Psychological & Educational

Consultancy Services

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Example Adult Intellectual Disability Assessment:

Jane Smith

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BIOGRAPHICAL DETAILS

Name: Jane Smith
Date of Birth: 15/04/1991
Age: 23
Gender: Female
Address: 39 Jacaranda Circle   WEMBLEY   WA   6014
Phone Number: 0411 222 333

REFERRAL INFORMATION

Jane was referred to Psychological and Educational Consultancy Services (PECS) by Dr Greg Smith (Consultant Psychiatrist) for a current assessment to suffice Disability Services Commission (DSC) eligibility requirements.

CURRENT CONCERNS

From a presented list, Jane identified concerns in the following areas:

- Health
- Neurological
- Academic
- Occupational
- Social skills
- Learning
- Mathematics
- Written language
- Expressive language
- Receptive language
- Attention
- Anxiety
- Obsessions/compulsions
- Behavioural
- Eating
- Visual-motor

Relevant information reported during the initial interview session, and from Jane's mother:

- Was born with no apparent complications
- Solely left handed/footed
- No major medical or neurological conditions
- Normal visual acuity due to laser eye surgery 3 years ago
- Normal auditory acuity (tested 2 years ago)
- Suffers from an attention deficit disorder and epilepsy
- Takes methylphenidate for ADHD and also takes Lamotrigine
- Has difficulty processing information
- Has had issues with motor dyspraxia, hand-eye coordination, space and body awareness, fine/gross motor skills and incontinence
- Is unable to tell the time
- Has difficulty with mathematics – needs to use her fingers for all counting
- Has difficulties with her sleep
- Fixates on things such as her teddy, iPad and making lists
- Often picking her nose and then putting her finger in mouth
- Tongue licking lips
- Picking thumb in deep trance
- Stating the obvious
- Constantly interrupts
- Uses a loud voice in public, laughs out loud
- Bumping into things-Lack of space & body awareness
- Has issues with crossing roads safely and understanding stranger danger (Personal safety)
- Phobias-bugs, spiders
- Fixations-bear, babies, dogs, fingers, writing lists, her teddy, iPad
- Routine-same order every morning
- No sense of smell
- Sleep walking to eat
- Has incontinence issues
- Has visual problems
- Aggressive/violent when confused, change of routine, paranoid
- Anxiety if can't find something, disturbed, unfamiliar situations
- Talks to self
- Requires assistance with personal care-toilet hygiene, bathing, diet, exercise, sleep, medication
- Has no friends – has difficulty understanding social rules, interpersonal interactions, forming relationships, socially awkward
- Has ADHD, ODD, epilepsy, speech & language delays, difficulty problem solving, reasoning and with abstract concepts
- Motor dyspraxia -slow at organising and processing information, coordination, fine & gross motor skills
- Has previously been diagnosed with an intellectual disability (see results at bottom)
- Attended an ESU at school from Year 8-12 and had an educational assistant in primary school
- Jane reported that she can get violent toward her parents although she tries to control it
- Other interventions include psychiatrists, clinical and school psychologists, social workers, counsellors, sleep clinics, Edge employment services, OTs, physiotherapists, speech therapists and dieticians

Past Psychometric Test Results:

Year:	2001
Age:	9 years 10 months
Examiner:	School Psychologist – Non-Government Schools Psychology Service

WISC-III Index Scores

WISC-III Scale	Percentile Rank	Qualitative Intellectual Classification
Verbal IQ	4	Borderline
Performance IQ	<1	Extremely Low
Full Scale (FSIQ)	**1**	**Extremely Low**

Full report sighted by author and provided as an accompanying document.

Psychometric Tests Administered:

Test	*Date of Administration*
Wechsler Adult Intelligence Scale-Fourth Edition (WAIS-IV, 2008)	17/04/2015

WAIS-IV Overview:

The Wechsler Adult Intelligence Scale-Fourth Edition (WAIS-IV) is a test designed to measure intelligence in adults and older adolescents.

It is composed of 10 core subtests and five supplemental subtests, with the 10 core subtests comprising the Full Scale IQ.

The WAIS-IV has been language adapted for Australia and New Zealand.

WAIS-IV Subtests:

Table 1: WAIS-IV Subtest Descriptions

VERBAL COMPREHENSION	
Vocabulary	The Vocabulary subtest required Jane to explain the meaning of words presented in isolation, both visually and orally. As a direct assessment of word knowledge, the subtest is one indication of her overall verbal comprehension and fund of knowledge. Performance on this subtest also requires abilities to verbalise meaningful concepts as well as to retrieve information from long-term memory.
Similarities	On the Similarities subtest Jane was required to respond orally to a series of word pairs by explaining the similarity of the common objects or concepts they represent. This subtest examines her ability to abstract meaningful concepts and relationships from verbally presented material. As well as involving crystallised intelligence, abstract reasoning, auditory comprehension, memory, associative and categorical thinking, distinction between nonessential and essential features and verbal expression.
Information	The Information subtest required Jane to respond verbally to a series of orally presented questions that assess the individual's knowledge about common events, objects, places, and people. The subtest is primarily a measure of her fund of general knowledge. Performance on this subtest also may be influenced by her cultural experience, as well as her ability to retrieve information from long-term memory.
Comprehension	The Comprehension subtest required Jane to provide oral solutions to everyday problems and to explain the underlying reasons for certain social rules or concepts. This subtest provides a general measure of verbal reasoning and conceptualisation, verbal comprehension and expression. In particular, this subtest assesses her comprehension of social situations and social judgment, as well as her knowledge of conventional standards of social behaviour.

PERCEPTUAL REASONING	
Block Design	The Block Design subtest required Jane to use two-colour cubes to construct replicas of two-dimensional, geometric patterns. This subtest assesses ability to mentally organize visual information. More specifically, this subtest assesses her ability to analyse part-whole relationships when information is presented spatially. Performance on this task also may be influenced by visual-spatial perception and visual perception-fine motor coordination, as well as planning ability.
Matrix Reasoning	The Matrix Reasoning subtest involves a series of incomplete gridded patterns that Jane completes by pointing to or saying the number of the correct response from 5 possible choices. This subtest assesses fluid intelligence, broad visual intelligence, classification and spatial ability, as well as Jane's knowledge of part-whole relationships and perceptual organisation abilities.
Visual Puzzles	The Visual Puzzles subtest requires Jane to view a completed puzzle and to then select three response options, which when combined will form the completed puzzle. This is a measure of an individual's non-verbal reasoning ability and their ability to both analyse and synthesise abstract visual stimuli.
Picture Completion *	The Picture Completion subtest required Jane to identify the important missing part in each of a series of pictures of common objects, events, or scenes. An indication of her ability in visual discrimination, the Picture Completion subtest assesses the abilities to detect essential details in visually presented material and to differentiate them from nonessential details. Performance on this task also may be influenced by an individual's general level of alertness to the world around her and long-term visual memory.
Figure Weights	The Figure Weights subtest involves Jane viewing a scale, which is missing weight(s) and then she has to select the response option which balances that scale. This is a measure of quantitative and analogical reasoning, which involves reasoning processes that can be expressed mathematically. The task emphasises the use of deductive and inductive logic.
WORKING MEMORY	
Arithmetic	Jane was required to mentally solve a series of orally presented arithmetic problems on the Arithmetic subtest. A direct measure of her numerical reasoning abilities, the subtest requires attention, concentration, short-term memory, and mental control. The Arithmetic subtest also measures logical reasoning, quantitative knowledge and sequential processing.
Digit Span	The Digit Span subtest is a series of orally presented number sequences that Jane must repeat verbatim (Digit Span Forward), in reverse order (Digit Span Backwards) or recall the numbers in ascending order (Digit Span Sequencing). A direct assessment of Jane's short-term auditory memory, the Digit Span subtest requires attention, concentration, and mental control and can be influenced by the ability to correctly sequence information. The Digit Span Sequencing task increases the working memory demands of the task.
Letter-Number Sequencing	The Letter-Number Sequencing subtest involves a series of orally presented sequences of letters and numbers that Jane simultaneously tracks and orally completes, with the numbers in ascending order and the letters in alphabetical order. This task is a measure of sequential processing ability, short term auditory memory span, mental manipulation, attention, and concentration. Letter-Number Sequencing also assesses an individual's underlying information processing abilities, cognitive flexibility and fluid intelligence.

PROCESSING SPEED	
Symbol Search	On the Symbol Search subtest Jane was required to inspect several sets of symbols and indicate if special target symbols appeared in each set. A direct test of speed and accuracy, the subtest assesses scanning speed and sequential tracking of simple visual information. Performance on this subtest also may be influenced by visual discrimination and visual-motor coordination.
Coding	The Coding subtest required Jane to use a key to associate a series of symbols with a series of shapes and to use a pencil to draw the symbols next to the shapes. A direct test of speed and accuracy, the Coding subtest assesses ability in quickly and correctly scanning and sequencing simple visual information. Performance on this subtest also may be influenced by short-term visual memory, attention, or visual-motor coordination.
Cancellation	The Cancellation subtest asks Jane to scan a structured arrangement of shapes, for a specified target shape, which she will mark. The Cancellation subtest is a direct measure of processing speed, as well as visual selective attention, vigilance, perceptual speed and visual motor ability. The inclusion of a decision making component (selection is based on both shape and colour) places more complex demands upon Jane.

Examiner's Details:

EXAMINER: Dr Shane Langsford
QUALIFICATIONS: BPsych, BEd (First Class Hons), PhD

Test Behaviour:

Jane said that she thinks that she is good with numbers because she works with numbers at Coles.

Jane's approach to many of the subtests was consistent with that of an individual with an Intellectual Disability.

It is my opinion that the scores that Jane achieved on the WAIS-IV are indicative of her general cognitive ability at this particular time.

Psychological Test Results:

   Age at Testing: 23 years

Table 2: WAIS-IV Summary Scores

WAIS-IV Scale	IQ Score	Percentile Rank	95% Confidence Interval	Intellectual Classification
Verbal Comprehension Index (VCI)	75	4	70-83	Borderline
Perceptual Reasoning Index (PRI)	73	3	69-82	Borderline
Working Memory Index (WMI)	73	3	69-82	Borderline
Processing Speed Index (PSI)	74	4	68-82	Borderline
General Ability Index (GAI)	71	2	68-78	Borderline
Full Scale IQ (FSIQ)	**68**	**1**	**68-77**	**Extremely Low**

Index scores have a mean Composite Score of 100 (50th percentile) and a standard deviation of 15.
Percentile Rank refers to Jane's standing among 100 adults of similar age.
Therefore, a Percentile Rank of 50 indicates that Jane performed exactly at the average level for her chronological age.
GAI is not considered to be valid if there is an 18+ difference between the VCI and PRI.
FSIQ is not considered to be valid if there is an 18+ difference between the VCI, PRI, WMI or PSI.

The **Verbal Comprehension Index (VCI)** is a measure of verbal acquired knowledge and verbal reasoning incorporating the 3 core Verbal subtests of Information, Similarities, and Vocabulary and one supplemental subtest Comprehension.

The **Perceptual Reasoning Index (PRI)** is a measure of fluid reasoning, spatial processing, attentiveness to detail, and visual-motor integration comprising the 3 core Performance subtests of Visual Puzzles, Block Design, and Matrix Reasoning and two supplemental subtests; Figure Weights and Picture Completion.

The **Working Memory Index (WMI)** comprises the two core subtests of Arithmetic, Digit Span, and one supplemental subtest; Letter-Number Sequencing. The subtests provide a range of verbally presented tasks that require the individual to attend to information, to hold briefly and process that information in memory, and then to formulate a response.

The **Processing Speed Index (PSI)** is an indication of an individual's ability to process simple or routine visual information quickly and efficiently and to quickly perform tasks based on that information. Good speed of simple information processing may free cognitive resources for the processing of more complex information and ease new learning. The PSI comprises two core subtests; Coding and Symbol Search and one supplemental subtest; Cancellation.

The **General Ability Index (GAI)** is an optional summary score that is less sensitive to the influence of working memory and processing speed. As working memory and processing speed are vital to a comprehensive evaluation of cognitive ability, it should be noted that the GAI does not have the breadth of coverage as the FSIQ.

The **Full Scale IQ (FSIQ)** score is the overall summary score that estimates an individual's general level of intellectual functioning. It is usually considered to be the score that is most representative of global intellectual functioning.

Table 3: WAIS-IV Discrepancy Summaries

| WAIS-IV Index	Difference	Critical Cutoff	Exceeds .05 Statistical Significance	Base Rate
Verbal Comprehension – Perceptual Reasoning	-1	9.29	No	56.6
Verbal Comprehension – Working Memory	-4	10.18	No	42.3
Verbal Comprehension – Processing Speed	2	10.99	No	41.3
Perceptual Reasoning — Working Memory	-3	10.99	No	36.5
Perceptual Reasoning – Processing Speed	3	11.75	No	40.7
Working Memory — Processing Speed	6	12.46	No	27.5
Full Scale IQ – General Ability Index	-2	3.50	No	37.6

Statistical Significance (Critical Values) at the .05 level
Base rate refers to the clinical significance (vs Ability Sample) - <15% = clinically significant

Between Index Interpretation:
No significant differences were found between any of Jane's Indexes.

Figure 1: WAIS-IV Subtest Scaled Scores by Index
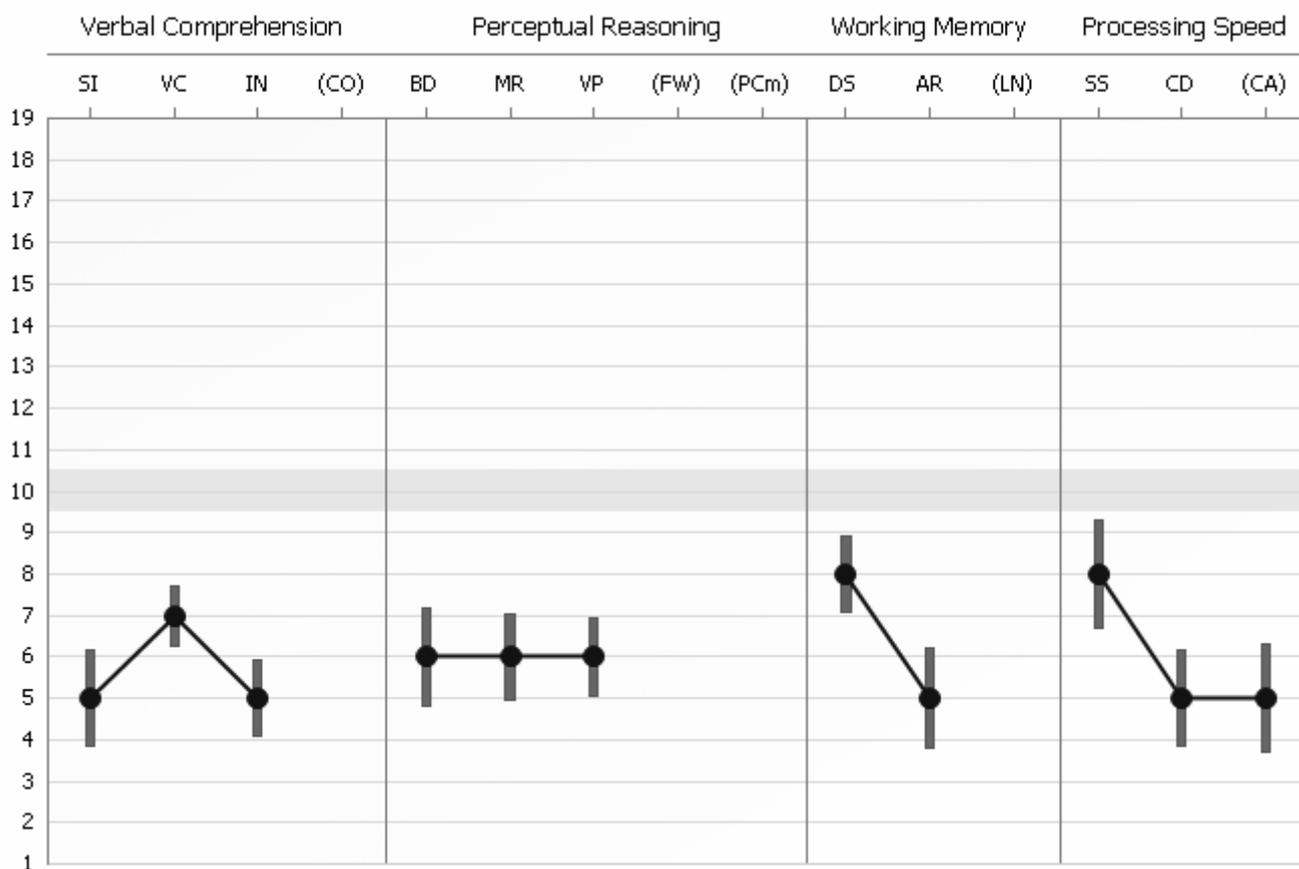
Table 4: WAIS-IV Subtest Scaled Scores

Subtests	Scaled Score	Percentile Rank
Verbal Comprehension Index		
Similarities	5	5
Vocabulary	7	16
Information	5	5
Perceptual Reasoning Index		
Block Design	6	9
Matrix Reasoning	6	9
Visual Puzzles	6	9
Working Memory Index		
Digit Span	8	25
Arithmetic	5	5
Processing Speed Index		
Symbol Search	8	25
Coding	5	5
*Cancellation	5	5

See Appendix 1 for complete subtest descriptions
Non-core subtest

Table 5: WAIS-IV Within-Index Discrepancies

Discrepancy Comparisons	Difference	Critical Cut-off	Statistical Significance	Base Rate
Digit Span – Arithmetic	**3**	**2.57**	**Yes**	**17.5**
Symbol Search – Coding	3	3.41	No	15.1

Statistical Significance (Critical Values) at the .05 level

Between Subtest Interpretation:
Jane's performance on the Digit Span subtest was significantly better than her performance on the Arithmetic subtest, indicating that Jane is demonstrating variability in her performance across the two core working memory subtests.

Jane's performance on the Symbol Search subtest was commensurate with her performance on the Coding subtest, indicating that Jane is not demonstrating variability in her performance across the two core processing speed subtests.

Table 6: Differences Between VCI Subtest Scores and Mean of VCI Subtest Scores

VCI Subtests	Scaled Score	VCI Mean	Difference From Mean	.05 Critical Value	Strength or Weakness
Similarities	5	5.67	-0.67	1.91	
Vocabulary	7	5.67	1.33	1.58	Almost
Information	5	5.67	-0.67	1.64	

Statistical Significance (Critical Values) at the .05 level
*Non-core subtest

Table 7: Differences Between PRI Subtest Scores and Mean of PRI Subtest Scores

PRI Subtests	Scaled Score	PRI Mean	Difference From Mean	.05 Critical Value	Strength or Weakness
Block Design	6	6.00	0	2.05	
Matrix Reasoning	6	6.00	0	1.92	
Visual Puzzles	6	6.00	0	1.99	

Statistical Significance (Critical Values) at the .05 level
*Non-core subtest

Please note, the statistics provided in this table are not standard WAIS-IV analyses and are provided as a guide only

Subtest	Subtest Scaled Score	FSIQ Mean Score	Difference From FSIQ Mean	Nominal Critical Cut-off	Strength or Weakness
Working Memory					
Digit Span	8	5.8	2.2	2.50	
Arithmetic	5	5.8	-0.8	2.50	
*Letter-Number Sequencing	9	5.8	3.2	2.50	Strength
Processing Speed					
Symbol Search	8	5.8	2.2	2.50	
Coding	5	5.8	-0.8	2.50	
*Cancellation	5	5.8	-0.8	2.50	

See Table 1 for complete subtest descriptions
*Non-core subtest

Intellectual Strengths and Weaknesses:
Statistical analysis of the results revealed the following subtests to be significant (.05) cognitive strengths or weaknesses relative to Jane's own performance.

Strengths:
One significant (.05) cognitive strength relative to Jane's own performance was found; namely *Letter-Number Sequencing*.

The Letter-Number Sequencing subtest involves a series of orally presented sequences of letters and numbers that Jane simultaneously tracks and orally completes, with the numbers in ascending order and the letters in alphabetical order. This task is a measure of sequential processing ability, short term auditory memory span, mental manipulation, attention, and concentration. Letter-Number Sequencing also assesses an individual's underlying information processing abilities, cognitive flexibility and fluid intelligence.

Weaknesses:
No significant (.05) cognitive weaknesses relative to Jane's own performance were found.

Table 9: Working Memory Process Score Summary

Subtest	Scaled Score	Percentile Rank
Digit Span Forward	7	16
Digit Span Backward	9	37
Digit Span Sequencing	10	50

Jane's performance on the Digit Span Forward portion of the subtest was at the **7**th percentile, indicating that her simple verbal attention was within the **Borderline** range.

Jane's performance on the Digit Span Backward portion of the subtest was at the **37**th percentile, indicating that her verbal working memory ability was within the **Average** range.

Jane's performance on the Digit Span Sequencing portion of the subtest was at the **50**th percentile, indicating that her ability to correctly sequencing digits mentally was within the **Average** range.

Table 10: Digit Span Process Discrepancy Comparison

Subtest/Process Score	Scaled Score 1	Scaled Score 2	Difference	Critical Cut-off	Exceeds .05 Statistical Significance	Base Rate
DS Forward – DS Backward	7	9	-2	3.65	No	31.5
DS Forward – DS Sequencing	7	10	-3	3.60	No	20.9
DS Backward – DS Sequencing	9	10	-1	3.56	No	43.4

Statistical Significance (Critical Values) at the .05 level

Digit Span Process Discrepancy Interpretation:
Jane's performance on the Digit Span Backward portion of the subtest was commensurate with her performance on the Digit Span Forward portion.

Jane's performance on the Digit Span Forward portion of the subtest was commensurate with her performance on the Digit Span Sequencing portion.

Jane's performance on the Digit Span Backward portion of the subtest was commensurate with her performance on the Digit Span Sequencing portion.

ADAPTIVE BEHAVIOUR ASSESSMENT

Adaptive Behaviour Tests Administered:

Test	*Date of Administration*
Adaptive Behaviour Assessment System–Second Edition (ABAS-II, 2008)	17/04/2015

ABAS-II Overview:

The Adaptive Behaviour Assessment System – Second Edition provides a comprehensive, norm-referenced assessment of adaptive skills for individuals ages birth to 89 years. The ABAS-II may be used to assess an individual's adaptive skills for diagnosis and classification of disabilities and disorders, identification of strengths and limitations, and to document and monitor an individual's progress over time. The comprehensive range of specific adaptive skills and broad adaptive domains measured by the ABAS-II correspond to the specifications identified by the American Association of Mental Retardation (AAMR; 1992, 2002b) and the Diagnostic and Statistical Manual of Mental Disorders – Fourth Edition Text Revision (DSM-IV-TR; American Psychiatric Association, 2000).

The ABAS-II consists of 5 rating forms, which can be completed independently by a respondent or may be read aloud to a respondent who has limited reading skills. Each rating form is easy to complete and score, requiring approximately 20 minutes to complete and 5-10 minutes to hand score.

Respondents read and respond to all items and rate the extent to which the individual performs the adaptive skills when needed. The rating scale for the items allows respondents to indicate if the individual is able to independently perform an activity and, if so, how frequent she or he performs the activity when it is needed.; **0** *(Is not able)*, **1** *(Never or Almost Never When Needed)*, **2** *(Sometimes When Needed)*, or **3** *(Always or Almost Always When Needed)*.

Although it is possible to assess the adaptive skills of an individual with a single rating form, the use of multiple rating forms is recommended to provide a comprehensive assessment across a variety of settings.

Significant limitations in adaptive behaviour are defined as performance at least 2 Standard Deviations below the mean on (a) the Conceptual, Social or Practical Domain, or (b) an overall score on a standardised measure that assesses these three adaptive domains (e.g. GAC).

Adult Form (Ages 16-89)

The Adult Form is a comprehensive, diagnostic measure of the adaptive skills that have primary relevance for an adult's functioning in home and community settings.

The Adult Form may be completed by the individual being evaluated for a self-rating if her or her functional skills are judged to be adequate for providing valid responses to the items. Family members, supervisors, or other respondents who are familiar with the individual in her or her various environments can also complete this form.

Two separate norms tables are provided for the Adult Form: Adult Form, Self Report and Adult Form, rated by Others. The Adult Form is used for individuals ages 16-89 years and includes 239 items, with 20 to 27 items per skill area.

ABAS-II Skills Areas:

Skill Areas for Teacher, Parent and Adult Forms

Communication	Speech, language, and listening skills needed for communication with other people, including vocabulary, responding to questions, conversation skills etc
Community Use	Skills needed for functioning in the community, including use of community resources, shopping skills, getting around in the community etc
Functional Academics	Basic reading, writing, mathematics and other academic skills needed for daily, independent functioning, including telling time, measurement, writing notes and letters etc
School/Home Living	Skills needed for basic care of a home or living setting (or for the Teacher Form, school and classroom setting), including cleaning, straightening, property maintenance and repairs, food preparation, performing chores etc
Health and Safety	Skills needed for protection of health and to respond to illness and injury, including following safety rules, using medicines, showing caution etc
Leisure	Skills needed for engaging in and planning leisure and recreational activities, including playing with others, engaging in recreation at home, following rules in games etc
Self-Care	Skills needed for personal care including eating, dressing, bathing, toileting, grooming, hygiene etc
Self-Direction	Skills needed for independence, responsibility and self-control, including starting and completing tasks, keeping a schedule. following time limits, following directions, making choices etc
Social	Skills needed to interact socially and get along with other people, including having friends, showing and recognising emotions, assisting others, using manners etc
Work	Skills needed for successful functioning and holding a part or full-time job in a work setting, including completing work tasks, working with supervisors, and following a work schedule

Skill Areas for Teacher, Parent and Adult Forms

ABAS-II Composite Score Scales:

The **Conceptual Domain Composite** score is derived from the sum of scaled scores from the *Communication*, *Functional Academics* and *Self-Direction* Skill Areas. Conceptual skills include receptive and expressive language, reading and writing, money concepts and self-direction.

The **Social Domain Composite** score is derived from the sum of scaled scores from the *Social* and *Leisure* Skill Areas. Social skills include interpersonal relationships, responsibility, self-esteem, gullibility, naiveté, following rules, obeying laws and avoiding victimisation.

The **Practical Domain Composite** score is derived from the sum of scaled scores from the *Self-Care*, *Home/School Living*, *Community Use*, *Health and Safety* and *Work* Skill Areas. Practical skills include basic maintenance activities of daily living (e.g., eating, mobility, toileting, dressing), instrumental activities of daily living (e.g., meal preparation, housekeeping, transportation, taking medications, money management, telephone use) together with occupational skills and maintenance of safe environments.

The **General Ability Composite** (GAC) score is derived from the sum of scaled scores from seven, nine or ten skill areas, depending on the age of the individual and the type of rating form. The GAC represents a comprehensive and global estimate of an individual's adaptive functioning. The GAC describes the degree to which an individual's adaptive skills generally compare to the adaptive skills of other individual's within the same age group.

ABAS-II Test Results:

> *Age at Testing: 23 years*

Table 1: Sum of Scaled Scores to Composite Score Conversions

Composite	Sum of Scaled Scores	Composite Score	Percentile Rank	95% Confidence Interval	Qualitative Range
GAC	**42**	**63**	**1**	**60-66**	**Extremely Low**
Conceptual	15	72	3	68-76	Borderline
Social	14	84	14	79-89	Below Average
Practical	13	61	0.5	57-65	Extremely Low

Adaptive Domain scores have a mean of 100 (50th percentile) and a standard deviation of 15.
Percentile Rank refers to Jane's standing among 100 individuals of a similar age.
GAC is not considered to be valid if considerable scatter exists among the skill area scaled scores.

Jane's overall level of adaptive behaviour is best described by her **General Adaptive Composite** score (1st percentile).

Table 2: ABAS-II Discrepancy Summaries

Domain Composite	Difference	Critical Cutoff	Exceeds .05 Statistical Significance	Base Rate
Conceptual -- Social	**-12**	**6.58**	**Yes**	**8.3%**
Conceptual -- Practical	**11**	**5.88**	**Yes**	**7.2%**
Social -- Practical	**23**	**6.58**	**Yes**	**1.1%**

Statistical Significance (Critical Values) at the .05 level
Base rate refers to the clinical significance (vs Ability Sample) - <15% = clinically significant

Between Domain Interpretation:

Jane functions much better on social skills than on conceptual domain skills. The -12 point difference **is** statistically significant at the .05 level.

Jane functions much better on conceptual domain skills than on practical domain skills. The 11 point difference **is** statistically significant at the .05 level.

Jane functions much better on social domain skills than on practical domain skills. The 23 point difference **is** statistically significant at the .05 level.

<u>*Figure 1: ABAS-II Skill Area Scaled Score Profile*</u>
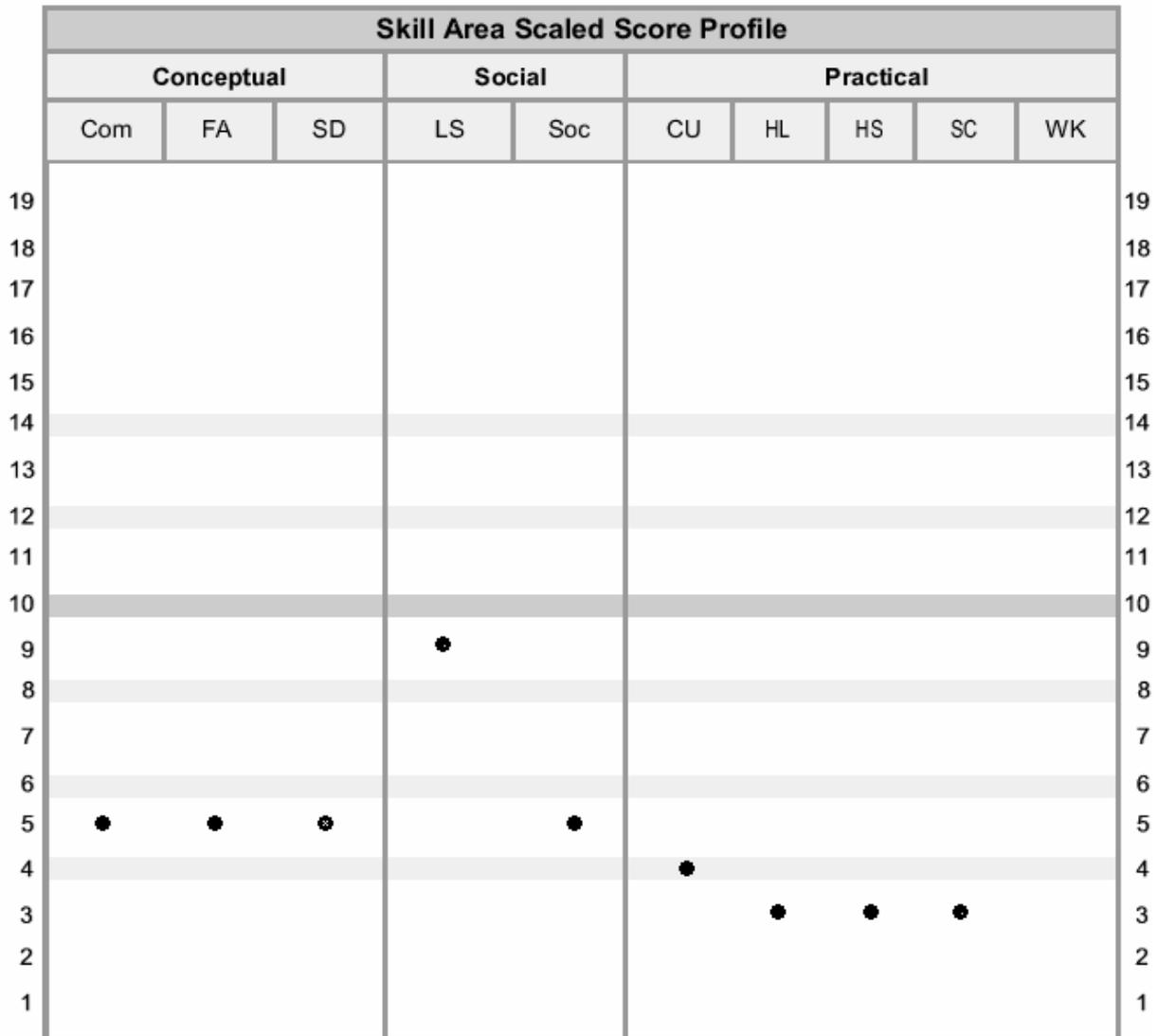
Table 3: Raw Score to Scaled Score Conversions

Skill Areas	Scaled Scores	Qualitative Range
Communication (Com)	5	Borderline
Community Use (CU)	4	Borderline
Functional Academics (FA)	5	Borderline
Home Living (HL)	3	Extremely Low
Health and Safety (HS)	3	Extremely Low
Leisure (LS)	9	Average
Self-Care (SC)	3	Extremely Low
Self-Direction (SD)	5	Borderline
Social (Soc)	5	Borderline

Scaled scores have a mean of 10 (50th percentile) and a standard deviation of 3.
Percentile Rank refers to Jane's standing among 100 individuals of a similar age.

Table 4: Strengths and Weaknesses

Skill Areas	Skill Area Scaled Score	Mean Scaled Score	Difference from Mean	Critical Value	Strength or Weakness	Base Rate
Conceptual						
Communication	5	4.67	0.33	2.22		>25%
Functional Academics	5	4.67	0.33	2.22		>25%
Self-Direction	5	4.67	0.33	1.95		>25%
Social						
Leisure	9	4.67	4.33	1.82	Strength	1-2%
Social	5	4.67	0.33	2.22		>25%
Practical						
Community Use	4	4.67	-0.67	2.22		>25%
Home Living	3	4.67	-1.67	2.08		>25%
Health and Safety	3	4.67	-1.67	2.54		10-25%
Self-Care	3	4.67	-1.67	2.66		>25%

Statistical Significance (Critical Values) at the .05 level

Skill Area Strengths and Weaknesses:
Statistical analysis of the results revealed the following skill areas to be significant (.05) adaptive behaviour strengths or weaknesses relative to Jane's own performance.

Strengths:
One significant (.05) adaptive behaviour strength relative to Jane's own performance was found; namely *Leisure* Skill Area.

Leisure: Skills needed for engaging in and planning leisure and recreational activities, including playing with others, engaging in recreation at home, following rules in games etc

Weaknesses:
No significant (.05) adaptive behaviour weaknesses relative to Jane's own performance were found.

Adaptive Behaviour Summary:
Jane's overall level of adaptive behaviour is best described by her ABAS-II **General Adaptive Behaviour Composite** score (1st percentile; Extremely Low).

Screening Tests Administered:

Test	*Date of Administration*

Adult psychprofiler (APP; Langsford, Houghton, & Douglas 2014)   17/04/15

APP Outline:
The APP utilises two separate screening forms; the Self-report Form (SRF: 177 items) and Observer-report Form (ORF: 177 items) for the simultaneous screening of the 17 most prevalent disorders in adults aged 18 years and above.

The APP comprises screening criteria that closely resemble the diagnostic criteria of the *Diagnostic and Statistical Manual of Mental Disorders–Fifth Edition* (DSM-5: American Psychiatric Association: APA, 2013).

All items of the APP require responses to be made on a six-point scale pertaining to the perceived frequency of the behaviour (ie., Never, Rarely, Sometimes, Regularly, Often, or Very Often).

When calculating disorder screening scores, the items are coded as follows: Never = 0, Rarely = 0, Sometimes = 0, Regularly = 1, Often = 1, and Very Often = 1. These values were chosen because although many people with and without disorders may exhibit similar behaviours, it is the frequency of the behaviour that determines whether it is of clinical significance.

A small number of exceptions to these scoring rules apply where some of the behaviours (e.g., fighting with a weapon, stealing) are considered to be of sufficient severity that 'Sometimes' is also awarded a score of 1.

Therefore, the summation of the items within each disorder produces a screening score for that disorder, which if exceeding the screening cutoff score, designates that the individual has been awarded a *positive screen* for that disorder.

In order to ensure its validity and reliability, the first version of the *psychprofiler* was subjected to a series of rigorous psychometric analyses over a number of years. This process has involved validation against a large mainstream sample (n>1000) as well as clinical calibration against individuals with formal diagnoses. These analyses found the *psychprofiler* to be a highly reliable and valid screening instrument.

The APP is primarily administered in order to provide an objective indication of whether the individual exhibits behaviours characteristic of a suspected disorder, possible comorbid disorders, and issues pertaining to differential diagnosis.

For further information regarding the APP, please visit www.psychprofiler.com or contact Dr Shane Langsford on (08) 9388 8044.

Please note that any indication of a positive screen on the APP does not constitute a formal diagnosis. A positive screen merely indicates that the individual has met sufficient criteria for a disorder to warrant further investigation.

APP Screening Test Results:

Jane's mother reported positive screens on Jane's behalf for:

- Generalised Anxiety Disorder
- Specific Phobia
- Attention-Deficit/Hyperactivity Disorder: Combined Presentation
- Autism Spectrum Disorder
- Bipolar I Disorder
- Antisocial Personality Disorder
- Schizophrenia
- Specific Learning Disorder – with Impairment in Mathematics Disorder

A copy of the APP Report is included as an Appendix, as is the completed APP Form.

Reason for Referral:
Jane was referred to Psychological and Educational Consultancy Services (PECS) by Dr Greg Jones (Consultant Psychiatrist) for a current assessment to suffice Disability Services Commission (DSC) eligibility requirements.

Current Concerns:
From a presented list, Jane identified concerns in the following areas:

- Health
- Neurological
- Academic
- Occupational
- Social skills
- Learning
- Mathematics
- Written language
- Expressive language
- Receptive language
- Attention
- Anxiety
- Obsessions/compulsions
- Behavioural
- Eating
- Visual-motor

Background and Clinical Presentation Information:
Many of Jane's behaviours and mannerisms are consistent with that of an individual with an Intellectual Disability.

Cognitive Assessment:
Jane achieved index scores at the following levels:
- Verbal Comprehension Index (VCI) $= 4^{th}$ percentile
- Perceptual Reasoning Index (PRI) $= 3^{rd}$ percentile
- Working Memory Index (WMI) $= 3^{rd}$ percentile
- Processing Speed Index (PSI) $= 4^{th}$ percentile
- General Ability Index (GAI) $= 2^{nd}$ percentile
- **Full Scale IQ (FSIQ)** **$= 1^{st}$ percentile**

No significant differences were found between any of Jane's Indexes.

Please note: Jane achieved a WISC-III score at the 1st percentile when tested in 2001 at age 9 years 10 months by the School Psychologist – Non-Government Schools Psychology Service

Adaptive Behaviour Assessment:
Jane's overall level of adaptive behaviour is best described by her ABAS-II General Adaptive Composite score (1st percentile; Extremely Low).

Global Screening Assessment:

Jane's mother reported positive screens on Jane's behalf for:

- Generalised Anxiety Disorder
- Specific Phobia
- Attention-Deficit/Hyperactivity Disorder: Combined Presentation
- Autism Spectrum Disorder
- Bipolar I Disorder
- Antisocial Personality Disorder
- Schizophrenia
- Specific Learning Disorder – with Impairment in Mathematics Disorder

CONCLUSION AND SUMMARY OF INTELLECTUAL DISABILITY DSM-5 CRITERIA

Intellectual Disability (Intellectual Developmental Disorder) is a disorder with onset during the developmental period that includes both intellectual and adaptive functioning deficits in conceptual, social, and practical domains. (DSM-5 Definition, p.33).

As per the DSM-5, the following three criteria must be met:

Criterion A.	
Deficits in intellectual functions, such as reasoning, problem solving, planning, abstract thinking, judgement, academic learning, and learning from experience, confirmed by both clinical assessment and individualised, standardised intelligence testing.	
A1: Clinical Assessment.	Criterion Met (see Background and Clinical Presentation Information and Test Behaviour section)
A2. Intellectual Assessment	Criterion Met (as per FSIQ/Index/ Subtest scores in Cognitive Assessment section)
Criterion B.	
Deficits in adaptive functioning that result in failure to meet developmental and socio-cultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such as communication, social participation, and independent living, across multiple environments, such as home, school, work, and community.	
B. Adaptive Functioning	Criterion Met (see Background and Clinical Presentation Information and Adaptive Behaviour section)
Criterion C.	
Onset of intellectual and adaptive deficits during the developmental period	
C. Onset prior to age 18	Criterion Met (see Background and Clinical Presentation Information section)
Severity:	
The various levels of severity are defined on the basis of adaptive functioning, and not IQ scores, because it is adaptive functioning that determines the level of supports required. Levels of severity are Mild, Moderate, Severe, and Profound.	
Severity.	Severe (see Background and Clinical Presentation Information and Adaptive Behaviour section)

As indicated in the summary table above, Jane meets the criteria for a diagnosis of an Intellectual Disability, which can be described as being of a "Severe" nature.

Jane's intellectual disability is a permanent condition and was first identified during childhood (FSIQ=1st percentile, age 9).

Jane's clinical presentation is consistent with that of an individual with an Intellectual Disability, and her daily functioning is further complicated/impeded by a number of psychiatric/psychological conditions, none of which are deemed to carry any primary diagnostic implications.

RECOMMENDATIONS

Please note, PECS does not provide micro-strategies (e.g., sit student at front of classroom, etc) as part of their recommendations. PECS's provides recommendations on what further assessment is required, what intervention is necessary, and who is the most appropriate to provide the assessment/intervention recommended.

Disability Services Commission:

(1)   Jane's parents should provide a copy of this report to the Disability Services Commission.

Psychiatric Involvement:

(1)   Jane should once again be seen by Dr Jones, now that this new information is available for incorporation into her assessment.

_____   _____

Dr Shane Langsford   **Date of Report**
Managing Director -PECS
Registered Psychologist
APS College of Educational & Developmental Psychologists Academic Member