. We will review legal sources and develop an operational definition of assessment.
Sample Presentation Language: *We will then look at the psychoeducational assessment specifically. We will spend approximately an hour discussing best practice in many aspects of assessment.*
Sample Presentation Language: *After returning from break, we will change topics from testing to writing. We will discuss the specific sections the report should have and what information needs to be included in each. We will have a chance to review a sample report or your own report sample if you brought it.*
Limitations of the Presentation

- Focus on Federal laws and statues
  - Limited court cases involving assessment
  - Best Practice: know the state, SELPA, and district requirements and court decisions affecting your placement

- Know the ethical guidelines for the profession
  - NASP
  - APA
  - State or local professional associations

Sample Presentation Language: This presentation will provide information on best practices for school psychologists conducting initial and triennial special education assessments as well as best practices for writing reports regarding those assessments. Information on best practices was gathered by a review of current literature, research, law, and guidelines. Due to the broad intended audience of this presentation, focus will be on federal guidelines rather than state or district level laws, regulations or practices. School psychologists should always make themselves aware of local and state laws and regulations as well as court cases that affect their practice. Special Education Local Plan Areas or SELPAs and district level guidelines may also affect how psychologists conduct assessments and write reports. For example, some SELPAs have report rubrics they expect all school psychologists to use. The presenters would not suggest the SELPA rules be ignored. However we would encourage you to take the information presented today back to your SELPA and suggest changes to the rubric or even practice of using a rubric to better reflect best practice.

This presentation will refer to the ethical guidelines developed by national associations such as the American Psychology Association and National Association of School Psychologists. Practitioners should be familiar with the whole of such guidelines, as well as guidelines published by state and local groups.
Sample Presentation Language: First, we will very briefly review special education law, which provides the outline of requirements for assessments and reports. Electronic copies of federal education laws are available through the National Dissemination Center for Children with Disabilities or NICHCY at the website noted on the slide. The United States Congress originally passed the Individuals with Disabilities Education Act or IDEA in 1975 as Public Law 94-142, the Education for All Handicapped Children Act. The law has been revised and renamed several times, most recently in 2004 when it officially became the Individuals with Disabilities Education Improvement Act or IDEIA. Educators generally continue to refer to the law as IDEA though we are referring to the 2004 version. Federal regulations for Part B, specific to children ages 3-21, was published in 2006. Best practice is to refer to the codified regulations or CFRs, which are continually updated.

Unfortunately, it can take a long time after a law revision for regulations to become available at a federal level, let alone the state versions. The US Department of Education proposed regulations for Part C related to infants and toddlers in 2007 then withdrew them in 2009, so currently the only published Part C regulations are from 1999.
PSYCHOEDUCATIONAL ASSESSMENTS

Sample Presentation Language: *With that overview in mind, we will begin our discussion of psychoeducational assessments.*
What is Assessment?

- What is a psychoeducational assessment?
  - A set of assessment procedures administered and interpreted to obtain information about the child’s development, learning, memory, academics, behavior and mental health (Sandoval, 2009)

- Why is an assessment important?
  - Assessment gathers information that can guide an IEP team in determining if a student will receive services

- What are the risks of a poor assessment?

Sample Presentation Language: Let us first develop and operational definition of what an assessment is.

**ASK:** What areas are included in an assessment? [Pause. Allow audience to provide answers. Accept answers for up to 3 minutes.]

**Click for text. Then SAY:** Sandoval defines clinical and psychoeducational evaluations as “a set of assessment procedures administered and interpreted to obtain information about the child’s development, learning, memory, academics, behavior and mental health.” [Validate any audience answers that were similar.] As we will discuss multiple aspects of a child’s functioning should go into a thorough assessment.

**Click for text. **ASK **Why are quality assessments important? What are the risks of a poor assessment?** [Allow audience to provide answers. Respond appropriately to answers. Allow responses for up to 2 minutes.]

**Click for text. Then SAY:** Assessments gather the information that is used by the IEP team at the initial or triennial meeting when the team must determine if a student qualifies and will receive or continue to receive services.

(For answer, see next slide.)
Importance of Assessment

- School Psychologist’s role in due process proceedings
- Educational assessments always have consequences that are important for students and their families. We can expect that good assessments lead to good decisions—decisions that facilitate a student’s progress toward the desired goal (especially long term) of the student becoming a happy, well-adjusted, independent, productive member of society. Poor assessments can slow that progress, stop progress, and sometimes reverse progress.

Source: Salvia, Ysseldyke, and Bolt (2010)

Sample Presentation Language: Often a large fear for school psychologists is going to court or being called in a due process hearing. We can be called as expert witnesses to defend a student’s eligibility or program. For many of us that is a large motivating factor in conducting quality assessments. We feel protected; if we go to court, we need to be able to stand behind a high quality assessment. Otherwise, there is the possibility we will be embarrassed or even become a source of liability for our employers. Possibly this fear is part of the reason you are attending this workshop.

Click for text. Then SAY: Regardless of liability and risk we are in a helping profession; we want to help students. I would like to frame this discussion by highlighting the risks and rewards in a way I find particularly powerful.

READ slide. Then SAY: Our goal in this workshop is to present ideas and guidance that will allow you to perform effective assessments and write high quality reports, which will ultimately help students.
Purposes of Assessment

Assessment is REQUIRED before placing a child in SpEd to determine:

1) Whether a child meets the legal requirements of a disability
2) If the disability leads the child to require special education and related services, and
3) What are the student’s areas of academic and functional need?

Sample Presentation Language: As school psychologists we perform these assessments regularly but may not be aware of the legalities. The assessment is required for three important reasons. To determine... READ numbered points 1-3 on slide.
Sample Presentation Language: *Sattler and Hoge (2006)* provide the following 11 steps for an assessment.

READ slide. Then SAY: *These steps are designed to be sequential and build off each other. Information from earlier steps informs decisions made in later steps.*
Sample Presentation Language: *Child Find in IDEA places a legal obligation on schools to identify students with disabilities, even students who are not attending school. In addition, assessment is necessary before students can be given access to special education teachers with their specialized training and paraeducators. Special education services in these tough financial times may have more secure funding than general education programs. On the other hand, there is the possibility of harm resulting from an assessment and IEP. The testing process pulls students who are already struggling from class and may reinforce learned helplessness and an external locus of control so that the student believes there is nothing they can do to succeed academically. Testing is not a perfect science; there is a risk of misdiagnosis. Placement in special education labels a child as disabled. Unfortunately, the prognosis for students in special education is not particularly positive: research shows long term achievement varies widely, and we consistently find special education students have higher high school dropout rates.*
Sample Presentation Language: Click for animation. How do we balance these factors?

Click for text. Then SAY: Referrals for special education assessment should be considered by a multidisciplinary team, such as a Student Study Team. Team members may include school administrators, general and special education teachers, and a school psychologist. Teams should first define the referral concern, and understand what the referring party expects a referral to accomplish. Not all concerns are appropriate for or will be helped by special education. The team may decide an intervention, behavior plan, or help from an outside agency is necessary.

IDEA and No Child Left Behind both emphasize the importance of research-based interventions. Some states such as Colorado now require data on how a child responds to interventions in order to determine if they have a specific learning disability. Response to Intervention or RtI research is demonstrating that the use of quality general education interventions can greatly diminish the number of special education referrals. If the team decides to move forward with an assessment they will need informed consent from the child’s parents. Informed consent means parents understand that the assessment may lead to special education, which means they understand both the benefits and the risks of assessment and placement. The assessment should be individualized to the student.

ASK: What types of referrals have you seen that might have benefited from a multidisciplinary team review first? [Allow up to 2 minutes for audience input.]
Sample Presentation Language: The record review must be included in the assessment, however because parental request is not required, best practice suggests the information should be gathered prior to the referral for use by multidisciplinary teams before a referral.

READ slide. Then SAY: Questions for teams to consider are: Was the child progressing normally and then began a decline, or has there been a concern for years? What is the child’s school history? How frequently does the child attend school? Is there any record of previous multidisciplinary team meetings? What interventions have been tried, and what was their outcome? Are there health concerns? Teams should also consider if there is an academic impact, if English proficiency, environmental, cultural or economic factors are primarily at work, and if the student has received sufficient instruction in reading or math, factors which must be ruled out before determining a child is eligible for special education.
Sample Presentation Language: Assume the multidisciplinary team decides to move forward with the referral. We will briefly review the major components of the referral process before focusing on the assessment. Best practice is for the team to have a specific referral concern. This step is crucial to setting up the remaining steps in the assessment process, however it is often overlooked. Sattler and Hoge (2006) state “If you understand the referral question and the referral source’s expectation about what you can and cannot accomplish, then you will begin the assessment on a firm footing. The referral concern should inform development of the assessment plan, which should be individualized to reflect testing in areas of the student’s suspected need.

Click for shapes. Then SAY: As we just discussed there is the potential for harm with assessment; we want to minimize exposing the child to risk by only testing in areas of need. For example, not all students will need a VMI for motor development. At the same time, we want to avoid gaps of essential knowledge the team may need in order to make an eligibility determination.

Click for shape. Then SAY: Parent permission is required before moving forward with assessment.

Click for shape. Then SAY: Once the school has parental consent the important 60-day timeline begins for the assessment and IEP meeting.

Click for shape. Then SAY: The student is then assessed. IDEA requires the assessment cover all areas of suspected disability and include a variety of measurement procedures. No single test or procedure may be used alone as the sole method or criteria for determining a student’s eligibility. Next, we will consider different aspects of what the assessment should include.
IDEA Section 614

Additional Requirements—Each local educational agency shall ensure that
- (A) assessments and other evaluation materials used to assess a child under this section
  - (i) are selected and administered so as not to be discriminatory on a racial or cultural basis;
  - (ii) are provided and administered in the language and form most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is not feasible to so provide or administer;
  - (iii) are used for purposes for which the assessments or measures are valid and reliable;
  - (iv) are administered by trained and knowledgeable personnel; and
  - (v) are administered in accordance with instructions provided by the producer of such assessments

Sample Presentation Language: Several specific aspects of law must be taken into account during the assessment process.

Click (see next slide).
### IDEA Section 614

**Additional Requirements**—Each local educational agency shall ensure that

- **(A) assessments and other evaluation materials used to assess a child under this section**
  - (i) are selected and administered so as **not to be discriminatory** on a racial or cultural basis;
  - (ii) are provided and administered in the **language and form** most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is not feasible to so provide or administer;
  - (iii) are used for purposes for which the assessments or measures are **valid and reliable**;
  - (iv) are administered by trained and knowledgeable personnel; and
  - (v) are administered in accordance with instructions provided by the producer of such assessments

---

**Sample Presentation Language:** *Assessment plans typically provide a general outline of areas to measure. School psychologists must use professional judgment in the selection of actual tests. IDEA has specific statements regarding use of testing, but when reading the law it is important to consider the spirit, not just the letter.*

READ sections A and (i). **Then SAY:** *IDEA requires psychologists use their knowledge of cultural impact to select tests that do not discriminate.*

READ section (ii). **Then SAY:** *Students whose primary language is not English require special consideration of possible language as well as cultural influences on testing.*

READ section (iii). **Then SAY:** *Generally, the goal is reliable and valid information and test results. However, it is important to note that even invalidated test results may provide useful information, so long as the limits to interpretation are made clear. And finally tests... READ sections (iv) and (v).*
IDEA Section 614

Additional Requirements continued

- (B) the child is assessed in all areas of suspected disability;
- (C) assessment tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the child are provided

Sample Presentation Language: The final two points of this IDEA provision were mentioned before. It is important that…

Click (see next slide).
Sample Presentation Language (continued from previous slide): ...all areas related to the suspected disability are assessed. This does not mean every student must be assessed in all 13 disability categories. In fact, this would be an example of excessive and needless testing which is not best practice. Nevertheless, students often have multiple areas of concern, such as reading problems and emotional distress. Other disabilities are highly co-morbid, for example, autism and mental retardation, therefore assessment in multiple areas is necessary to help determine which disability is the primary area of concern.

Click (see next slide).
Additional Requirements continued

- (B) the child is **assessed in all areas** of suspected disability;
- (C) assessment tools and strategies that provide **relevant information** that directly assists persons in **determining the educational needs of the child** are provided

Sample Presentation Language: *The important idea is that assessments are designed to provide relevant information in order to determine the child’s educational needs.*
IDEA Section 614

Conduct Of Evaluation—In conducting the evaluation, the local educational agency shall

- (A) use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information, including information provided by the parent
- (B) not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability or determining an appropriate educational program for the child; and
- (C) use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

Sample Presentation Language: *Also as previously discussed, IDEA requires that assessments include...*

**Click** (see next slide).
IDEA Section 614

Conduct Of Evaluation—In conducting the evaluation, the local educational agency shall:

- (A) use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information, including information provided by the parent.
- (B) not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability or determining an appropriate educational program for the child; and
- (C) use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

Sample Presentation Language (continued from previous slide): READ section (A) and (B). Then SAY: We will discuss additional assessment measures more when we discuss information to include in reports.

READ section (C). Then SAY: Here are some resources to help you determine if a test you plan to use is technically sound.

Click (see next slide).
Test Review Resources

- Buros Institute of Mental Measurements
  - http://www.unl.edu/buros
- Educational Testing Service Test Collection
- U.S. Department of Education’s Educational Resources Information Center (ERIC)


Sample Presentation Language: READ three bullets. [Do not read websites.] Then SAY: *The Educational Testing Service has the largest test collection database in the world.*
Sample Presentation Language: READ slide. Then SAY: *These points represent possible sources of error that can affect the validity of an assessment. One of the most difficult situations is when a student is from an ethnic minority that is not represented or well represented in normative groups. In these cases, it is best practice to focus on alternate data sources rather than standardized testing.*
Other Assessment Personnel

- Special Education Teacher
- Speech and Language Pathologist
- Occupational Therapist
- School Nurse
- Low incidence disability specialist
- Other???

Sample Presentation Language: *As we all know special education is a collaborative effort. Some children have more needs than others do and the IEP team can seem enormous. Given our large role in assessment and assessment planning, we may sometimes forget we are not conducting the assessment in a vacuum. Other common assessment personnel may include...*

READ slide. Then SAY: *The school nurse is especially important as current vision and hearing screenings should be completed before other testing begins.*

**ASK:** *Has anyone worked with additional personnel not on this list?* [Allow audience response for 1 minute.] Then SAY: *Spend a few moments now sharing a personal experience with a partner about working with another staff member on an assessment.* [Allow participants to share with pairs for 2 minutes.]

**ASK:** *Does anyone have an interesting experience they would like to share?* [Allow participants to share stories with group for up to 5 minutes.]
- If participants shared, then SAY: *Thank you, those were some great stories.*
Sample Presentation Language: Now that we have our assessment criteria established, I would like to take a moment to reflect on the testing process. Here are some suggestions for establishing rapport with students.

READ slide. Then SAY: We know parental consent is required, but we do not always consider the student’s consent. While the student may not be able to refuse testing their cooperation is required in order to achieve valid results. Testing can be enjoyable time spent one-on-one with an interested adult completing engaging tasks. On the other hand, it can be viewed as time spent doing something different away from friends and possibly interesting class activities. Ceilings require students to answer several items incorrectly which means they are being asked to do things beyond their ability. Social/emotional testing asks about personal and often uncomfortable topics. The goal is not to complete testing as quickly as possible, but rather to have the student put forth their best effort and respond openly and honestly.
Standardized Testing

- Primary element in assessments
- Compare students to peers
- Large scale norms (i.e. national)
- Achievement tests
  - Alternatives: district level tests, CBM
- Cognitive or processing tests
  - Necessary for SLD, MR
  - Profile of strengths and weaknesses
- Situations when it is not necessary?

Sample Presentation Language: Standardized testing is often considered the primary element of an evaluation. They allow school psychologists to compare students to their peers nationally. There are two types of tests, achievement and cognitive processing. Depending on the specific referral concern it may be more appropriate to consider achievement data that more closely reflects the classroom performance, such as performance on state or district tests. Cognitive tests are used for diagnosing MR and formerly in the discrepancy model of SLD, though this is no longer required by IDEA. They can be especially useful in measuring a student's relative strengths and weaknesses lead to targeted recommendations.

ASK: Do you have a “standardized” assessment battery? What is in it? How do you individualize your testing? How are tests purchased and shared in your district? Is there anything you might want to do differently in the future? Discuss these topics with a partner or small group. [Allow 3-4 minutes for participants to discuss.]
Social and Emotional Testing

- Unique training of school psychologists
- Necessary to at least rule out
- Interviews
  - Parents
  - Teachers
  - Student
- Observations
- Rating Scales
  - Broad $\rightarrow$ Narrow
- Projective tests

Least pathological explanation is preferred

Sample Presentation Language: *School psychologists have the unique training necessary to conduct social and emotional evaluations. At the very least emotional causes for academic difficulties must be ruled out. Rating scales are common but not always necessary. Interviews with parents, teachers and the student as well as observations are useful sources of information. Best practice for use with rating scales is to start with a broad band scale that measures multiple areas of internalizing and externalizing behaviors, such as a BASC or Achenbach’s Child Behavior Checklist. Any areas of concern found on the broad measure should be followed up by using a narrow band scale designed to assess a specific area, such as the Conners for attention or Child Depression Inventory. If projective tests are used care must be taken to follow the interpretation guidelines in the manual and in some cases first complete training. In general, when considering emotional concerns the least pathological explanation should be considered first. For example if an observation finds a child spends most of the time out of their seat ask about what they child ate for lunch that day or if there is an exciting or unusual event that evening before asking about possible ADHD.*

*Interviews and observations should be part of every assessment, not just for social or emotional referrals. Interviews can include any number of people who are close to a student, including support staff. While the focus is often on the referral concern understanding situations when the student is successful can provide very useful information on what works.*
Eligibility Categories

- Autism
- Hearing impairment or deafness, visual impairment including blindness, or deaf-blindness
- Mental retardation
- Orthopedic impairment
- Serious emotional disturbance
- Specific learning disability
- Speech or language impairment
- Traumatic brain injury
- Multiple disabilities
- Other health impairments
- Developmental delay (ages 3-9)

Sample Presentation Language: *We discussed earlier why IDEA requires an assessment. The first assessment purpose was to determine if the child meets the legal definition of a disability as defined by IDEA. Assessment data is interpreted and compared to special education eligibility criteria. We will not review the eligibility criteria for each disability; however, it is important to consider the 13 disability categories when reviewing assessment data.*

**ASK:** Just for fun, does anyone think they can name all 13 federal eligibility categories? [Allow audience members to name categories. One person can name all 13 or many people can participate.]

**Click** for text. Then **SAY:** *Here they are.* READ slide. Then **SAY:** *These may vary somewhat by state. These are areas under which a child MAY qualify for special education services. Identifying a disabling condition is just one of three criteria that the assessment is responsible for discovering. Often the more difficult question to answer is if the child needs services. For example, if a child has a hearing impairment that is corrected by a cochlear implant, they likely do not need special education services. Even a child with more pervasive concerns such as a learning disability, autism, or other health impairment may have coping strategies or alternative learning methods that mean they can learn within the normal classroom environment without modifications or accommodations to the curriculum. This is why a thorough psychoeducational assessment, which includes information from multiple sources besides just testing batteries such as observations and interviews, is necessary. It is also why a doctor’s note is insufficient for special education qualification.*
IDEA Section 614

Determination Of Eligibility And Educational Need—
Upon completion of the administration of assessments and other evaluation measures
- (A) the determination of whether the child is a child with a disability as defined in section 602(3) and the educational needs of the child shall be made by a team of qualified professionals and the parent of the child in accordance with paragraph (5); and
- (B) a copy of the evaluation report and the documentation of determination of eligibility shall be given to the parent.

Sample Presentation Language: Now that you have conducted a thorough assessment and have high quality, valid data to consider, it is time to make some important decisions. Your assessment data will be used to...

Click (see next slide).
IDEA Section 614

Determination Of Eligibility And Educational Need—
Upon completion of the administration of
assessments and other evaluation measures

- (A) the determination of whether the child is a child
  with a disability as defined in section 602(3) and the
  educational needs of the child shall be made by a
  team of qualified professionals and the parent of
  the child in accordance with paragraph (5); and

- (B) a copy of the evaluation report and the
documentation of determination of eligibility shall be
given to the parent.

Sample Presentation Language (continued from previous slide): ...come to a conclusion
about if the child meets one of the 13 eligibility criteria. IDEA states... READ slide
beginning with “Upon completion” (line 2).

ASK: Does anyone here NOT write a report? What do you do instead? [Allow audience
members to answer and explain. Allow up to 5 minutes.]

Then SAY: IDEA is specific in saying the IEP team, which includes the parents, will make
the final decision about if the child has a disability and their areas of educational need.
However, assessment professionals, especially the school psychologist, are required to
provide a report with assessment information. This report must include your professional
opinion about eligibility and what data you used to come to that decision. The IEP team
may ultimately not agree, but you (or if done as a multidisciplinary team your team’s
report) must write down your own rationale based on your reading of the data.
IDEA Section 614

Special Rule For Eligibility Determination—In making a determination of eligibility under paragraph (4)(A), a child shall not be determined to be a child with a disability if the determinant factor for such determination is—

- (A) lack of appropriate instruction in reading, including in the essential components of reading instruction (as defined in section 1208(3) of the Elementary and Secondary Education Act of 1965);
- (B) lack of instruction in math; or
- (C) limited English proficiency

Sample Presentation Language: *Before you can make an eligibility determination, the Special Rules must be considered. This means...* READ slide beginning with “In making a determination” and ending with “the determinant factor for such determination is...”

Click (see next slide).
IDEA Section 614

Special Rule For Eligibility Determination—In making a determination of eligibility under paragraph (4)(A), a child shall not be determined to be a child with a disability if the determinant factor for such determination is—

- (A) lack of appropriate instruction in reading, including in the essential components of reading instruction (as defined in section 1208(3) of the Elementary and Secondary Education Act of 1965);
- (B) lack of instruction in math; or
- (C) limited English proficiency

Sample Presentation Language (continued from previous slide): READ slide sections (A), (B) and (C). Then SAY: “Essential components of reading” refers to findings from National Reading Panel and National Mathematics Panel. Reading instruction should include direct instruction in phonemic awareness, phonics, vocabulary, fluency, and reading comprehension. Math instruction should follow a coherent progression that allows for proficiency in key topics (rather than continually revisiting topics) and should develop conceptual understanding, computational fluency, and problem solving skills in topics related to algebra including whole numbers, fractions, and geometry/measurement.

For English-language learners ruling out limited English proficiency can be a challenge. Though most school psychologists are monolingual, the Civil Rights Act of 1964 says whenever possible children should be assessed in English as well as their native language.

ASK: How many of you are bilingual school psychologists? [Allow audience to raise hands.]

- If there are responses, ASK: How often do you use your non-English language in assessments? [Allow responses for up to 5 minutes.]
- If there are no responses, then SAY: Well, if you happen to know any promising bilingual students encourage them to consider a career in school psychology!
Sample Presentation Language: *Are there any questions about what we have covered so far?* [Allow audience to ask questions. Answer appropriately.]

Then SAY: *We will now take a 15-minute break. We will begin the second portion of our workshop on reports at (name time).*

**Click** to show next slide.

[Break for 15 minutes.]
Sample Presentation Language: Welcome back. [If a different presenter is taking over, reintroduce yourself.] We will now change our focus from the psychoeducational assessment to the report.
Sample Presentation Language: [Display slide with only the initial question displayed.]

To begin we will ask the basic question of why is it important to provide a written document following an assessment. In other words, what are the requirements and what should be included? Well to be honest each district may offer varying suggestions as to what is to be included in the final product of a psychoeducational report. However, it is important that all of you understand the following presentation is based on what research shows to be of most importance AND best practice. So through both research and accounts of experienced educational psychologist, it was found that the following seven components are vital to a successful and thorough written report.

Click to show text. READ items 1-7.

ASK: “Did we miss anything you feel should also be included?”

- If there are responses, allot a maximum of 5 minutes for discussion.
- If there are no responses, then SAY: Each of the seven categories has a list of criteria and that perhaps we will cover more of your concerns and/or questions as each component is discussed individually.
Sample Presentation Language: [Present the slide with left column first only.] Why do we need to create a written document for the assessment we complete? More importantly, what are the legal and ethical considerations for a report? Well, briefly put, because federal law also requires schools to provide a written copy of the evaluation report and documentation of the determination of eligibility to the child's parents following an assessment. After we, the psychologist and/or school, obtain all of the data, it is the psychologist's role to synthesize the information gathered & incorporate it into a written document.

Click slide to reveal right column. READ right column of the slide (labeled “Considerations”). Then SAY: It is important to note that each state, region, and even SELPA or district may adopt their own report protocols, templates, and methods of delivery. Therefore, it is important to note and adopt your own districts requirements first. Understand that the following recommendations we are providing in this presentation are for psychoeducational reports under legal requirements and best practice. Later in the workshop, we will view a sample report and you can measure and compare this against your own districts current expectations.
Sample Presentation Language: Now we will move on to the outline of the actual report, starting from what is expected in the beginning (i.e. the initial referral question, and continuing to the concluding parts of the summary and recommendations section). To start, we will discuss the beginning section of the report that describes the “reason for referral.” READ left column of the slide (“Special consideration…”). Then SAY: So right from the start in addressing the initial referral, special consideration must be taken when wording these concerns. For example, in a 1982 study several multidisciplinary teams were given similar test results with different teacher referral information. When the teacher referral included the suspicion that the child had a disability, the teams were more likely to conclude the child was disabled.

ASK: Do many of you find this to be the case? If the teacher or parent suspects a disability, then is the outcome typically that the child is found to have some form of learning disability? How do you word this in the written report? [Allow 5-10 minutes for discussion. Summarize any major points.]

READ the right column of the slide (“Much of the variance…”). Then SAY: Therefore, we need to be aware that much of the variance in special education classification can be attributed to the referral rather than the test scores. It is also important that care be taken to accurately portray concerns without influencing the interpretation of the assessment results.
Sample Presentation Language: Following the initial referral, we need to address the history and background information of a child. Overall, a psychoeducational evaluation represents an appraisal of the child’s current functioning against the backdrop of the child’s past. Therefore, the school psychologist needs to obtain a thorough history of the child and include all relevant historical information within the report.

READ first bullet point in the left column (“General initial and triennial evaluations: blue print of the child’s life”). Then SAY: Generally in this portion of the report, both in initial and triennial evaluations, the background info should present as a “blue print” of the child’s life. Ideally, the background section of the report should take the reader from the beginning of the child’s life and leave the reader at the point where the evaluation begins. READ remaining bullets in the left column (SLD and MR/Autism/ED). Then SAY: Research has shown that various adverse pre- and perinatal factors may predispose the child to subsequent learning problems (Michaels, 2005).

READ first bullet and sub-bullet points in the right column (“Previous Evaluation: how has the child tested over time?”). Then SAY: It is important to note that it is not unusual for children who receive appropriate educational programs to demonstrate growth, not only on standardized academic achievement tests but also on measures of cognitive functioning (Lichtenberger, 2006). In contrast, it is not unusual for a child placed in inappropriate educational programs to decline in his or her measured abilities. READ remaining bullets in the right column (“Previous evaluation…”). Then SAY: Accessing prior information before beginning an assessment can even aid the evaluator when testing by providing an idea of performance expectations and prior baselines.
Sample Presentation Language: *Now behavior during the testing period is a vital component following any previous background information. It is extremely crucial to interpret all noted behaviors during the assessment. If negative behaviors are observed during testing, these should be reported by the examiner and obtained test scores should be interpreted with extreme caution* (Fives, 2008).

[Turn your attention and address the slide.] *Important behaviors to look out for are if a child is attentive vs. inattentive, hyper or hypoactive, what were the steps in establishment of good or poor rapport with the examiner, did the child answer impulsively or in a methodical response style, and of vital importance in many instances, was the student motivated or unmotivated. It is critical to note that aspects of motivation may show limited frustration tolerance that can create continual interferences during the testing process, which in turn may compromise the reliability and validity of the obtained test scores.*
Importance of Reporting All Behavior

For example...
- Two children of average intelligence each obtain a standard score of 90 on a reading decoding test. Both students are considered to be functioning within an expected range given their measured abilities.
- However, the process by which each child obtained this score may be dramatically different.

If, for instance, one child was an extremely slow and laborious reader had to reread each word in order to decode it and the other child was a very fast and efficient reader who was able to easily and fluently decode, then although the scores were identical in numerical value the process by which each child accomplished the task is critical to understanding how the child actually reads.

Sample Presentation Language: Reporting the process through which a child comes to a conclusion or response to a task is just as crucial to report as the response itself. For example, if we have two children of average intelligence each obtain a score of 90 on a reading decoding test, then we could just assume both students are functioning within the average range, right? [Pause for 5 seconds.]

Then SAY: Perhaps not. Remember the process by which each child obtained this score may be dramatically different. For instance, say one child showed extremely slow and laborious reading and had to re-read each word in order to decode it. But the second child was a very fast and efficient reader who was able to fluently decode. We can easily see that despite the scores being identical in numerical value, the PROCESS by which each child accomplished the task is critical to understanding how the child actually reads.
Sample Presentation Language: READ first bullet (“Meaning… quality of what…”). Then SAY: *Qualitative data can be more important in decision making than just quantitative or numerical data. Often, if reports are presented with only numbers in mind, members of the IEP team will become focused on and heavily weigh the quantifiable numbers rather than what the data actually represents.*

READ second bullet (“Numbers do not determine…”). Then SAY: *Reports must emphasize assessment results that lead to an eligibility determination, regardless if the results come from test data or direct observations. Both qualitative and quantitative information are critical to the compilation of a useful psychoeducational report.*
Written Report:  
Test Report and Analysis

- Here, discuss both qualitative and quantitative data found.
- Discussion of any prior information known and/or previous testing.
- Has the child made any progress?
- Has there been any specifically designed instruction and, if so, what have been the educational interventions?

Sample Presentation Language: This critical section of the report provides the psychologist with an opportunity to discuss and interpret both the quantitative and qualitative information obtained during the course of the evaluation.

READ slide. Then SAY: Simply reporting test scores, even classification labels, is not sufficient to explain results in such a way that parents and teachers will understand them.
What to report from “scores”:

Include, at a minimum, the following components:
1. What the test covers
2. The meaning of the test scores
3. The limitations of test score
4. Decision resulting from measurement error
5. Common misinterpretations of some particular scores, such as intelligence quotients (IQ); and how the test results will be used.


Sample Presentation Language: So now we ask, what is important to report in the form of scores? At a minimum, the following five components should be included... READ items numbered 1-5 on slide. Then SAY: It is best practice of score interpretation uses informed professional judgment to integrate behavior samples with other data to create useful inferences about the examinee.
Reporting Test Scores

- Additional debate continues to exist between both the usefulness and accuracy of test interpretation.
- Even Truscott et al. (2005) points out the lack of standardization specifically in the interpretation of Specific Learning Disabilities (SLD).

Sample Presentation Language: READ first bullet (“Additional debate…”). Then SAY:
Many times we find the IDEA definitions of disabilities are often vague or broad, with much room for personal interpretation.

READ second bullet (“Even Truscott et al. …”). Then SAY: In our experience, both in school psychology practice and training, school psychologists use a variety of interpretations to try to reach classification criteria. This is most evident in LD where there is some need to determine a significant discrepancy between expected and actual achievement.
Creativity in ID of SLD

“Expected” and “Actual Achievement” based on:
- Specific Achievement Tests
- Sub-scales of achievement tests
- Even IQ scales (Both verbal and performance)

We have seen the ‘discrepancy’ calculated using:
- Standard scores
- Grade equivalents
- Percentile ranks
- NCEs [Normal Curve Equivalents] using different charts, programs and formulas.

Sources: Reed (2001); Tallent & Reiss (1959); Tidwell & Wetter (1978); Urbina (2004)

Sample Presentation Language: [Present slide showing title only. Do not click for entire slide.] **ASK:** For those who using the discrepancy model, through a raise of hands, how many of you follow a specific formula (i.e., 22 point discrepancy) when determining whether a student qualifies? [Wait for response by a show of raised hands.]

**ASK:** Can any of you tell us what you use to calculate a discrepancy for achievement? [Take responses for up to 5 minutes.]

**Click** to show the entire slide. READ slide. [Validate the audience for any responses covered.] Then **SAY:** So, this may be why research has shown that a common criticism of psychoeducational reports is interpretations vary depending on the psychologist. Even dating several decades back an article claimed that many psychiatrists referred to psychological reports as “reflecting the examiner’s personality, being text bookish and not adequately related to theory, as well as being ambiguous and too long” (Tallent & Reiss, 1959, p. 446). In more current findings when viewing different accounts, the most widely cited concern was that psychological reports were too general and not personalized to each student or client (Reed, 2001; Tidwell & Wetter, 1978).
“Irresponsible Interpretations”

So what does this mean for psychologist and reporting their results?

Suggestions?

Sample Presentation Language: In research, this varying interpretation has also been referred to as “irresponsible interpretations” (Groth-Marnat, 2006; Tallent & Reiss, 1959).

**ASK:** So what does this mean for psychologist and reporting their results through the report? How should we respond to this finding? [Pause for 5 seconds].

**Then SAY:** Now at this time, we would like all of you to break into mini groups or pairs and discuss possible solutions to protect psychologists’ interpretations from potential bias due to “lack of standardization?” What is the practice in your own district? [Break into mini-groups, or pairs, and discuss for 5 minutes.]

**Then SAY:** Okay, let us all come back as a whole group and discuss what we can do in the future, or what your district is already currently doing?
**Written Reports:**

**Summary**

- Blue Print for the writing of the student’s IEP
- Summarize all previous information mentioned. No NEW information should be presented.
- Also important, dependent upon the educational setting, the classification and placement of a student is based on the severity of his or her disorder.
- Discrepancy Model vs. RtI Model

Sources: Holdnack & Weiss (2006); Mueller (2009)

Sample Presentation Language: Now we come to the final section of the psychoeducational evaluation, which contains a summary of test results and the recommendations for intervention. This section should not only contain an overview of all major test findings, but also a determination of the child’s eligibility for special education services and specific recommendations for the implementation of specially designed instruction (Holdnack & Weiss, 2006). In essence, this section of the report provides a blueprint for the writing of the child’s IEP.

READ second bullet point (“Summarize all previous…”). Then SAY: Often, the summary and recommendation portion becomes the most viewed and considered section of the report. Here, psychologists should not only summarize findings but restate the referral question(s) and/or concerns and state special education eligibility criteria.

READ third bullet point (“Also important…”). Then SAY: Therefore, in the summary, it is not possible to use a single criterion and generalize each student’s need for services. For instance, school districts that choose to continue with the discrepancy model must establish flexible cutoffs that accurately reflect the student population being served (Holdnack & Weiss, 2006; Mueller, 2009).

Additionally, at least one additional criterion that relates to the specific academic weakness should be present (i.e. impaired phonological processing or slowed naming speed). School districts that have adopted an RtI model must establish coherent, replicable rules for identifying severity (Holdnack & Weiss, 2006). Under these circumstances, coherent and replicable data should utilize multidisciplinary teams to access the same data and reach the same conclusions. Therefore, high reliability should be reached across multiple evaluative reports.
### Written Reports: Recommendations

Why do we need a “Recommendation” section to the psychoeducational report?

- It is appropriate and ethically necessary as it provides guidance to help alleviate referral and/or existing concerns.

---

Sample Presentation Language: *The summary and concluding thoughts brings us to one of the most controversial, and what should be the most heavily weighted, section. Here, it is not only appropriate but also ethically necessary as it provides guidance to help alleviate referral and preexisting concerns.*
Written Reports: Recommendations (Con’t)

Focus should be on:
- Referral Concerns
- A child’s strengths
- Indicate what the child can do (this may make the recommendations more realistic and appealing)

Source: Lichtenberger et al. (2004)

Sample Presentation Language: The most important consideration in developing recommendations is a focus on the child and his or her referral concerns, strengths, and indicating what the child can do so that recommendations are more realistic and appealing to each particular child.

Overall recommendations should be individualized and will vary for each child; while there may be overlap between similar cases, it is not best practice for a school psychologist to have a predetermined list of recommendations that he or she adds to every report. Lichtenberger et al. (2004) state for school psychologists “When creating recommendations, provide a clear link between the concern and the recommended solution” (p. 169). So take into consideration the child’s referral concerns, age, and what may reasonably be expected to work within their environment.
Written Reports:
Recommendations (Con’t)

***Save the best for last***
- It is important that the creativity and expertise flow. What would benefit this particular most. What is most feasible for teacher AND student?
- Teacher experience, parent and staff should all be involved.

Sources: Goldstein, Struckland, Turnbull, and Curry (1980); Lichtenberger et al. (2004)

Sample Presentation Language: Here, it is important to understand that the student was referred for an assessment due to legitimate and at times severe concerns and that is why the recommendation section should be heavily weighted and well planned out.

READ slide bullets. **ASK:** How do you develop your recommendations section? Do you use personal experience? Teacher experience? Have a template of possibilities?
- If responses allow for a group discussion for 5-10 minutes.

Then **SAY:** So, what we hope you take from this section in recommendations is that general recommendations are often preferred because the psychologist making the suggestion is most often not the person implementing the strategy. Broad suggestions enable the teacher or parent to fit them into their class or home, which in turn increases the likelihood the recommendation will be followed. Before writing their reports psychologists may wish to speak to parents or teachers to find out what types of strategies they may be willing or able to implement.

In fact, a study by Goldstein, Struckland, Turnbull, and Curry (1980) indicate that parents' reaction to recommendations can be the most significant predictor of student academic outcomes. Lichtenberger et al. (2004) contend recommendations that are “prescriptive, positive, practical, and possible to implement” (p. 162) are more likely to be considered by those who must execute them.
Recommendations (con’t)

- For example, a school psychologist may note a child’s weakness with fine motor skills and recommend further evaluation by an OT but should not suggest specific exercises or OT services.
- School psychologists may suggest parents take their report to a medical doctor or psychiatrist but should never recommend medications.

Sample Presentation Language: *We really want you to understand how important the recommendation section is, so now we are going to take a minute to make this more concrete for all of you.*

*READ slide. Then SAY:* Another technique is to write a short general recommendation, then include information about a specific service as an addendum to the report. Although it is not best practice, some districts may discourage recommendations or restrict types of recommendations, such as those pertaining to counseling, in order to avoid potential lawsuits or demands for services. In these cases, it may be appropriate for the school psychologist to write in the report that recommendations will be developed by the IEP team, and to come to the meeting with proposals to address the referral concerns.
Sample Presentation Language: *Now we are going to take a 15-minute break. Please be back for our last section of the presentation. We will begin again at (name time).*

(During break get copies of HANDOUT prepared before the workshop began. There should be one handout for each participant.)
Activity

Sample Report

1. What are the strengths, or what works in each section?
2. What are the weakness, or what doesn’t work and why?
3. What would you change to improve an existing section?
4. What additional sections would you expect to be included?
5. How does this SAMPLE compare to those reports in your district and/or what you have seen in your experience?

Sample Presentation Language: [Have the sample report documents (HANDOUT) available and pass out one per person.] Welcome back everyone. We are going to do a brief activity with a partial sample report. Now that we have learned the regulations and best practice for the psychoeducational report, it is important that we examine an actual example. I would like all of you to break up into pairs and view/edit the partial report. BRIEFLY look over each section and write answer the following... READ 5 numbered items on slide.

Then SAY: Now we are going to take 15 minutes to answer the following questions with a partner. You can discuss these together, and then we will come back together as a whole group to discuss. [Allow participant to break into pairs. Give group 15 minutes of discussion in pairs before come back to whole group.]

Then SAY: Okay everyone. Now that you have had some time to look over the sample report, let us discuss in the whole group what you found? Let us start with the strengths section. [Give a maximum of 5 minutes of discussion per number. If a longer discussion begins, summarize main points and proceed to next slide. It is important that the audience at least get an understanding and concrete example of what is to be expected.]
Sample Presentation Language: *Okay, now that we have considered what the legal requirements are for the report, we want to shift our attention to additional considerations to report writing. Although these requirements are not according to educational code, they are best practice and ethical consideration. The items to be discussed are as follows: READ slide numbers 1-5.*
Additional Considerations:
Audience and Readability

- Understandable to parents and staff?
- What are the guidelines/best practice for readability?
- Lichtenberger et al. (2004) suggests “the language in your report should not be more complex than that used in a daily newspaper” (p. 29).

Sources: Slaney, Masha, Gabriel, & Maraun (2009); Smith-Harvey (2006)

Sample Language Presentation: Now an important question when reporting a student’s test results is the consideration of the audience and readability. So, the big question becomes is the report easily comprehended by both parents and staff? READ bullets 2-3.

Then SAY: Although clear communication has continuously been stressed in law, research has repeatedly found that “psychologists often write reports that are very difficult for non psychologists to read” (Smith-Harvey, 2006). The majority of psychologists believe their reports are clear (Slaney, Masha, Gabriel, & Maraun, 2009).
Sample Presentation Language: *In continuing in the thought of readability, who would you suspect to be most guilty of complex and incoherent report writing: a veteran or seasoned psychologist or a more novice and inexperienced psychologist? By a raise of hands, show me who you believe to have “less jargon” when reporting a psychoeducational evaluation. Okay raise your hand if you think a seasoned psych? [Pause and wait for a raise of hands. Record estimated number.] A newer psychologist? [Pause and wait for a raise of hands. Record estimated number.]*

*Then SAY: Okay, so if you raised your hand for novice psychologist then you actually were correct! Actually, it is practicing psychologists who often are guilty of redundant report writing. According to Smith-Harvey (2006), novice psychologists have only recently made the transition from “nonpsychologist” to “psychologist,” therefore these individuals are more likely to comprehend the difficulties that nonpsychologists (i.e., teachers or parents).*
Why are psychoeducational reports written at such a high readability?

Typically in many situations now and in times before IDEA, reports were written primarily for other psychologist and/or other mental health professionals.

Sample Presentation Language: **ASK:** *Why are reports written at such a complex level? What are your thoughts?* [Allot a maximum of 5 minutes for a whole group discussion.]

**READ** second bullet (“Typically in many situations…”). **THEN** SAY: *However, due to new regulations and recent parental rights, current IDEA requires providing a copy of the evaluation data to the parents; thus showing how the report’s readership has extended to a much larger, and often less highly educated, audience. As a result, psychologists must now challenge themselves to try to write reports that are accessible to this larger audience.*
Additional Considerations:
Visual Aids

Miller and Watkins (2010) found that parents who read a report with graphs recalled significantly more information correctly than parents who read a report without visual aids. Parents who read a report with graphs or charts also expressed greater satisfaction with the information.

Sample Presentation Language: Okay now we are going to switch our attention to the use of visual aids in a report. During this presentation we have talked about BOTH what are some legal requirements according to education code and best practice. The use of visual aids is just that, BEST PRACTICE. However, research shows that it does in fact make a difference for the positive. For example... READ slide.

Then SAY: Furthermore, regardless of the type of report, parents with a college degree performed better on the recall measure than parents without a college degree. This study emphasizes that multiple means of presentation such as visual graphs or charts along with written explanations within the psychological report enhances the communication and thus increases the level of understanding for all participants.
Additional Considerations:
Ethical Protocol

- A number of ethical issues relate primarily to writing psychological reports and are available from the APA or NASP.

- School personnel must meet new challenges and allow the intelligent use of prevention, intervention, assessment, and accommodations in helping children succeed.

Sample Presentation Language: Okay, so we all know that we are legally obligated to specific criteria when it comes to psychological reports, but there are a number of ethical issues related to reporting a student’s results as well.

READ first bullet (“A number of…”). Then SAY: IDEA requires us to think more about the children we are serving instead of mechanically applying one method to all students. This ultimately means integrating information from multiple sources to develop a comprehensive picture of a child’s abilities, not just filling in numbers on an impersonal report template and labeling them.

This is why it is important to understand that... READ second bullet (“School personnel…”). Then SAY: So please understand that it is easy to get lost in all of the legal guidelines, but if you can look at reporting results with an ethical understanding as well, this will be greatly beneficial as well.
Additional Considerations: Child-Centered Writing/Strength-Based Focus

- Snyder (1994) says that focusing on tests and numerical results does not help the IEP team better understand the child.

- Use the child’s name before the test name, as in “Bob was given the WISC-IV” rather than “The WISC-IV was given to Bob,” can make a huge difference in writing style.

Sample Presentation Language: So a huge focus of the report should be on the child, correct? So would it make sense that an additional consideration, and perhaps a vital one, would be child-centered writing? Of course, it would. After all, we are focusing on the child and determining his or her eligibility. Some experts even like to refer to this type of writing as a “strength-based” focus.

READ slide
**Strength Based Focused Writing**

- **EXAMPLES:**
  - When analyzing test results, always look for the highest results first rather than only reporting the student’s deficits or weaknesses.
  - In addition a determined focus on strengths can help ensure the school environment is also focused on positive aspects of student growth.

Sample Presentation Language: *As we know, all children have both strengths and weaknesses. However, too often referral questions are based upon a child’s weaknesses and thus focus assessments on the student’s deficits or negative traits. Unfortunately, this creates potential for harm through examiner or teacher biases or if students develop a negative self-fulfilling prophecy (Snyder, Ritschel, Rand, & Berg, 2006).*

**READ slide. Then SAY:** *Doing so provides information that can be used to target interventions by identifying what works or what does not need to be addressed.*
Hope Theory

- Snyder (1994) cites the "Hope Theory," or goal directed thinking, as a possible framework
  - This theory focuses on the importance of including information about client-centered goals.
- Examples of Strengths:
  - Having good interpersonal skills, maintaining appropriate eye contact, showing compliant behaviors, or engaging in age appropriate conversation.
- Important to note:
  - *Strengths can easily become weaknesses if they are overused or used inappropriately.
  - For example, a child's great sense of humor may be displayed at inappropriate times during class and become disruptive. Discussing strengths within an appropriate categorization and emphasizing them as such should be the goal.

Source: Snyder et al. (2006)

Sample Presentation Language: READ first bullet and sub-bullet [“Snyder (1994) cites...”]. Then SAY: Similar accounts described as “Positive Psychology” which identify and focus on student’s strengths are becoming increasingly recognized and emphasized within psychological assessments (Snyder et al., 2006). So let us explore some examples of strength.

READ second bullet and sub-bullet (“Examples of strengths...”). Then SAY: Also important to note... READ third bullet and sub-bullet (“Important to note...”).

Then SAY: The “Hope Theory” is based on the notion that every student has strengths that need to be recognized. This is not to say, however, that strength-based assessments will be an effortless evaluation for each case. Actually, quite the contrary. In fact, it may be more difficult to find strengths based on the severity of the student’s referral concerns. Challenging students, however, are often the ones who benefit most from having their strengths assessed (Snyder et al., 2006). The ultimate goal of the psychoeducational assessment, then, influences the discussion and implementation of the most optimal interventions through a student’s strengths and potential.

[Emphasize] So, the key focus here is to truly hone in on the strengths, even minute in scale, of EVERY child.
Activity Part II

1. Highlight areas where you would word things differently.
2. Based on the information provided, what recommendations would you make to Suzie’s teachers and parents?
3. You may rewrite a portion of the report to reflect the best practice techniques we have discussed.

Sample Presentation Language: [Have the sample report documents (HANDOUT) available and pass out one per person.] I want us to return to the partial sample report we discussed earlier. Now consider the report in light of our discussion on best practices in report writing. Answer the discussion questions shown. READ numbered items 1-3. [Allow participants 10 minutes to work in pairs.]

ASK: Would anyone care to share some of the areas they would like to change? [Allow audience to share for up to 5 minutes.]

ASK: Does anyone have any plans to change in their own reports? [Ask audience members to share.]
Presentations of Psychoeducational Reports to the IEP Team

- Reporting assessment results. Where do we start?
- Visual aids (i.e. IQ bell curve)
- Parent friendly language
- Child’s strengths

Sample Presentation Language: *What are the best practices in reporting the assessment results to the IEP team?* [Pause and give time for response, roughly 2-3 minute discussion. Summarize points given by the audience.]

- If no responses, **ASK**: *How would we start a report?* [Give additional 2-3 minutes for response.]

**Then SAY:** *The format of the written report is how we would start reporting the results during the verbal IEP meeting. Use of visual aids is also important. Besides the example of the bell curve that I have provided, what are some additional visual aids that might be useful in presenting your reports results?* [Allow 5 minutes for discussion.]

**Then SAY:** *Also, parent friendly language, just as in the report, is very important during the IEP meeting. We need to remember our audience: parents, and at times students, are involved in the meeting and our language needs to be appropriate for all attending. Also, as required by IDEA parent involvement should be incorporated into discussion of results, recommendations, and eligibility and placement decisions.*
Overview & Wrap-Up

1. Psychoeducational Assessments
2. Psychoeducational Reports
3. IEP meeting report presentation

Sample Presentation Language: *All right now I am going to quickly summarize what we covered in presentation.*

*The topics approached throughout this project have raised a wide range of issues and controversies both from legal and ethical standpoints. The psychological assessment is often at the core of many challenges because the psychological evaluation communicates and summarizes the results of an entire assessment. It is within the assessment that the evaluator interacts with the student and often where major decisions regarding a person’s psychological status are made. The findings, content, tone, and recommendations of a psychoeducational evaluation may affect the student for many years to come. Thus, school psychologists have a significant responsibility to present a report that exemplifies the best of what practitioners can provide. Our hope is that this project will aid fellow practitioners to better understand the challenges we face both in legal and ethical terms.*

*Throughout the presentation, research guiding best practice was widely cited, emphasizing the ideals of conducting a comprehensive psychoeducational assessment and writing a report, which hopefully lead to the most optimum special education and access to most appropriate services*
Questions?

Thank you for your attendance, time, and participation in today's workshop!

For further questions and/or comments, please contact the presentation authors via email:

Tiffany Goodson  caltiff@hotmail.com
Renee Rodriguez  nannernase@yahoo.com

Sample Presentation Language: Thank you all for your time. I (We) truly appreciate everyone coming today and participating. I (We) hope that all of you have a better understanding of what is expected in terms of a psychoeducational assessment. I hope that you can take this information back to your districts and apply, if not already, the best approach in all of the assessments you encounter.

Thank you again. If you have any further questions or comments, please refer to the presentation authors. Their contact information is listed here.
References


References continued


Resources continued


REFERENCES


