

Frequently asked questions about the assessment

What is a psycho-educational or developmental assessment?

A psychological assessment evaluates thinking, learning and behaviour. The assessment involves gathering information, through interviews, observation, testing and consultation with people involved in a child's care (parents, teachers, therapists, etc.). Testing includes pencil and paper tasks, puzzles, drawings, questions, observations and conversations. The assessment covers many skill areas, such as general intellectual level, language, memory and learning, problem solving, planning and organisation, fine motor skills, visual spatial skills, basically how the child thinks, as well as academic skills (reading, maths, spelling and writing). It also includes an examination of behaviour and emotions understanding the child's temperament, feelings and concerns.

Research studies have indicated that early detection of underlying issues can lead to better outcomes in terms of intervention and treatment.

A comprehensive assessment will include the evaluation of a child's cognitive functioning, academic performance, behaviour, and social or emotional functioning. Assessment information will be integrated and a written report will be provided, which includes a detailed analysis of information obtained, all supported with appropriate recommendations.

Why have an assessment?

A psychological assessment is helpful in identifying strengths and weaknesses and will lead to recommendations for both academic and behavioural intervention. By detecting strengths and weaknesses, an assessment can be used to assist in planning your child's school programme, to identify the need for special services in school and to help you access resources.

The intention of the assessment is to formulate a profile of your child's pattern of strengths, challenges, behaviours and personal circumstances so that specific suggestions and recommendations can be made to help your child reach their full potential.

How reliable will the information in the report be?

This report is created with given information from the case history form, intake interview, additional resources (school or therapy reports), as well as information provided during the assessment. The information in the report is reliable providing your child has worked appropriately during the session but any withheld information provided after the report may affect the results or recommendations.

How long is the report valid for?

A psychological report is not intended to be a complete statement about an individual. It deals with specific aspects at a certain time in a child's life and gives an indication of possible areas of strength and weakness at that time. Care must be taken, therefore, not to assume that the contents of this report apply indefinitely and, as a rule of thumb, test results more than eighteen (18) months old should not be used.

How can my child do their best during testing?

If your child takes medication, please make sure that it has been taken according to instructions on the day of testing. If your child has not taken them as prescribed, please tell me.

If your child's physical condition or emotional state is somehow compromised on the day of testing, please inform me. For example: feeling ill; taking medication that would make one drowsy; a poor night's sleep prior; a death in the family, etc. These types of things can affect performance on some of

the tests used for psychological evaluations.

Please try to ensure a good night's sleep prior to testing. Being sleepy during testing can affect overall concentration and performance on timed tasks in particular.

My goal is for every child to be as comfortable as possible, as this helps to ensure that their performance is the best representation of what they can do in this new and unfamiliar situation. I aim to make sure that the process is positive for your child and the testing is conducted in a relaxed, environment designed to elicit your child's best performance.

How can I explain the testing process to prepare my child?

Most importantly, the goal in preparation is to help your child be as comfortable, relaxed and motivated as possible the day of testing. Proper preparation will help your child do his/her best, allow for a pleasant testing experience and help me gather the most reliable results possible.

Many children may wonder why they are having these tests and if there is something wrong with them. Listen to your child's concerns and feelings about the evaluation and answer your child's questions as straightforwardly as possible. It is helpful to be reassuring to your child.

Emphasise that the testing is not because the child has been bad.

Offer reassurance that the information gathered from the evaluation will help you and other people better understand his/her experiences, what kinds of things he/she has been having trouble with and what types of things he or she is really good or not so good at doing.

Explain that psychological testing is not unusual and other children participate in testing, too.

Be sure your child knows that there will be no physical exam, so no needles or medicine. For younger children, you may wish to focus on the puzzles, stories and drawings. Please don't tell your child that I will be "playing games" with them as this often leads to disappointment when games are not offered. You can tell them that they will be completing activities similar to the activities they do in school. For older children, it is often helpful to describe both puzzles, story-telling, chatting and school-type work, but make sure they know that there are no marks or grades given.

Children generally enjoy the process, and many do not inherently feel worried about it. It's also okay if your child does appear nervous. I have been doing this for years and have worked with hundreds of children. I am experienced with helping them feel comfortable.

What kind of tests will be administered?

The test battery varies depending upon the referral question/s and can include a structured interview, assessment of intellectual capability, learning/processing measures, measures of attention and memory, academic achievement measures, projective measures, self-report surveys, parent and teacher checklists and school input.

Some assessments may emphasise memory and learning, others may focus on language or academic development and still others may highlight behaviour and emotional development. The type of assessment your child will be structured around his/her behaviour and learning are examined in the context of the reason for referral. The specific aspects of psychoeducational or developmental testing will depend on the presenting problem and additional tests are sometimes required.

The cognitive tasks, specifically the WPPSI-IV, WISC-V, WAIS-IV and CAS-2 can only be

administered once per year for the results to be valid, so please let me know if your child has taken the test within the last twelve months.

What studying or preparation needs to be done beforehand?

These are not the types of tasks or evaluations anyone can or needs to study for.

What needs to be brought to the assessment?

Other than glasses or a hearing aid (if your child wears them) and a healthy snack and something to drink, everything will be provided for the assessment day. Please remember to bring the completed forms and any additional information, such as school reports, previous assessment or consultation results or therapy reports.

Will there be time for breaks?

Yes, time is allotted for short breaks and breaks are taken as per the needs of the person being assessed.

Can my child go back to school after the assessment?

The testing process can take anywhere from 1 ½ - 5 hours (2 ½ hours is average for a standard psycho-educational assessment), which may occur over more than one session. Many children feel tired after testing and need time to rest. For both of these reasons, he/she may have to miss school in order to complete testing or you may want to adjust their schedule to allow for resting after the session/s.

Can my child be contacted by others during my assessment?

It is preferable that cell phones are kept turned off during the assessment. This will avoid disruptions but you are welcome to call the office if you need to get a message to your child or they can check for messages during breaks.

What must we call you?

I prefer to be called by my first name, Melanie, and this also helps your child feel relaxed about the session. I don't want the children to be told to call me "*teacher*" or "*aunty*" as my relationship with them will not be the same as it is with either of these familiar figures.

What can I expect after the assessment is completed?

I will meet with you for feedback to discuss your child's results at a later date, usually within ten days of the assessment. I do not give information straight after the assessment as it is important that the information is seen holistically. However, if an appointment is urgently needed with another professional, the relevant reference will be made. Please understand that it is in the best interests of the client for all of the information to be consolidated and taken into consideration.

In most cases with younger children the feedback sessions involve parents only, but if your child is older, you may wish to include them. Under some circumstances, feedback can also be given over the phone. A written report will be completed, outlining the results of the assessment and the recommendations for intervention. Only you will receive a copy of this report unless written consent is provided to share the report with other people.

I hope this information has been helpful. Please feel free to contact me with any further questions about the assessment process.