

School Observation:

This school psychologist's observation took place on 1/14/2020 and began at 12:45. Samantha was in class and everyone was taking turns reading about the Anasazi Indians. She had her water bottle in her hand or near her mouth for 5 minutes. straight. She moved around her desk quite a bit compared to her peers, picking up papers off the floor, adjusting her shoes, closing and opening her book (taking the book off desk into her lap opening and closing it). She did all of this without being disruptive to those around here. When called on she was able to read well and knew where her class was and continued appropriately. She put away her book 6 minutes before the rest of her class as they were answering questions reflecting on what was read. Teacher mentioned that books should be out, that they were not done with history yet. It took Samantha a minute to get her book back out. She goes back to holding/playing with her water battle and the handle clip that goes over the top as well as the red bow for another couple of minutes. Again, even though she appears off task she is not disruptive to others and she appears to be listening to what is going on as she was able to jump right in when called on.

Class begins working on independent worksheets on the Anasazi Indians they had just finished reading about. Everyone is working for 2 minutes and then Samantha starts rereading and doing work for about 2 minutes. Teacher announces that if you don't finish, they need to reread at home to finish their worksheets. Samantha starts to put her book away and says she will reread at home. Teacher reminds them to use their time now to do their work and Samantha pulls out her book and starts to work again and everyone continues working for 10 minutes.

Class then goes over work together. She fills in some answers she did not have. As she writes her legs bounce up and down in place. Class continues to review. She begins to put her material away a good 2 minutes before everyone else.

Class moves on to science. Class activity was to sort animals by specific criteria, bones/no bones. Samantha was fully engaged with her teammate. Samantha was attentive to the fact that her teammate was supposed to be called by a fellow classmate to leave for DIBELS testing and let her teacher know. Teacher confirmed that Samantha was correct and that her teammate needed to get tested. While working alone Samantha appeared to have a question and went to go up to her teacher to ask the question. Her teacher saw her coming and reminded her she needed to raise her hand at her desk. So she quickly went back to her desk and raised her hand and her teacher came to her. Samantha's teammate came back 9 minutes later and Samantha left to get tested at 1:45 she back at 1:54 (9 minutes later) and sent a classmate to go get tested. Challenge cards were given out. Samantha's team and about half the others did not listen to directions and did not cut the hippo card out so they could not sort it. Next card was the tarantula and the rest of the class now knowing that they needed to cut out the card was all and everyone participated rushing to sort.

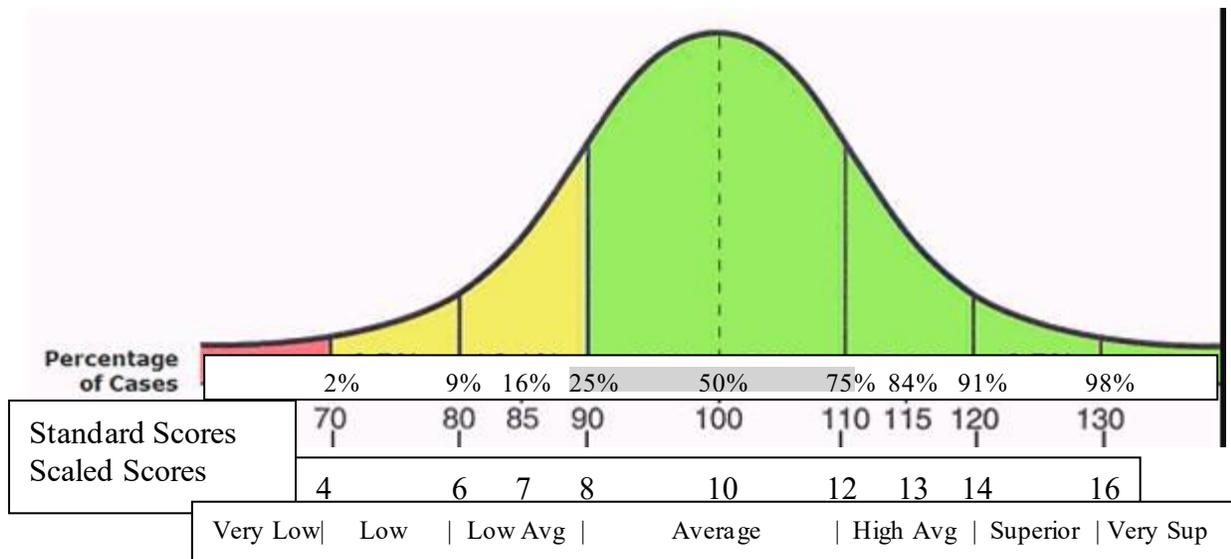
At 2:10 Class then went out to deliver canned goods for the needy to the main building. Samantha is well liked and primarily playing with two girl friends, but also playing with others too including boys. They are climbing the play structure, running around, stopping and talking with each other. At 2:30 recess ends and they line up to go back into class.

Class returns and are putting assignments away and go over the prayer requests on the wall. At 2:38 Bible study story of Saul/Paul is shared regarding his life before his name change and after. Samantha was as attentive as her peers. 3:05 bell rings for everyone to be dismissed. When teacher was asked was this a typical day for Samantha, Mrs. Grander said yes, a pretty normal day for her.

ASSESSMENT RESULTS AND CLINICAL INTERPRETATION OF FINDINGS

Throughout the report standardized test scores for academics and cognitive ability and processing scores are provided followed by a discussion of how a student’s performance is best interpreted. The qualitative descriptors used to label these standardized scores are not consistent across test makers. Some tests have wider or narrower ranges, different labels, or the same label but for a much different area. This often makes for confusing interpretations because the statistical underpinnings of the assessments are all based on the same normal distribution. Therefore, for the sake of statistical consistency and logical interpretation, I will be using the following descriptors unless otherwise noted for specific test(s). The following chart provides descriptive ratings for Standard Scores (mean of 100 and standard deviation of 15) and Scaled Scores (mean of 10 standard deviation of 3) for normally distributed norm-referenced tests:

Descriptive Rating	Standard Score	Scaled Score	Percentile Rank
Very Superior	>130	>16	≥98
Superior	121-130	15-16	92-98
High average	111-120	13-14	76-91
Average	90-110	8-12	25-75
Low Average	80-89	6-7	9-24
Low	70-79	4-5	2-8
Very Low	<70	<4	≤2



ASSESSMENT RESULTS AND CLINICAL INTERPRETATION OF FINDINGS

All assessment instruments were administered in a quiet setting and without distractions. Tests were conducted in conformance with the instructions provided by the publishers, unless explicitly noted in this report. All materials were selected and administered so as not to be racially, culturally or sexually discriminatory. Tests administered are deemed to be a best effort under the circumstances for the purpose for which they are to be used and considered reliable and valid. All assessments given were administered individually.

Assessment Behavioral Observations by School Psychologist

Samantha met with this school psychologist on two occasions for testing at Sutherland Elementary in Stockton, brought to the school by Mrs. Smith. She came readily into the office with her mother and greeted the examiner and appeared comfortable. Samantha's initial response to the examiner was positive, and she recalled seeing me at her school. She was clean and appropriately groomed and dressed as she was at her school. After brief introduction and mother providing me with some questionnaire sent to the family earlier, we discussed if mother should stay in the room while Samantha is working. Mother suggested leaving and working in the library outside. Samantha appeared fine with that. After mother left, we talked about what she liked about school. She said she enjoyed all subject areas, maybe science and math a little more, and enjoys playing with friends. Outside of school she enjoys gymnastics. We talk about what we would be doing, and that she when she is tired or needs a break to let me know before we start a new section. During testing, Samantha was friendly, polite, and demonstrated a strong effort throughout the evaluation. I suggested breaks after 3 to 4 subtests depending on length which the first two times she said she was fine and wanted to continue. She accepted a break at about an hour and a half into testing. She was asked if she would like to go to the bathroom, talk to mother, or get a drink. She declined, but was curious about a deck of cards on the table. We played the card game "Blink" for fun for 10 min. Independently Samantha did not request a break once and we stopped assessment after a little over 3 hours, and we met a week later and that session lasted approximately an hour and a half. Again, throughout the assessment process Samantha appeared comfortable in the testing environment, as she always smiled easily and was very compliant giving her best on the most challenging of items. Overall, with little need for encouragement from the examiner, Samantha continued to put forth a strong effort even as items became progressively more difficult. Samantha's attention and effort were good throughout the one-on-one test setting. It was observed at times, that Samantha's legs would bounce in place while she was listening or waiting, but while she was thinking her legs would at times speed up or completely stop. There didn't seem to be any consistency to that. As mentioned above, test conditions were good and external distractions were minimal. Tests were conducted in conformance with the instructions provided by the publishers, unless explicitly noted in this report. All materials were selected and administered so as not to be racially, culturally or sexually discriminatory. Current test scores appear to be an accurate appraisal of Samantha's present functioning level. The results of this assessment are considered valid.

Cognitive Abilities and Processing Results

Evaluation procedures included the use of standardized measures, informal assessment, observation in a variety of settings, and interviews of student, teachers and/or parents. As stated before, all materials were selected and administered so as not to be racially, culturally or sexually discriminatory. Tests administered are deemed to be a best effort under the circumstances for the purpose for which they are to be used. All assessments given were administered individually. This is a snapshot in time of Samantha. The results of this assessment are believed to be reliable and valid given her effort, concentration and focus on task. The scores and data from these tests are below. Due to the California Department of Education's 1997 Memorandum on the Larry P. and Crawford case, no intelligence test from the banned lists were used and no overall measure of intelligence is reported. In addition, single estimates of intelligence do not provide much insight into Samantha's cognitive processing strengths and weaknesses, weaknesses that parents are concerned that may be impacting her educational performance. Therefore, the following section will explore her cognitive abilities through all 8 basic processing areas identified in CCR 3030(b)(10) to address this concern and to see specifically if there is a pattern of strengths and weaknesses that may impact her educational performance.

Basic Psychological Processes:

Cognitive Association is the process of acquiring information in memory, and the system for relating that information to previously learned information to develop patterns or logical groups. This is a foundational process that is required for more complex operations that take place in conceptualization. Included in Cognitive Association is the element of efficiency, i.e. how fluidly one can retrieve information from long term memory. Samantha's ability in this area is estimated to be fall between the average and superior range. This is true for orthographic processing, the quick retrieval/automaticity needed for reading letters and numbers which falls in the upper end of the high average range (see CTOPP-2 results below). This is also true of her ability to retrieve verbal information from memory in a timely fashion falling in the average to superior range (see DKEFS results below). Interesting to note that Samantha performed in the average range on Letter and Category Fluency, but in the upper end of the superior range for the more difficult Switching Fluency which taps into Executive Functions and therefore requires mental flexibility and sustained attention. Overall this is an area of strength and is consistent with an Otherwise Normal Cognitive Ability Profile (ONCAP). This processing is consistent with timed/fluency related achievement testing as seen below. This begs the question why does the schools assessment show such poor recent reading results. The answer is that the schools results are actually mixed. While the recent poor reading performance on the STAR testing at school is concerning, it is a computerized assessment. A problem with computerized scoring is the computer cannot tell if the student is paying attention or not. As will be explained in more detail later, emotional engagement is required for those with attention difficulty to sustain attention or that there needs to be someone (a preferred individual, someone they want to please) or a extrinsic reward (they really want) to keep them motivated. I would hazard to guess that the material that Samantha was asked to read from the STAR assessment was not interesting to her, and that the computer in and of itself does not give her the emotional feedback a preferred person would. I am confident in that assertion because when her DIBELS NEXT assessment (conducted by Hogwarts School when I was observing her class) was shared, her reading achievement falls

in predominantly the At Benchmark to well into Above Benchmark range which is consistent to the WJ-IV results. What do the DIBELS NEXT and WJ-IV have in common...they are both individually administered by likeable adults...and better representation of what her true reading achievement is.

Comprehensive Test of Phonological Processing Second Edition (CTOPP-2)

SUBTESTS	Broad Factor	Narrow Factor	Composite Area	Scaled Score	Percentile Rank
Rapid Digit Naming	Long Term Retrieval	Naming Facility	Rapid Symbolic Naming	14	91
Rapid Letter Naming	Long Term Retrieval	Naming Facility	Rapid Symbolic Naming	12	75
Composite Area	Broad Factor	Narrow Factor	Descriptive Rating	Standard Score	Percentile Rank
Rapid Symbolic Naming	Long Term Retrieval	Naming Facility	High Average	119	90

Delis Kaplan Executive Function (DKEFS)

SUBTESTS	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Verbal Fluency Test: Category Fluency	Long Term Retrieval	Ideational Fluency	11	63
Verbal Fluency Test: Switching Fluency	Long Term Retrieval	Ideational Fluency	16	98
Verbal Fluency Test: Letter Fluency	Long Term Retrieval	Word Fluency	10	50

WJ-IV Ach Scores reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Sentence Reading Fluency	110 (99-121)	Average	74
Sentence Writing Fluency	110 (99-121)	Average	75
Math Facts Fluency	111 (103-119)	High Average	77

DIBELS NEXT Grade 3*	Score Reported	Score Description	Putting Score in Perspective
Words Correct	102	At Benchmark	105 is Above Benchmark
Accuracy	95.3%	Below Benchmark	96% is Benchmark
Retell	52	Above Benchmark	40 is Above Benchmark
Retell Quality	4	Above Benchmark	2+ is Above Benchmark

***Provided by Hogwarts School**

Cognitive Conceptualization is the process of using information in an increasingly more complex and fluid manner. This is often called, abstract thinking, fluid reasoning, or simply reasoning, the ability to solve novel problems; that is, problems that cannot be solved by relying on previous situations or solutions. This processing area allows a person to make generalization or inferences. It is comprised of Induction - the ability to observe a problem and understand the underlying rules or principles that will govern the outcome; being able to generalize from specific situations to others and to a lesser extent General Sequential Reasoning - the ability to reason logically using established premises and principles and Quantitative Reasoning – the ability to solve arithmetic type problems. Given Samantha’s performance her Fluid Reasoning estimate is estimated to be in the average range.

Conceptualization also includes Executive Functions (EFs) such as the ability to initiate, organize, plan, working memory and shift one’s mindset. These abilities are also a required component of Cognitive Conceptualization. However, where fluid reasoning has more to do with specific types of problem solving, EFs have to do with coordinating various processes to problem solve, hold in working memory, where to start, and when to give up and try a different approach. Samantha’s father, Mr. Smith, and Samantha’s teacher, Mrs. Grander, filled out the Behavior Rating Inventory of Executive Function Second Edition (BRIEF-2) as attention and EFs are an area of concern and the BRIEF is sensitive to the EF measures associated with attention problems. The Global Executive Composite (GEC) is an overall summary that incorporates the Behavior Regulation Index (BRI), Emotional Regulation Index (ERI) and Cognitive Regulation Index (CRI). When BRI, ERI and CRI T scores differ from 11 points or more obscures important differences and doesn’t adequately represent the child. Thus, the various Index Scores should be looked at more closely. Ratings at school and at home are very different. All ratings by father are Clinically Elevated/Significant. With BRI and ERI higher than her CRI, which indicate that her behavioral and emotional regulation are significantly compromised at home more than her cognitive regulation which is also still significantly impacted when compared to peers. At school there is no 11 point difference between the between the 3 Indexes and her GEC is within normal limits although on the very high end. Of the three Indexes only the Cognitive Index falls within the Mildly Elevated range or an almost inverse of what is occurring at home. Why this might be? It is possible that Samantha has an attention

problem. It is a misconception that those with attention problems cannot stay focused. It is just that it requires an emotional connection to either the task (or individuals involved) and it requires more energy to be able to do it. So they really have to like it or like the one they are with and they have to have energy to do it. Samantha really enjoys school. She likes to get praised for doing good work, and the activity, her peers around her are focused on school work and the teacher keeps a good pace on activities and engagement and is well organized. Even in this environment Samantha can appear off task, but she is still listening. She just needs to fidget here and there to stay focused. Staying focused does take its toll with regard to energy expenditure and like on a long car ride when we need to stay focused, we might turn up the radio, roll down a window, talk to a fellow passenger, Samantha is doing the same by bouncing her leg, picking stuff off of the floor, getting a drink, etc., which are all classroom acceptable as she is not disturbing others. However, even in class Samantha does not like independent work. When it is just her, she is more off task and this is when her teacher's comments about her not understanding or having processing difficulty makes sense in that Samantha is asking her teacher to repeat instructions, in order to help her stay on task, or that given her fatigue she needs clarification. Why is her behavior at home so much more challenging? Time of day may play into it. After school she needs to get the wiggles out and expend some energy doing something she enjoys (playing with friends, gymnastics, etc.), which is counter intuitive. Think of it like a car battery that is charged by running the engine, emotional engagement charges her engine. This is the truism of the phrase time is relative, where we can get so lost in doing a fun task and lose track of time...even forget to eat. It also speaks to how a boring activity can make a minute feel like an eternity and suck the life out of you. This is how it is for individuals with an attention problem, but to a more extreme degree. Even though the fun activity charges one part of the battery, her battery can be depleted very quickly when required to do a task that is not emotionally engaging or something she actively would prefer not to do, especially when her reserves are at its lowest i.e. towards the end of the day. Homework is pretty independent. She knows it needs to get done so she intuitively asks for help. Having one of her parents near her talking to her keeps her engaged. The problem too is that negative attention works too, so being defiant, getting angry can charge her battery as well, it's just not emotionally healthy. She may do it however if she feels she's being too needy. She may prefer her parents think of her as defiant yet capable, than needy and incapable. None of this is done on a conscious level, it is more a reactive self preservation process than anything else.

How much of an impact is this attention difficulty causing? Estimates of real world application of Conceptualizations skills can be found in Adaptive Ability measures. Both her father and teacher provided responses to the Adaptive Behavior Assessment System Third edition (ABAS-3) questionnaire, where they rated Samantha's Conceptual and Practical (measure of EF) adaptive behavior. The Conceptual domain involves competence in memory, language, reading, writing, math reasoning, acquisition of practical knowledge, problem solving, and judgment in novel situations, among others in real world settings. The adaptive skills that make up this domain are Communication, Functional Pre-Academic and Self Direction skills. The Practical domain involves learning and self-management across life settings, including personal care, job responsibilities, money management, recreation, self-management of behavior, and school and work task organization, among others, again in real world setting. The adaptive skills that make up this domain are School Living, Health and Safety, Self Care and Community Use. There is consistency between EF ratings and adaptive ability function. At home her adaptive abilities fall

from the bottom of the low range to the bottom of the average range, while at school they range from the middle of low average to the upper end of the average range. What is also important is that there is predominant agreement that her practical skills are perceived as her stronger adaptive skill across environments. And that when her attention is able to be engaged at an optimal time (at school) she does not have additional EF weaknesses. Therefore it is primarily attention that impacts her EF and not EF weaknesses in and of themselves and important distinction. At this time it appears that at least at school, her attention difficulty is not impacting her educational performance as the consistency between her adaptive ability scores, math achievement scores and the fluid reasoning estimates are consistent. This may not always be the case, so future recommendations will be made at the end of this report. Overall this is an area of strength and is consistent with an Otherwise Normal Cognitive Ability Profile (ONCAP).

Neuropsychological Assessment 2nd Edition NEPSY-2

SUBTEST	Broad Factor	Narrow Factor	Scaled Score Combined	Percentile Rank
Animal Sort	Fluid Reasoning	Induction	9	37

Delis Kaplan Executive Function (DKEFS)

SUBTESTS	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Twenty Questions (Weighted Achievement Score)	Fluid Reasoning	Induction	10	50

T-Scores for behavior rating scales are not normally distributed and are highly skewed given this the following guideline is provided.

T- Score	Guideline
70+	<u>Clinically Elevated/Significant</u>
65-69	Potentially Clinically Elevated
60-64	<i>Mildly Elevated</i>

BREIF 2

	Parent T- Score	Parent Percentile	Teacher T- Score	Teacher Percentile
Inhibit	<u>85</u>	<u>>99</u>	49	63
Self Monitor	<u>79</u>	<u>>99</u>	51	71
Behavior Regulation Index	<u>86</u>	<u>>99</u>	50	67
Shift	<u>87</u>	<u>99</u>	65	92
Emotional Control	<u>83</u>	<u>>99</u>	52	83

Emotional Regulation Index	89	>99	60	88
Initiate	66	95	66	91
Working Memory	75	99	59	81
Plan/Organize	71	99	63	89
Task-Monitor	69	97	57	80
Organization of Materials	67	97	53	77
Cognitive Regulation Index	75	98	61	83
Global Executive Composite	83	>99	59	80

ABAS-3 Domains	Subtest	Father Standard/ Scaled Scores	Father %ile	Father Descriptive Rating	Teacher Standard/ Scaled Scores	Teacher %ile	Teacher Descriptive Rating
Conceptual	(Think of it as Applied Fluid Reasoning)	76 (70-82)	5	Low	91 (85-97)	27	Average
	Communication	7	16		8	25	
	Functional Pre Academics	7	16		9	37	
	Self-Direction	4	2		9	37	
Practical	(Think of it as Applied Executive Functions)	85 (79-91)	16	Low Average	102 (95-109)	66	Average
	Community Use	9	37		12	75	
	Home-/ School Living	5	5		10	50	
	Health and Safety	7	16		10	50	
	Self-Care	9	37		13	84	

WJ-IV Ach Scores reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Math Calculation Skills	98 (92-104)	Average	44
Calculation	82 (74-90)	Low Average	11

Math Facts Fluency	111 (103-119)	High Average	77
Math Problem Solving	89 (81-96)	Low Average	23
Applied Problems	95 (86-104)	Average	37
Number Matrices	84(73-95)	Low Average	14

Cognitive Expression - Language is the ability to apply the breadth and depth of acquired knowledge, including language, culture, adaptive and academic skills. It can be viewed as a product of what an individual has had the opportunity to learn and how one can communicate it to others. Where expression has to do with communicating what one knows (e.g. talking, writing, nonverbal actions), association has to do with how efficiently that information is stored and is retrievable. Samantha's overall ability in this area estimate is estimated to be low end of average to middle of the average range. Overall this is an area of strength and is consistent with an Otherwise Normal Cognitive Ability Profile (ONCAP). This processing area is consistent Oral Language related achievement testing. There are some interesting spot weaknesses in picture vocabulary for achievement. . Where literature exposes us to more expansive vocabulary if reading is not a preferred activity it may explain some of the vocabulary weakness. I often chalk this up to the Youtubing of our children, because conversational vocabulary (used in videos) is limited and children are not reading for pleasure or interest.

Neuropsychological Assessment 2nd Edition NEPSY-2

SUBTEST	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Comprehension of Instruction	Comprehension and Knowledge	Listening Comprehension	8	25

Test of Auditory Processing Fourth Edition TAPS-4

SUBTEST	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Auditory Comprehension	Comprehension and Knowledge	Listening Comprehension	9	37
Processing Oral Directions	Comprehension and Knowledge	Listening Comprehension	10	50
Composite Area		Descriptive Rating	Standard Score	Percentile Rank
Listening Comprehension Index	Comprehension and Knowledge	Average	98	45

Delis Kaplan Executive Function (DKEFS)

SUBTESTS	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Twenty Questions	Comprehension and Knowledge	Language Development	10	50

WJ-IV OL & WJ-IV Ach Scores reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Oral Expression	87 (79-96)	Low Average	20
Picture Vocabulary	77 (65-90)	Low	6
Sentence Repetition	97 (88-106)	Average	43
Listening Comprehension	90 (81-99)	Average	25
Oral Comprehension	95 (83-107)	Average	36
Understanding Direction	87 (78-96)	Low Average	19
Reading Comprehension Ext	92 (88-96)	Average	29
Reading Recall	99 (94-104)	Average	47
Passage Comprehension	89 (82-96)	Low Average	24
Reading Vocabulary	90 (81-99)	Average	26

Visual Processing is the broad ability to perceive, process, and use visual spatial information. It includes being able to: Identify the key components of visual information; analyze similarities, differences, patterns (sequential) and categories, as well as storage and retrieval of visual information. A Narrow ability that falls under this ability is Visualization - the ability to perceive complex patterns and manipulate how they might look transformed, e.g., rotated, when the view is partially obscured, shrunk or enlarged. Samantha's visual processing is estimate to fall in lower end of the average range. Overall this is an area of strength and is/consistent with an

Otherwise Normal Cognitive Ability Profile (ONCAP). This processing is consistent with associated Mathematic related achievement testing. However, within the achievement there is a split in her speed at which she can do simple calculations quickly (Math Fact Fluency) and her ability to solve various kinds of math problems (Calculations) which she may still be in the process of learning.

Developmental Test of Visual Perception-Third Edition (DTVP-3)

SUBTESTS	Composite Area	Scaled Score	Percentile Rank
Figure Ground	Motor Red. Visual Perception	8	25
Visual Closure	Motor Red. Visual Perception	9	37
Form Constancy	Motor Red. Visual Perception	9	37
Composite Area	Descriptive Rating	Standard Score	Percentile Rank
Motor-Reduced Visual Perception	Average	92	30

WJ-IV Ach Scores reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Math Calculation Skills	98 (92-104)	Average	44
Calculation	82 (74-90)	Low Average	11
Math Facts Fluency	111 (103-119)	High Average	77

Auditory Processing (excluding phonological processing as it now has its own processing area) includes Auditory Memory Span-the ability to maintain information in primary memory and immediately reproduce it in the same sequence in which it was presented and Working Memory Capacity - the ability to focus one’s attention to perform relatively simple combinations, manipulations, transformation of information while avoiding distractions while simultaneously engaging in strategic, controlled searches for information in long term memory. Samantha’s auditory memory span is estimated to be average range. Her auditory work memory is estimated to be in the lower end of the average range. Therefore overall this is an area of strength and is consistent with an Otherwise Normal Cognitive Ability Profile (ONCAP). This processing area is consistent with her sentence repetition achievement testing below.

Test of Auditory Processing Skills Fourth Edition (TAPS-4)

SUBTEST	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Number Memory Forward	Short Term Working Memory	Memory Span	13	84
Word Memory	Short Term Working Memory	Memory Span	9	37
Sentence Memory	Short Term Working Memory	Memory Span	10	50
Composite Area		Range	Standard Score	Percentile Rank
Auditory Memory Index	Short Term Working Memory	Average	104	61
SUBTEST	Broad Factor	Working Memory	100	50
Number Memory Backward	Short Term Working Memory	Memory Span	13	84

NEPSY-2

SUBTEST	Broad Factor	Narrow Factor	Scaled Score	Percentile Rank
Comprehension of Instruction	Comprehension Knowledge	Working Memory	8	25

WJ-IV OL Score reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Sentence Repetition	97 (88-106)	Average	43

Phonological includes Phonological Awareness – the ability to access the sound structure of language at the phoneme level (phonological units that are used in various words) and Phonological Memory – the ability to code information phonologically in short term auditory memory. Phonological processing is fundamental to basic reading skills, the ability to decode and sound out words are directly related to this processing area, especially for unfamiliar words. For Samantha, both his Phonological Awareness is estimated to be in the lower end of the average range. For Samantha, there is no evidence to support a phonological processing deficit as

her Basic Reading Skills falls solidly in the average range. Overall this is an area of strength and is consistent with an Otherwise Normal Cognitive Ability Profile (ONCAP).

Comprehensive Test of Phonological Processing Second Edition (CTOPP-2)

SUBTESTS	Composite Area	Scaled Score	Percentile Rank
Elision	Phonological Awareness	7	16
Blending Words	Phonological Awareness	6	9
Phoneme Isolation	Phonological Awareness	13	84
Composite Area	Descriptive Rating	Standard Score	Percentile Rank
Phonological Awareness	Average	92	30

WJ-IV Ach Scores reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Basic Reading Skills	100 (95-104)	Average	50
Word Attack	92 (83-100)	Average	29
Letter-Word Identification	106 (100-113)	Average	66

Sensory-Motor Skills involve the transformation of information to motor production. Specifically, Sensory Motor Processing’s emphasis is on perceptual to motor, e.g. visual motor integration one’s ability to coordinate fine motor skills such as drawing or in written work. Samantha’s Sensory Motor-Skill is estimated to be average range. Based on observational data visual motor integration does to be area of strength and consistent with an ONCAP. The only academic area sensitive to Sensory-Motor Skills is Written Expression. Based on the data below this is consistent with her academic performance. Additional evidence to suggest attention difficulty is that her hand eye coordination requires sustained attention and focus for minutie had movements. It is more likely that her attention impacted that performance than an integration issue.

Developmental Test of Visual Perception-Third Edition (DTVP-3)

SUBTESTS	Composite Area	Scaled Score	Percentile Rank
Eye-Hand Coordination	Visual-Motor Integration	5	5
Copying	Visual-Motor Integration	13	84
Composite Area	Range	Standard Score	Percentile Rank
Visual Motor Integration	Average	94	35

Written Expression Cluster Score and the two subtests it's derived from:

WJ-IV Ach Scores reported by Education Specialist	Standard Score (Confidence Interval 95%)	Descriptive Rating	Percentile Rank based On Standard Score
Written Expression	112 (104-120)	High Average	78
Writing Samples	109 (101-118)	Average to	73
Sentence Writing Fluency	110 (99-121)	Average	75

Attention is the process of being able to focus on a specific, given stimuli (object, task, instruction), sustaining that attention and redirecting attention (shifting focus) when it is required by the learning or function of the situation. The vast majority of individuals can attend when what they are attending to, is of high interest or emotionally engaging. Selected subtests of the NEPSY-2 try to make sustained attention tasks not very interesting but very basic/simple tasks to complete. Depending on the task, Samantha's performance is estimated to be within the Average to high end of the High Average range. Samantha was able to control her impulse and not respond to distracting stimuli for the Auditory Attention and Response Set. In fact the more cognitively involved Response Set she did better on. Sometimes increasing task difficulty increases interest level in the task helping those with attention problems minds from wandering. This was also true of her performance on the Inhibition test, where an increase in difficulty Inhibition Inhibition (average) was higher than her Inhibition Naming (high end of high average). However, there appears to be limits to this where the more cognitively intense Inhibition Combined came back down to the average range. One might wonder if attention was a problem area, shouldn't it show up on the attention tasks? Normally it should, however, as mentioned above, one on one attention can support attention for brief periods as well as the fact, if she found the tasks entertaining she can remain engaged. This is why one set of test scores doesn't determine eligibility. Observations, not just by this assessor but interviews with others

across other environments are very important and just as valid for their circumstances. Therefore, generally speaking this is an area of strength for Samantha in the school environment and is consistent with ONCAP. However, prolonged independent work or independent work especially later in the day can tax Samantha’s attention and compromise her EF and cause her to become emotionally labile (see social emotional below).

NEPSY 2

SUBTESTS	Broad Factor	Sub Areas	Scaled Score	Percentile Rank
Auditory Attention	Sustained Attention	Total Correct	9	37
		Commission Errors		51-75
		Omission Errors		51-75
		Inhibitory Errors		51-75
		AA Combined	9	37
Response Set	Sustained Attention Working Memory	Total Correct	10	50
		Commission Errors		>75
		Omission Errors		51-75
		Inhibitory Error		>75
		RS Combined	12	75
Inhibition	Naming Combined		10	50
	Inhibition Combined		14	91
	Switching Combined		9	37
	Total Errors		10	50

Social-Emotional Functioning

Adaptive Functioning

As mentioned above Samantha’s father and teacher were given the Adaptive Behavior Assessment System Third edition questionnaire. Their responses to the Social domain are below:

ABAS-3 Domains	Subtest	Parent Standard/ Scaled Scores	Parent %ile	Parent Range	Teacher Standard/Scaled Scores	Teacher %ile	Teacher Range
Social		86 (79-93)	18	Low to Average	91 (85-97)	27	Low Average to Average
	Leisure	8	25		9	37	
	Social	7	16		8	25	

The Social domain involves awareness of others’ thoughts, feelings, and experiences; empathy; interpersonal communication skills; friendship abilities; and social judgment, among others. The adaptive skills that make up this domain are Social and Leisure Skills. Father and teacher see this child very similarly, while teacher see her slightly better but both see her predominantly in the low average to average range and this domain is not a significant area of concern. Again, being more emotionally labile at home, especially after school (fatigue from sustaining her focus and concentration at school) can account for the variation.

Behavior Assessment System for Children Third Edition (BASC-3) by Father and Teacher

Father’s General Comments on the BASC-3 behavioral and/or emotional strengths Samantha were: “Resiliency” and “Works for positive reinforcements”. For her teacher, she commented, “She is friendly with her classmates and gets along well with them.”

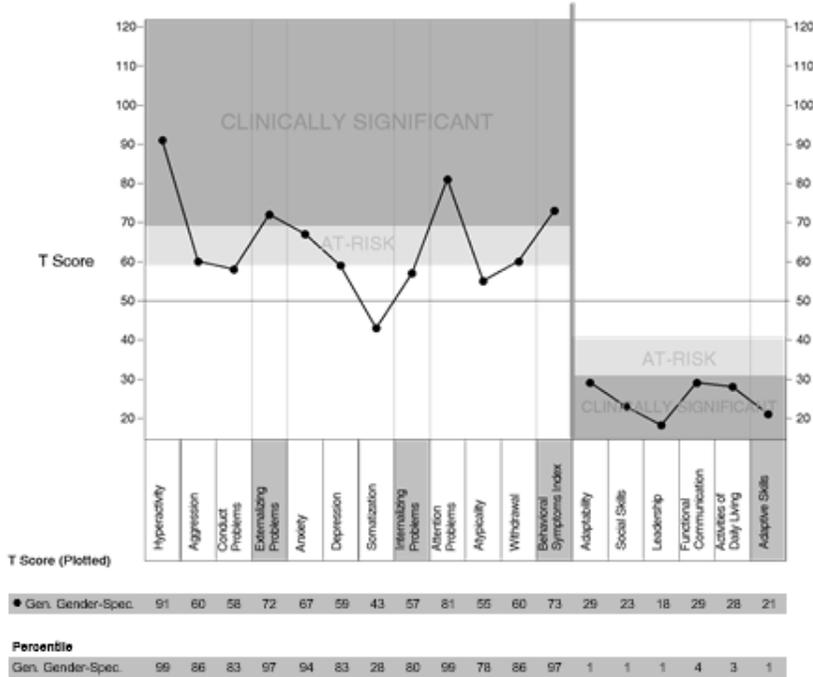
When asked to list any specific behavioral and/or emotional concerns you have for Samantha, father wrote, “Perseveration”, “Obsessive compulsive tendencies” and “Oppositional”, where her teacher commented, “She does poorly on written tests involving reading and selecting the correct answer. Lacks self confidence”

BASC-3 results for father and teacher are below:

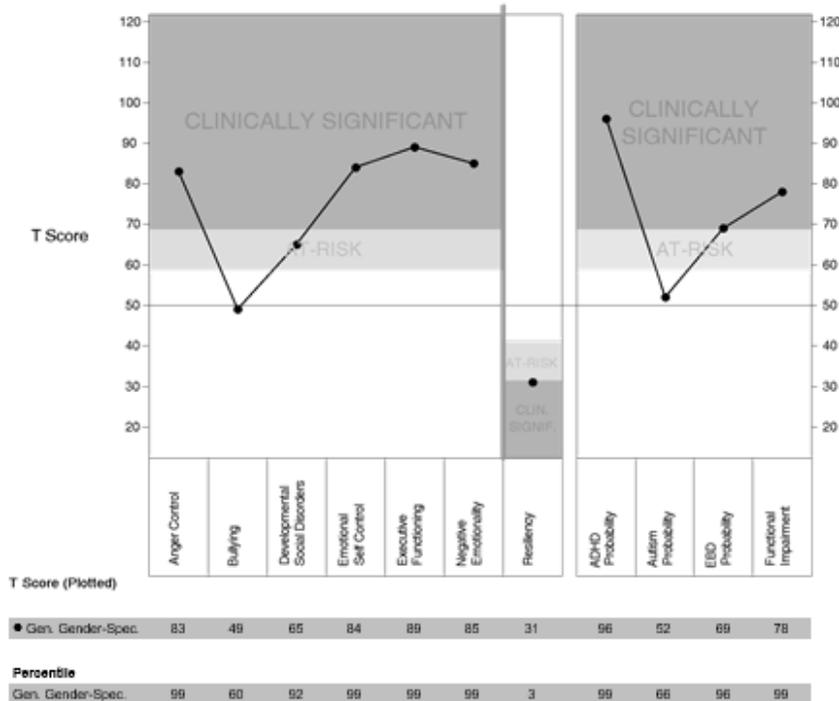
Father's BASC-3 VALIDITY INDEX SUMMARY

F Index	Response Pattern	Consistency
Acceptable	Acceptable	Acceptable
Raw Score: 1	Raw Score: 115	Raw Score: 5

CLINICAL AND ADAPTIVE T-SCORE PROFILE



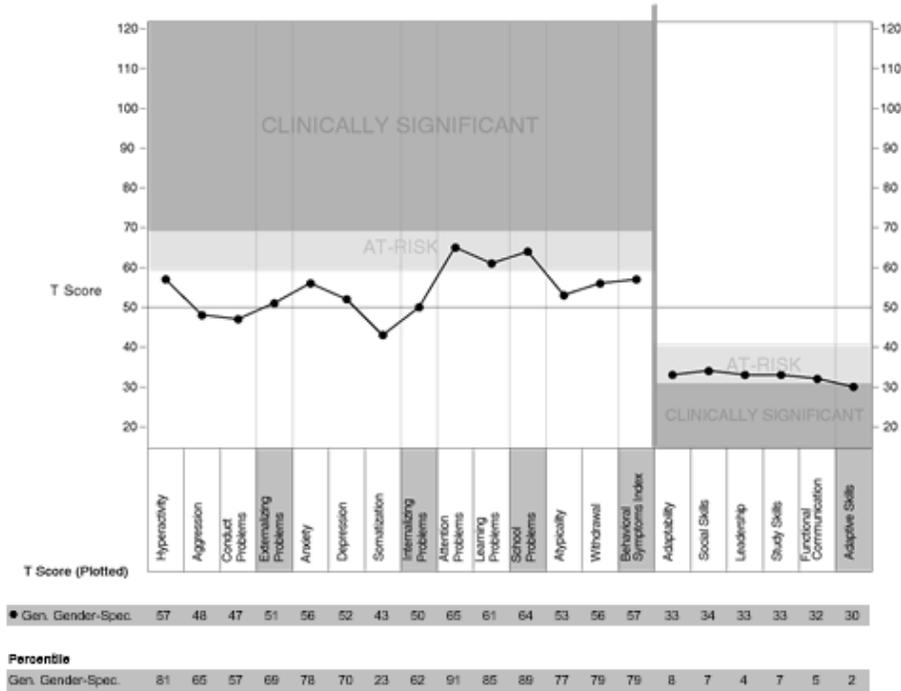
CONTENT SCALE AND INDEX T-SCORE PROFILE



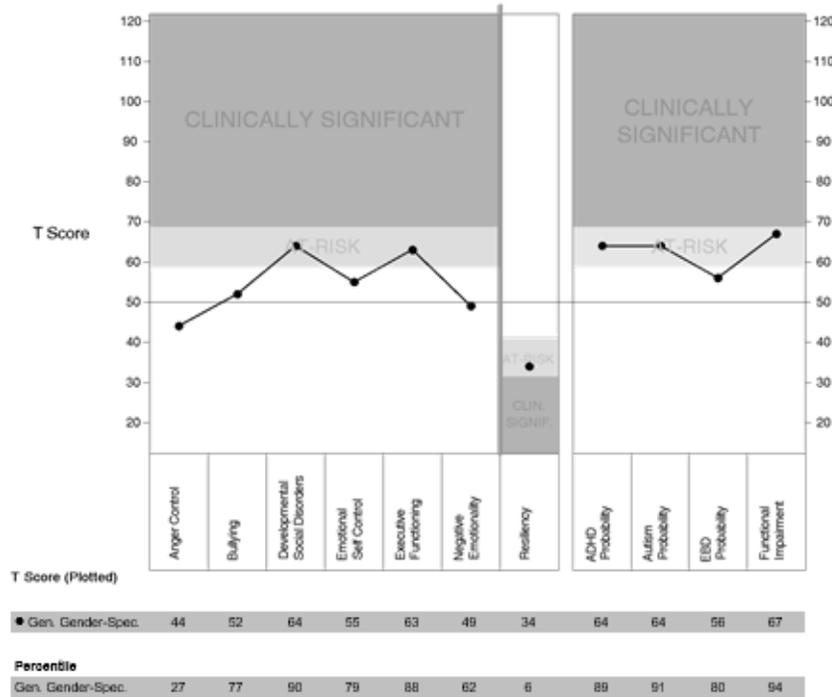
Teacher's BASC-3 VALIDITY INDEX SUMMARY

F Index	Response Pattern	Consistency
Acceptable	Acceptable	Acceptable
Raw Score: 0	Raw Score: 99	Raw Score: 7

CLINICAL AND ADAPTIVE T-SCORE PROFILE



CONTENT SCALE AND INDEX T-SCORE PROFILE



The BASC-3 items endorsed by Samantha's teacher resulted in an at-risk Attention Problems and Learning Problems scale score. Given the information above regarding attention some appropriate continued accommodations might include guided notes in order to decrease the organizational demands of note-taking, graphic organizer for her assignments, pointed questions prior to reading assignments in order to improve attention and focus so she knows what to be looking for when reading. Attention related learning problems can be related to mood and/or behavioral problems above in the cognitive conceptualization section. These problems can account for the at-risk for Developmental Social Disorders content scale score and at-risk adaptive scores (not to be confused with the domain adaptive behavior score of the ABAS-3).

The BASC-3 items endorsed by Samantha's father resulted in clinically significant Hyperactivity and Attention Problems scale scores which can often appear as being oppositional. Father's BASC-3 also exhibited an elevation on internalizing scale of Anxiety, that are consistent with her therapist's current working diagnosis of Generalized Anxiety Disorder, which can sometimes exhibit behaviors that look to be obsessive-compulsive but serve a different purpose. Samantha's mental health history explains many of the exhibiting comorbid mood and behavioral problems., which can also account for the at-risk Withdrawal scale score (see background above), at-risk Developmental Social Disorders content scale score and clinically significant adaptive scores (not to be confused with the domain adaptive behavior scores of the ABAS-3). What is clear is that attention seems to be an issue in both environment. At school it is handled well by supports within the general education classroom and through Samantha's own coping skills. At home these coping skills are not enough, probably due to fatigue and the fact she feels safe there. She can let her guard down more at home because she knows that her parents love her no matter what so she can let off stress that may have been building all day. Also, it is a sure fire way to get attention and parent support which she knows helps her focus. Hopefully, the recommendations below can make it so that she can develop strategies that are more mental health friendly for herself and for the family.

Scales for Assessing Emotional Disturbance-Second Edition (SAED-2)

Both father and teacher filled out the SAED-2 rating scale.

Non-Emotionally Disturbed Norms were used as Samantha has not been previously identified as a student with an Emotional Disturbance (ED).

Scaled Descriptive Terms for ED Characteristics

Scaled Score	Descriptive Term
13 or Lower	Not Indicative of ED
14 - 16	Indicative of ED
17 or Higher	Highly Indicative of ED

Scaled Scores of the SAED-2 that tie directly to eligibility criteria CCR3030(b)(4)

CCR 3030(b)(4)(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.

Characteristic Subscale	Father's Scaled Score	Descriptive Term	Teacher's Scaled Score	Descriptive Term
Inability to Learn	14	Indicative of ED	13	Not Indicative of ED

This is not consistent between observations and direct assessment and the reporting of parents' and teacher's experiences in the school setting described throughout the report. 1. There is an explanation for her difficulty, attention, that does explain her difficulty at times in retaining information. 2. In the school setting this is being accommodated in her general education class without specialized academic instruction as teacher reports that this adversely affects Samantha's educational performance to a "slight extent". Therefore, this criteria is not indicative of ED.

CCR 3030(b)(4)(B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.

Characteristic Subscale	Father's Scaled Score	Descriptive Term	Teacher's Scaled Score	Descriptive Term
Relationship Problems	8	Not Indicative of ED	8	Not Indicative of ED

This is consistent to observations and reporting of parents' and teacher's experiences in the school setting described throughout the report.

CCR 3030(b)(4)(C) Inappropriate types of behavior or feelings under normal circumstances.

Characteristic Subscale	Father's Scaled Score	Descriptive Term	Teacher's Scaled Score	Descriptive Term
Inappropriate Behavior	9	Not Indicative of ED	13	Not Indicative of ED

This is consistent to observations and reporting of parents' and teacher's experiences in the school setting described throughout the report.

CCR 3030(b)(4)(D) A general pervasive mood of unhappiness or depression.

Characteristic Subscale	Father's Scaled Score	Descriptive Term	Teacher's Scaled Score	Descriptive Term
Unhappiness or Depression	10	Not Indicative of ED	12	Not Indicative of ED

This is consistent to observations and reporting of parents' and teacher's experiences in the school setting described throughout the report.

CCR 3030(b)(4)(E) A tendency to develop physical symptoms or fears associated with personal or school problems.

Characteristic Subscale	Father's Scaled Score	Descriptive Term	Teacher's Scaled Score	Descriptive Term
Physical Symptoms or Fears	12	Not Indicative of ED	10	Not Indicative of ED

This is consistent to observations and reporting of parents' and teacher's experiences in the school setting described throughout the report.

CCR 3030(b)(4)(F) Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under subdivision (b)(4) of this section. This is an exclusionary criteria for those that are socially maladjusted and do not otherwise meet the other criteria above. In Samantha case, both father and teacher reported 0 Socially Maladjusted behaviors. This is consistent to observations and reporting of parents' and teacher's experiences in the school setting described throughout the report. Therefore, since she does not meet any other the other criteria above having no social maladjusted behaviors is indicative of her social emotional health and not a qualifying criteria.

Summary and Recommendations:

Samantha Smith is an 8-year-old African American female who is currently attending Hogwart's School, in a general education 3rd grade class 100% of the time. The purpose of this assessment is to determine if Samantha meets eligibility for special education services under the suspected categories of specific learning disability (SLD), Other Health Impairment or Emotional Disturbance.

The final recommendations regarding classification and placement are not the product of a single score, test or procedure but is a joint decision made by the IEP team. That being said, this **current evaluation for this report does not find support for meeting special eligibility under Specific Learning Disability (SLD), Other Health Impairment (OHI) or Emotional Disturbance (ED), but did find some attention difficulty and her current working mental health diagnosis of Generalized Anxiety Disorder (GAD) which the IEP team may consider for a General Education 504 Plan if applicable.**

5 CCR § 3030. Eligibility Criteria. (a) A child shall qualify as an individual with exceptional needs, pursuant to Education Code section 56026, if the results of the assessment as required by Education Code section 56320 demonstrate that the degree of the child's impairment as described in subdivisions (b)(1) through (b)(13) requires special education in one or more of the program options authorized by Education Code section 56361. The decision as to whether or not the assessment results demonstrate that the degree of the child's impairment requires special education shall be made by the IEP team, including personnel in accordance with Education Code section 56341(b). The IEP team shall take into account all the relevant material which is available on the child. No single score or product of scores shall be used as the sole criterion for

the decision of the IEP team as to the child's eligibility for special education. (b) The disability terms used in defining an individual with exceptional needs are as follows:

Evidence does not support

(10) Specific learning disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may have manifested itself in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The basic psychological processes include attention, visual processing, auditory processing, phonological processing, sensory-motor skills, cognitive abilities including association, conceptualization and expression. (A) Specific learning disabilities do not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of intellectual disability, of emotional disturbance, or of environmental, cultural, or economic disadvantage. (B) In determining whether a pupil has a specific learning disability, the public agency may consider whether a pupil has a severe discrepancy between intellectual ability and achievement in oral expression, listening comprehension, written expression, basic reading skill, reading fluency, reading comprehension, mathematical calculation, or mathematical reasoning. The decision as to whether or not a severe discrepancy exists shall take into account all relevant material which is available on the pupil. No single score or product of scores, test or procedure shall be used as the sole criterion for the decisions of the IEP team as to the pupil's eligibility for special education. In determining the existence of a severe discrepancy, the IEP team shall use the following procedures:

“the team documents in a written report that the severe discrepancy between ability and achievement exists as a result of a disorder in one or more of the basic psychological processes. The report shall include a statement of the area, the degree, and the basis and method used in determining the discrepancy.”

- Overall cognitive ability estimated is not used for African American students due to CDE’s 1997 Memorandum regarding Crawford v Honig regarding the extension of Larry P. v Riles to all special education categories.
- The Processing area deficit that inconsistently impacts her academics at this time at school is attention as it impacted some of her most recent STAR reading results but not her DIBELS NEXT scores. All Processing areas (Cognitive Conceptualization, Association, Expression, Visual Processing, Auditory Processing, Phonological Processing, Sensory Motor Skills and even Attention were considered areas of strength meaning that they predominantly fell in the average range or higher of her peers.
- Additionally these finding are also consistent with a Pattern of Strengths and Weaknesses methodology of determining eligibility as all processing areas at least in the school environment are considered strengths and that there are significant academic weaknesses that are consistent with an identified processing area weakness.

Evidence does not support

(9) Other health impairment means having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment that: (A) Is due to chronic or acute health problems such as asthma,

attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and (B) Adversely affects a child's educational performance

- While Samantha may have some attention difficulty and a possible working mental health diagnosis of GAD (Generalized Anxiety Disorder) they are not manifesting as acute in the school setting as observation, teacher description and report indicate it is not affecting her educational performance (with the exception of computerized assessments and at times homework). In this context adversely would require some level of specialized academic instruction or environmental supports not accessible in a general education setting. This is not the case for Samantha as she is making adequate gains in the school's general education setting with accommodations all students have access to.

Evidence does not support

(4) Emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance: (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors. (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers. (C) Inappropriate types of behavior or feelings under normal circumstances. (D) A general pervasive mood of unhappiness or depression. (E) A tendency to develop physical symptoms or fears associated with personal or school problems. (F) Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under subdivision (b)(4) of this section.

Samantha has not had any of the following for over a long period of time (since the beginning of this school year over six months) nor to a marked degree:

- (A) Samantha does not have an inability to learn that cannot be explained by intellectual, sensory, or health factors as seen in her academic assessment.
- (B) Samantha has the ability to build or maintain satisfactory interpersonal relationships with peers and teachers as reported by teacher and observed by this school psychologist.
- (C) Samantha at school does not exhibit inappropriate types of behavior or feelings under normal circumstances as reported by teacher and observed by this school psychologist.
- (D) Samantha at school does not exhibit a general pervasive mood of unhappiness or depression as reported by teacher and observed by this school psychologist.
- (E) Samantha at school does not have a tendency to develop physical symptoms or fears associated with personal or school problems as reported by teacher and observed by this school psychologist.
- (F) Samantha does not exhibit schizophrenic type behaviors at school nor any socially maladjusted behaviors.

Given the information above:

Even though attention difficulties do not rise to the level of meeting special education criteria, general education accommodations made by the teacher and the support of family at

home are mitigating the impact of her attention difficulties and possibly her working mental health diagnosis of GAD. Therefore, it is recommended that at the end of this meeting, Hogwarts School and Rainbow School District meet to discuss a 504 Plan that could further document Samantha's accommodations in her general education placement. General education accommodations recognized in this report are that Samantha is able to keep up with most work but does at time:

- Benefit from one on one help with homework or independent work.
- Sitting next to a student who is strong academically.
- Having peers help her with her math questions.
- When requested or needed, test are read to her.

Additional suggestions might be, guided notes in order to decrease the organizational demands of note-taking, graphic organizer for her assignments, pointed questions prior to reading assignments in order to improve attention and focus so she knows what to be looking for when reading as well as any additional general education accommodations recommended by her general education teacher that were not mentioned but currently used to support Samantha.

Additionally, it will be important for school and parents to keep in contact with each other regarding how much homework support is necessary and the time it takes to complete homework. Homework should not be an onerous task which can negatively impact family relationships. Homework should be reinforcing recently learn material at a level that can be done independently. Given her attention difficulty and that having someone present can improve her ability to concentrate later in the day:

- Not requiring her to do it alone would be beneficial.
- Limiting the amount of time she spends on homework before being able to take a break.
- Consult with school on limiting the number of items she has to complete (e.g. every other item...sometimes the fact that she won't have to do everything can be an emotional lifter to get her though what she has to do)
- Understanding that her asking for instructions to be repeated or repeatedly asking for help on the same type of problem, doesn't mean she doesn't understand how to do it, but that she may need a mental break, or needs that personal interaction with you to make doing the work worth it.

Ultimately, as she gets older, more independent work in class and at home will be required. Sometimes school work is based on independent work at home. At this time, Samantha is able support herself with the present level of general education accommodations, but school and home need to continue to talk to each other to make sure it is not parent support that is influencing Samantha's school grade. If this happens Samantha will not look like a special education student needing support when in fact she may in the future especially in future grades.

A book that provides good strategies and supports for school and family is "Smart But Scattered", by Dr. Peg Dawson. There are some interventions and suggestions that the family may find beneficial as well as sharing this report with her pediatrician. Also the family may find some support through the website www.CHADD.org. Children and Adults with ADHD. It is a well regarded parents support group and has a local chapter's finder. Sometimes listening and

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sharing strategies with others helps, as well as feeling less alone and that you're not the only ones dealing with these issues.

These findings and recommendations, as well as those of other specialists, will be reviewed and discussed at an IEP meeting. The IEP team will make the final determinations regarding eligibility for Special Education and how to best support student's progress in the least restrictive environment. It was a pleasure getting to know Samantha and I wish her and the family all the best. Please feel free to contact me if you have any questions.

James Hiramoto, Ph.D.
School Psychologist