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EDUC 350

3 May 2007

### School Psychologist Interview

I interviewed school psychologist Laura Meisch who works for the North Manchester and Wabash School Corporations. We met with her at the Manchester Junior High School April 11, 2007. There are various types of assessment used to measure a child's cognitive abilities, emotional intelligence, and adaptive behaviors. There are also different ways to assess a child. Within the interview with Laura, we discussed five types of assessments. The assessments discussed measure intelligence, behavior, and there are a couple informal assessments as well. To my belief, these assessments were not as difficult to administer as I thought.

The first test was a 1-on-1 cognitive assessment called the Woodcock -Johnson (Woodcock-Johnson 30<sup>th</sup> Edition. Tests of Cognitive Abilities. Copyright 2001. Riverside Publishing Co.). The test is also standardized and norm-based. It includes 10 subtests, which each one looks at a different ability such as oral language, academic skills, academic fluency, and phoneme/grapheme knowledge. Academic areas focused on are reading, math, and written language. For example, a student who is having trouble with math reasoning would be administered the subtests of quantitative concepts and applied problems. Variables included with the test are ethnicity, community size, and geographic region.

The style of the test is flip-book so that the answers, which face the person administering the test, are on one side and the questions, which face the student, are on the other. The test is set

up by age or grade levels and the student starts at the test that is age or grade level appropriate. This explains why the test starts out easy and then gets harder as you move up each set. For example, children ages 2-6 will start out at the first set. There are three pictures that show a banana, dog, and shoes. The person administering the test will point to the picture and the student will tell the psychologist what that picture is of. The whole test can last anywhere from 1 to 2 hours.

Scoring for this assessment is done by a computer program. Items are scored as 1 or 0. The only thing that is not figured by the computer is the raw score which is figured by the psychologist. Next, the raw score is entered in the computer. The results given from the computer are the standard score and ability performances. Confidence interval, percentile ranks, and age equivalents are also given.

What does all this interpret? The psychologist can look at the data from the score reports and see where the student ranges in specific areas. From this, cognitive abilities can be seen. Average scores on this test range from 90 to 100 with a standard deviation of 15. If a student gets a 70, then the student has fallen into the low or mild disability range. According to Laura, percentile ranks and standard scores are the only categories looked at in the case conferences. The scores let the psychologist know if there is a mild disability and if so, then services can be determined from the information received.

The Wechsler Intelligence Scale for Children (Wechsler Intelligence Scale for Children 4<sup>th</sup> Edition. Harcourt Assessment. Copyright 2003) is the next test we looked at. This assessment is a standardized and norm-based test. The WISC is administered to students from age 4 to 19. "This test is to determine discrepancies between measured intellectual ability and academic achievement (Overton, 270)." Manipulatives and verbal questions are what this test consists of.

With the manipulatives there are blocks and for the verbal questions the child's answer is ranked 0 through 2.

This test is also a 1-on-1 assessment made up of 9 subtests. Subtests included are word reading, spelling, listening comprehension, oral expression, and etc. Materials included are easels, paper and pencil for tasks, and separate reading cards. There are specific starting points, which depend on the student's age, and ceiling rules for the student.

Instructions for the test are in a book along with what the psychologist says. For one of the subtests the child does not see or get anything. The two things the child does in this assessment are listening and responding to the questions being asked while the administer keeps score. For the verbal questions, if the child gives basic correct answers he or she gets a 1, if the child gives a correct answer with specific detail he or she gets a 2, and if the answer is wrong the child gets a 0.

Scoring for this test can be done by the computer program that comes with it or by hand. This test is also more complex. First, the child's chronological age must be determined, then the score, and based on that information results can be found on a scale as to where the child stands. Raw scores are used to obtain derived scores that are based on age or grade normative data. Tables are also provided to determine significant differences between individual subtest scores and composite scores.

The standard score is based on the child's I.Q. Not only can the administer see where the child's I.Q. falls but also get a first hand look at the child's strengths and weaknesses when it comes to listening and giving verbal responses which is how the test is set-up. This test lets the

psych see where the child is struggling in specific academic areas and if the child's cognitive abilities are at, above, or below his or her age/grade level. With the results, specific services or accommodations can be determined for the child. It may also show that the child may need more testing or evaluations just to make sure the results are correct.

The third test looked at was the Behavior Assessment System for Children (Behavioral Assessment System for Children 2<sup>nd</sup> Edition. Cecil R. Reynolds and Randy W. Kamphaus. Pearson Assessments). The age range for this assessment is from age 6 to 21. It can be given to students, parents, and teachers to fill out. All forms of the test are different.

I thought it was interesting that parent and child do a rating skills assessment, which the parent or student can complete if they wish. It is for parents who children are age 6 to 11. It could be a very useful tool. The only problem I see with this is the truth factor but I guess other results will show up from the tests administered by the psych or teacher to compare.

The assessment is made up of 160 questions and focuses on emotional index such as hyper-activity and aggression. The form of this assessment is a question and answer test for the parent, student, and or teacher to fill out on their own. Answer options are never, sometimes, often, and always. All answers are based off of observations or the students own prior knowledge of his or her behavior. When the test is over, the information is entered into a computer and a 6 page report is printed out.

Scoring for this assessment uses t-scores. The averaging numbers are going in the opposite direction for this assessment. What do I mean by that? 60 is average and the students should fall near 60 or below. A student averaging within 60 to 70 is viewed at risk. Anything above 70

is viewed clinically significant. In other words, the student wants to score low for this assessment.

Another part of this assessment looks at adaptive behavior on a scale. This assessment is looking for signs of depression, anxiety, and other emotional issues. Scoring for this assessment is not unusual. The student wants to score high on this assessment. 30 and below is viewed as clinically significant and 30 to 40 is at-risk. The average is 40 and above on the scale.

What does this assessment tell the psychologist? As seen by the name of the test, this assessment focuses on behavior. The psych goes to the part of the test for the results of the student's behavior. If there are behavioral issues, then a functional behavior plan can be put into action to be formed. These results can also give the teacher an idea to set up a reinforced environment for the student. One thing about this test is that this assessment can look for signs of emotional ability but it can not diagnose them. The student must go to the doctor to be diagnosed for depression or ADHD. If the psych thinks the student might be depressed or have ADHD, then the school does not come right out and tell the parents but they makes suggestions for taking a child to be looked at by the doctor. Schools have to pay when they tell the parents to go to the doctor.

The fourth assessment is an informal one called the Multidisciplinary Team Evaluation Report for Elementary Students (Wabash-Miami Area Program for Exceptional Children. Multidisciplinary Team Evaluation Report for Elementary Students. 2001). It is used in the Wabash-Miami area and was formed by the program for exceptional children in this area as well. This assessment comes in the form of a packet. I have a copy of it attached to my paper. The evaluation is broken down into academic areas and behavioral characteristics. The general education

teacher fills out this form and returns it to the school psych before the child's initial evaluation. This is so the psych can compare information and results. There is also a different form for the special education teacher to fill out but both focus on the same issues.

Because this is a team evaluation more than one person is observing the child but on their own. The team can be made up of the school psych, the gen. ed. teacher, and the sp. ed. teacher. This assessment is given for children in 1<sup>st</sup> to 6<sup>th</sup> grade and kindergartner can be assessed as well but there is a different form. Students in junior high and high school can be evaluated with this assessment as well but they too have a different form. What is different for the upper grades are the behavior and academic sections.

There is no official scoring for this assessment. The observers mark what they see the student doing or not doing and the results are discussed with the evaluation team. This assessment focuses on the student's emotions and behavior. I like how the last page of this assessment has a list of interventions and remediations based on what the teacher just observed. The teacher can mark what he or she feels is needed. This information can also be put in IEPs and goals can be set for the student's success.

The final assessment type is informal and behavioral. It is a structured observation called Behavioral Assessment System for Children (Behavioral Assessment System for Children 2<sup>nd</sup> Edition. Cecil R. Reynolds and Randy W. Kamphaus. AGS Publishing, 2004). This assessment is done in intervals and has a checklist-type style. For this assessment a stop watch is used and it is done while school is in session. The child is observed for 15 minutes and the observer records what he or she sees the student doing every 30 seconds. For example, is the student on task,

moving around a lot, focused on the teacher, and/or looking out the window? What is great about this assessment it can be used at any age for children or adults.

This assessment is mostly done for ADHD cases. A child is referred when troubled behaviors are being noticed by the teacher in the classroom, recess, and/or lunch. The results from the observation can be used to determine interventions for the child. There is not an official number score with this assessment but with the checklists, the observer can see what the student is or is not doing.

What are the behaviors to be observed on the checklist? Areas observed can deal with aggression, inattention, bowel/bladder problems, and etc. On the back of the assessment there is space to add additional behaviors that are not on the checklist, which is very helpful as well.

I have concluded from my research that it is a very tough job being a school psychologist, especially for more than one school corp. There are a lot of rules and regulations, paper work, and other things to consider when a child is referred. The assessments are either nationally published tests or tests that a school corp. has created on its own. These assessments can measure multiple areas, a few areas, or one area in particular. Overall, I have learned that there are many types of assessments created to try figure out what problems a child has and what the school can do to help that child succeed. That is a great accomplishment.