

PSYCHED SERVICES ASSESSMENT MATRIX: FALL 2023

Comprehensive evaluations are the cornerstone of the assessment process. Utilize this document to assist in evaluation planning and ensure that all areas of a suspected disability are included as part of the assessment battery.

- This document was developed in order to assist in evaluation planning. It provides a high-level overview of assessment areas to include in varying evaluation types. However, all evaluations should be individualized, and practitioners must be careful to ensure that they do not consistently assess all students with the same battery. Instead, consider each individual student's background, presentation, communication levels, and pattern of skills when planning your assessment battery.
- Note that this matrix does not provide an exhaustive list of all assessment types and evaluation instruments that can be utilized, although we provide some of the most commonly utilized instruments. Use your professional judgment and knowledge of updated (and outdated) instruments when determining your assessment battery.
- All assessment recommendations are suggestions based on commonly accepted and utilized best practices within the field of school psychology. However, refer to your state statutes and local school district policies for guidance on required and expected practices relevant to your specific location.
- For all students, consider possible language and cultural implications, when relevant.
- Evaluation of students should be completed in their primary language when feasible, and communications with parents/families (e.g., interviews, rating scales) should also be completed in their primary language when possible.
- For all observations, include the date, time, and setting.
- When using rating scales, attempt to obtain ratings from both parent/guardian and teacher(s), if applicable. Self-report rating scales may also be recommended, depending on the reason for referral and the student's developmental level.
- For all evaluation types, the use of academic measures is generally recommended, although requirements and specific assessors may vary by state or district policy. In some areas, the school psychologist administers academic assessments, whereas in others, they are completed by other educators, in which case, a review of those results should be incorporated into the comprehensive evaluation report.
- Also include curriculum-based measures and curriculum-based assessments when available.
- Note that the term "parent" is used throughout this document for the sake of brevity, but includes guardians or other relevant family members who oversee the student's care
- Review of MTSS data should also be included as part of all evaluations when available.
- For all evaluation types, ensure that there is consideration of the student's individual strengths so that they can be included in the report as well as leveraged in intervention planning.

For additional guidance, refer to our document, **Psyched Services Implementation Guide: Comprehensive, Strengths-Based, User-Friendly Report Writing**.

| Suspected Disability | Review of Records | Professionals to Include | Interviews/ Informal Input | Rating Scales | Classroom Observations | Assessment Observations | Direct Measures |
|----------------------|--|---|--|---|---|--|--|
| AUT | Review cumulative file, discipline file, special education or 504 records, and/or outside assessments provided by parent | <p>*SLP-assess core language and pragmatic language</p> <p>SLP: at least one pragmatic measure for moderate to high-functioning autism:</p> <p>SLDT-E (SLP) SLDT-A (SLP) CASL-2 (SLP) CAPs (SLP) Non-Standardized TOM test (SLP) RESCA (SLP) TOPL-2 (SLP)</p> <p>SLP: Select at least one narrow:</p> <p>CCC-2 CELF-5, pragmatic activities checklist</p> <p>School nurse</p> <p>Academic assessor</p> <p>Possibly OT</p> <p>Possibly behavior specialist</p> <p>*Since autism is primarily defined as a language-based disorder in ed code, SLP's input is crucial</p> | <p>Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; document when early childhood milestones were achieved</p> <p>Consider whether there are continuing fine/gross motor difficulties</p> <p>Published Interviews: ADI-2 CARS-2 MIGDAS-2</p> | <p>Select at least one broad scale: BASC-3 CBRS</p> <p>Select at least one narrow scale: ASRS SRS-2 GARS-3</p> <p>Select at least one adaptive functioning rating scale: ABAS-3 Vineland-3</p> <p>If attention/EF concerns: Conners 4 Conners 4 Short Form ADDES-4 CEFI BRIEF-2</p> | <p>Observe in structured and unstructured settings (1-2 hrs total)</p> <p>Note use of verbal and nonverbal communication skills, social interaction with teacher and peers, repetitive behaviors, and/or stereotyped interests</p> <p>With younger children (preschool), after observation time, you may want to attempt social engagement and note responses</p> | <p>Note use of verbal and nonverbal communication skills, social interactions with the examiner, repetitive behaviors, stereotyped interests</p> <p>If EF/attention concerns, include observations of inattentiveness, impulsivity, and/or overactive behaviors</p> <p>Observe for anxiousness, depressive symptoms, or other dysregulation. Females assigned at birth in particular may exhibit high levels of internalizing symptoms</p> <p>Note unusual gross and fine motor issues: gait, hand/arm posturing while walking, pencil use</p> | <p>IQ</p> <p>Processing measures</p> <p>Academic Measures</p> <p>Select at least one autism measure: ADOS-2 CARS-2 PEP-3 MIGDAS-2</p> <p>NEPSY-2 (Social Perception subtests) may be utilized to provide additional information</p> |

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| ED | Review cumulative file, discipline file, special education or 504 records, outside assessments provided by parent; note any prior manifestation meetings and threat assessments ; Functional Behavioral Assessment (FBA) and Positive Behavioral Support Plan (PBSP) | School nurse Academic assessor <i>Possibly</i> behavior specialist | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; note history of social and emotional functioning | Select at least one broad measure: BASC-3 CBRS SAED-3 If available, select one narrow measure depending on area of emotional concern: Piers-Harris-3 RCMAS-2 MASC-2 CDI-2 Beck PIY If adaptive functioning concerns: ABAS-3 Vineland-3 If attention/EF concerns: Conners 4 Conners 4-Short Form ADDES-4 | Observe in structured and unstructured settings (1-2 hrs total) | Note any emotionality observed during testing (e.g., anxiety, frustration level, etc.) | IQ Processing measures (Consider working memory and/or processing speed, since these may be impacted by emotional factors) Academic measures If utilized in your location, include projective measures completed directly with the student |
| HI | Review cumulative file, discipline file, special education or 504 records, outside assessments provided by parent, most recent audiology report | School nurse Academic assessor SLP Teacher of Deaf/HH <i>Possibly</i> Audiologist *Audiology results may be required by state DOE* | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; document information regarding the severity of hearing loss, bilateral or unilateral; gradual loss or born with loss | Select at least one attention processing measure (attention often impacted in HI, secondary to hearing loss): BASC-3 CBRS Conners 4 Conners 4-Short Form ADDES-4 Meadow-Kendall Social-Emotional Inventory (SEAI) | Observe in structured and/or unstructured settings (30 min to 1 hr total) | Note if hearing aids or other amplification device was used | Full Scale IQ, possibly nonverbal, depending on the degree of hearing loss. WISC-V recommended due to clearer differentiation between verbal and nonverbal tasks Other nonverbal tests (e.g., KABC-II NU, WNV, C-TONI, TONI, Leiter-3, etc.), may be utilized Academic measures (if in state policies) |

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| ID | Review cumulative file, discipline file, special education or 504 records, medical records if available, outside assessments provided by parent | School nurse Academic assessor SLP-assess core language <i>Possibly</i> OT if fine motor concerns | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; document when early childhood milestones were achieved, include questions re: level of independence at home | Adaptive Functioning Select one: ABAS-3 Vineland-3 | Observe in structured and/or unstructured settings (30 min to 1 hr) | Note level of independence during test sessions Note communication skills (receptive and expressive), motor skills, social skills, and self-care | If student has functional communication: Full Scale IQ If student has significantly impaired communication: Nonverbal IQ If severely impaired select one: DP-4 (cognitive section) PEP-3 (cognitive portion) Play-based/ qualitative observations of cognitive skills Academic measures (if in state policies) |
| OI | Review cumulative file, discipline file, special education or 504 records, medical records if available, outside assessments provided by parent | School nurse Academic assessor Adapted PE Teacher <i>Possibly</i> OT <i>Possibly</i> PT OI Teacher | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; developmental history; include questions re: assistive devices at home; and how the home is physically structured to maximize independence | Select one: ABAS-3 Vineland-3 *Score with motor if an option for student's age range | Observe during PE, recess, or other activities involving gross motor skills; observe during class and note how limitations impact navigation of the educational environment; note any assistive devices used (30 min to 1 hr) | Note any physical limitations that may have impacted test results Note stamina and effort needed, level of fatigue, and if testing modifications were necessary | Select cognitive tests with least amount of motor demands if fine motor is impacted (e.g., aside from processing speed tasks, WJ-IV Cog and WISC-V require less motor involvement than KABC-II NU subtests) If student has significantly impaired communication: Nonverbal IQ If severely impaired select one: DP-4 (cognitive section) PEP-3 (cognitive portion) Play-based/ qualitative observations of cognitive skills Academic measures (if in state policies) May need to consider modifications to standardization, depending on functioning (larger print, pointer, teacher presence to aid in communication, specialized writing implements, AAC, etc.) – be sure to document in the report |

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| OHI (ADHD) | <p>Review cumulative file, discipline file, special education or 504 records; review outside assessments provided by parent</p> <p>Obtain medical diagnosis of ADHD if required by your state</p> | <p>School nurse</p> <p>Academic assessor</p> <p>Possibly OT for sensory/motor</p> | <p>Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; developmental history, include questions re: onset of inattentive/ impulsive/ hyperactive behaviors</p> | <p>Select at least one broad scale: BASC-3 CBRS</p> <p>Select at least one narrow scale: Conners 4 Conners 4-Short Form ADDES-4 BRIEF-2</p> | <p>Observe in structured and/or unstructured settings (30 min to 1 hr), take time on task data</p> | <p>Note degree of distractibility, impulsivity, and activity during testing</p> <p>Note if student fatigued quickly (yawning, head down)</p> <p>Note any fine motor difficulties</p> <p>Note response to frustration and difficulty</p> <p>Note any difference in work pace between evaluator-directed and self-directed tasks (i.e., PS tasks)</p> | <p>IQ</p> <p>Processing</p> <p>Academic measures (if in state policies)</p> <p>Can also include direct measures of attention/EF, such as DREFS, Nepsy - selected subtests, TEA-Ch2, etc.</p> |
| OHI (other) | <p>Review cumulative file, discipline file, special education or 504 records; review outside assessments provided by parent; obtain relevant medical records from parent</p> | <p>School nurse</p> <p>Academic assessor</p> <p>Possibly OT for sensory/motor</p> | <p>Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; developmental history, include relevant medical info</p> | <p>Select at least one broad scale: BASC-3 CBRS</p> <p>Select at least one narrow scale: Conners-4 Conners 4-Short Form ADDES-4 BRIEF-2</p> | <p>Observe in structured and unstructured settings (30 min to 1 hr); take time on task data</p> | <p>Note if student fatigued quickly (yawning, head down); or showed inattention or disruption in level of alertness, concentration, work pace/ effort, etc.</p> | <p>IQ</p> <p>Processing</p> <p>Academic measures (if in state policies)</p> |

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| SLD | Review cumulative file, discipline file, special education or 504 records, outside assessments provided by parent, work samples when available and relevant | <p>School nurse</p> <p>Academic assessor</p> <p>Possibly SLP if communication concerns are present</p> <p>Possibly OT if fine motor or visual-motor concerns</p> <p>Note: There are 8 academic areas of SLD=</p> <p>Oral expression Listening comprehension Basic reading skills Reading fluency Reading comprehension Math calculation Math problem-solving Written expression</p> | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; developmental history, include history of learning struggles, and family history of learning problems | <p>If attention concerns select at least one narrow scale: Conners 4 Conners 4-Short Form ADDES-4 BRIEF-2</p> | Observe in class related to the area of suspected SLD (30 min to 1 hour) | Note level of confidence related to areas of academic and/or processing weakness | <p>IQ</p> <p>Processing: *Auditory processing *Attention *Phonological processing *Visual processing, *Fluid reasoning, Working memory Long-term memory *Sensory motor Processing speed Executive functioning</p> <p>Academic measures (if in state policies)</p> <p>Orthographic Processing if reading</p> <p>*required in ed code in some states</p> <p>phonological processing falls under auditory processing</p> <p>Attention may be evaluated using rating scales and/or direct measures</p> |
| TBI | Review cumulative file, discipline file, special education or 504 records; review outside assessments provided by parent; obtain medical records regarding the TBI | <p>School nurse</p> <p>Academic assessor</p> <p>Possibly SLP if language loss occurred</p> <p>Possibly OT if sensory/motor was affected</p> | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; developmental history, include history of the injury (ask about loss of consciousness and for how long) | <p>Select at least one broad scale: BASC-3 CBRS</p> <p>If adaptive functioning concerns: ABAS-3 Vineland-3</p> <p>If attention/EF concerns: Conners 4 Conners 4-Short Form ADDES-4 BRIEF-2</p> | Observe in structured and/or unstructured settings (1 hr); emotionality affected (2 hr); take time on task data | Note behaviors that may have negatively impacted testing: attention span, confusion, fatigue, eye strain/headache complaints, etc. | <p>IQ</p> <p>Processing: Memory Attention Executive Functioning Processing Speed</p> <p>Academic measures</p> |

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| VI | Review cumulative file, discipline file, special education or 504 records; review outside assessments provided by parent; most recent vision exam results | Teacher of visually impaired Possibly orientation & mobility instructor | Parent/teacher questionnaires and/or interview via phone call, in person, or Zoom; student interview if appropriate for developmental level; developmental history, include history of vision impairment | If social/ emotional/ behavioral concerns select at least one broad scale: BASC-3 CBRS | Observe in structured and/or unstructured settings (30 min.-1 hr) | Note if test materials were modified to accommodate visual impairment—if so, do not report scores - interpret qualitatively | IQ WISC-V recommended due to clearer differentiation between verbal and nonverbal tasks. Academic measures |

REFERENCES:

Miller & Maricle, 2019. Essentials of School Neuropsychological Assessment. Wiley: Hoboken, NJ
 Goldstein & Ozonoff, 2020. Assessment of Autism Spectrum Disorder. Guilford: New York, NY