OLIVIA PARBERY

Confidential Psychological Report

24th September 2024

Dr Beverley Thirkell

Educational, Developmental & Counselling Psychologist

BEd (Hons) MA MSc PhD AFBPS AAPi **Reg Psych** PSY0001002986

www.sydneypsych.com.au **e-mail** b.thirkell@optusnet.com.au

Tel 9988 4185 0439 088 802 **ABN** 75067383441 **Provider No** 2608734A

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CONTACT & REFERRAL DETAILS

Name:	Olivia Parbery
Address:	14 Grafton Avenue Naremburn NSW 2065
Date of Birth:	13/05/2015
School:	Cammeray Public School – Year 3
Age at Assessment:	9 years 4 months
Date of Report:	24/09/2024

Reason for Referral:

Olivia was referred by her parents, Leyla and Simon, for assessment of her cognitive ability, academic skills and concentration due to concerns regarding her behaviour, including apparent attention difficulties, and to identify her strengths and weaknesses.

Information for the report was gained by:

- Discussion with Leyla and Simon, Olivia's parents (24/09/2024)
- Assessment session with Olivia (24/09/2024)

Tests Used:

- *Wechsler Intelligence Scale for Children* (V) Australian/NZ Standardised Version (*WISC-V*).
- *Wechsler Individual Achievement Test-III* (*WIAT-III*).
- *York Assessment of Reading for Comprehension (YARC).*
- *Conners 4* – Parent Form & Teacher Form
- *Spence Children's Anxiety Scale.*

Background Information:

Olivia was born via normal delivery and reached developmental milestones within usual limits. She is reported to have normal hearing and vision but now wears glasses when reading. Olivia attended family day care before joining kindergarten at Cammeray Public School, where she experienced separation anxiety. However, Olivia is now more settled and has a good group of friends, although she does not seem to enjoy attending school.

Leyla comments that Olivia has always had significant difficulties with sleeping alone and continues to struggle to settle and often wakes up during the night. She also has difficulties in regulating her emotions and she can be very volatile and defiant. Olivia also has problems responding to instructions and she frequently loses concentration; Simon notes that he was diagnosed with ADHD as a child. Olivia's behaviour frequently causes disharmony at home, and she often battles with family members.

Ms Katherine Fechter, Class Teacher, notes that although Olivia presents a sunny disposition, she often speaks before she thinks, and sometimes finds it difficult to empathise with friends' emotions. She struggles to focus on tasks and is easily distracted. Ms Fechter comments that Olivia is capable of more than she produces. Her latest school report notes that she is *achieving* across the curriculum but is *working towards* some aspects of mathematics. Her Year 3 NAPLAN results placed her within the national average limits for numeracy, but her results were below average for reading and written expression.

Olivia is sociable and active and she takes part in various dancing and singing clubs. She can be very entrepreneurial and has set up food stalls at the front of her house; she also enjoys talking to older people and always shows interest in their lives.

Olivia's Approach to the Test Setting:

Olivia presented as friendly and polite, and completed all tasks set. However, although she worked hard, Olivia lost concentration many times, particularly when listening to verbal instructions, and frequently asked for information to be repeated and explained further.

COGNITIVE ASSESSMENT (WISC-V)

About the *WISC-V*

Olivia's cognitive ability was assessed using the *Wechsler Intelligence Scale for Children –Fifth Edition (Australian/NZ Standardised Edition).* The *WISC–V* is used to assess the general thinking and reasoning skills of children aged 6 years to 16:11 years. The assessment provides a composite score that represents Olivia's overall intellectual ability (FSIQ) as well as

five other scores that measured her Verbal Comprehension, Visual Spatial, Fluid Reasoning, Working Memory and Processing Speed skills.

Intelligence tests, like the *WISC-V*, are good predictors of future learning and academic success but it is possible for intellectual abilities to change over the course of childhood. Furthermore, scores can be influenced by interest, attention, illness, anxiety and opportunities for learning, and all scores might be slightly higher or lower if Olivia were tested again on a different day. Also, the test does not measure other important skills that affect academic outcomes, for example, creativity, imagination, motivation, and organization.

How Scores are Reported:

The scores show how well Olivia has scored compared to a group of children the same age. Most children achieve scores between 90 and 109, with half of all children scoring less than 100, and half of all children scoring more than 100. The actual scores are only an estimate, and it is more accurate to report scores within a range **(confidence intervals).** It is 95% likely that Olivia's score is within the given range. A **percentile rank** is also given. This indicates how Olivia did on a particular measure when compared to others of her age. Percentile ranks range from 1 to 99, with most children scoring close to 50. If the percentile rank were 45, it would mean that she scored higher than approximately 45% of children her age. **Table 1** (below) shows Olivia's results.

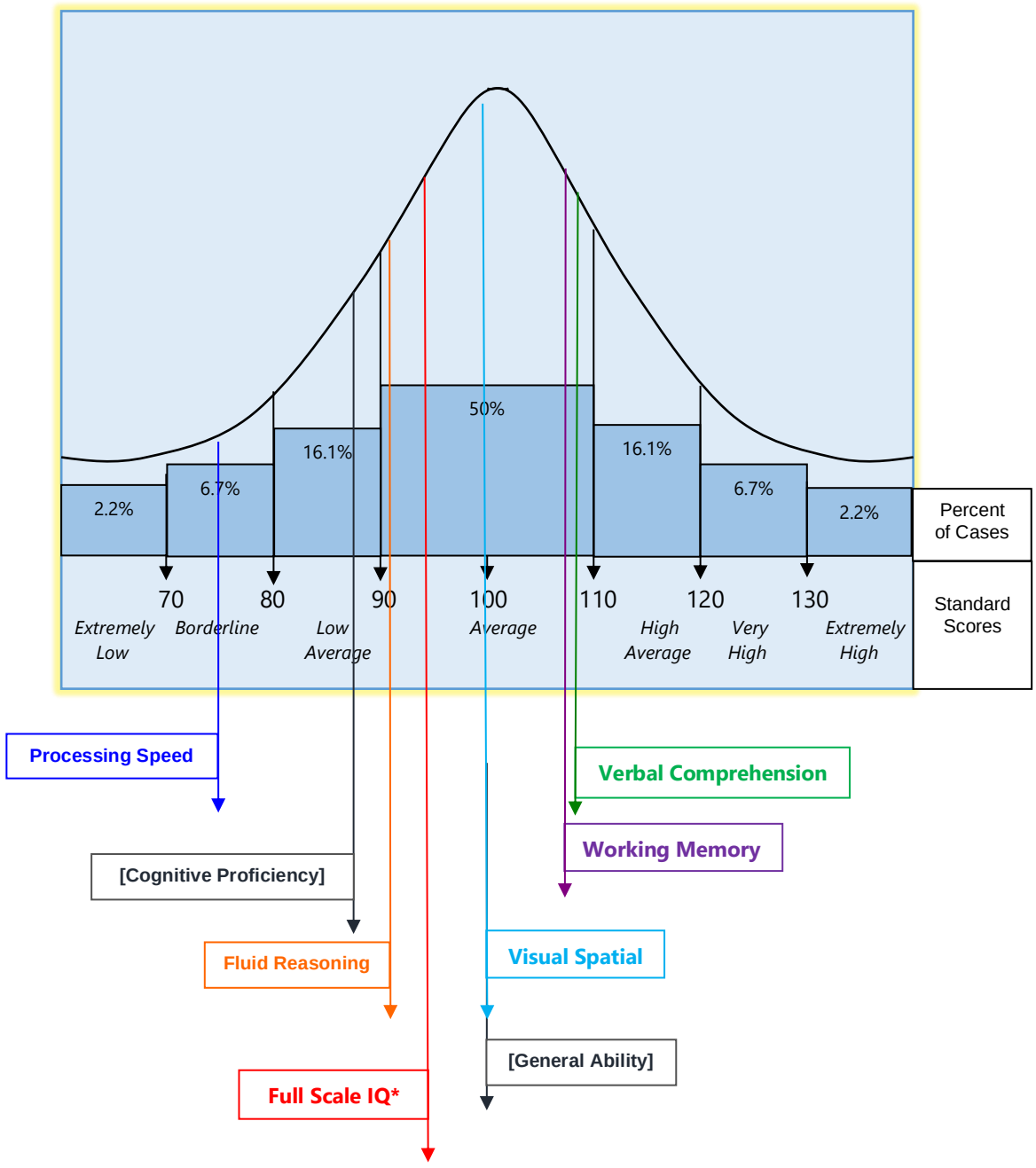
Table 1: Range of Scores for Verbal Comprehension, Visual Spatial, Fluid Reasoning, Working Memory, Processing Speed, Full Scale IQ (WISCV)

Scale	IQ/Composite Score Range at 95% Accurate	Percentile Rank	Descriptive Range
Verbal Comprehension	100 - 115	70	Average
Visual Spatial	92 - 108	50	Average
Fluid Reasoning	84 - 99	27	Average
[General Ability	94 - 106	50	Average]
Working Memory	100 - 113	68	Average
Processing Speed	69 - 88	5	Very Low
[Cognitive Proficiency	81 - 95	19	Low Average]
Full Scale*	**89 - 100***	**34***	**Average***

*The Full IQ score is not a meaningful representation of Olivia's overall ability since there were significant differences between her scores.

The following figure shows Olivia's scores as they relate to others of her age (Olivia's scores shown in colour).

Figure 1: Percentage of Cases and Standard Scores.



Discussion of WISC–V Results:

Olivia's **Full Scale IQ** score was within the ***Average*** range and above those of approximately 34% of children her age. The Full Scale IQ score is a way of viewing overall thinking and reasoning skills and is derived from the combination of the Verbal Comprehension, Visual Spatial, Fluid Reasoning, Working Memory, and Processing Speed scores. However, the Full IQ score is not a meaningful representation of Olivia's overall ability since there were significant differences between her scores. It is more help to discuss individual scores separately.

Olivia's verbal reasoning abilities, as measured by the **Verbal Comprehension** tasks, are in the ***Average*** range and above those of approximately 70% of children her age. The Verbal Comprehension tasks measured Olivia's ability to use word knowledge and evaluated her skills in understanding verbal information, thinking and reasoning with words, and expressing thoughts as words.

Olivia's nonverbal reasoning abilities, as measured by the **Visual Spatial** tasks, are within the ***Average*** range and above those of approximately 50% of children her age. The Visual Spatial score indicates how well Olivia did on tasks that involved evaluating visual details, understanding spatial relationships, constructing designs and puzzles, and solving problems without using words.

Olivia's **Fluid Reasoning** skills are within the ***Average*** range and above those of approximately 27% of children her age. The Fluid Reasoning tasks measured Olivia's ability to use reasoning to apply rules using visual stimuli, including abstract and quantitative reasoning.

Olivia's **Working Memory** result was in the ***Average*** range and above those of approximately 68% of children her age. The working memory score indicates how well Olivia did on tasks requiring her to retain auditory and visual information in memory, while using the learned information to complete a task. These tasks measured her skills in attention, concentration, and mental control. It is important to note that although Olivia's score was within *Average* limits, she lost focus numerous times and her correct responses were inconsistent, particularly when completing the auditory working memory items.

Olivia's **Processing Speed** score was in the ***Very Low*** range and above those of approximately 5% of children her age. The tasks required Olivia to quickly and correctly scan visual information and measured her speed of visual mental problem-solving and attention. This result indicates an area of significant weakness and further indicates that Oliva would need extra time to think things through and to complete tasks.

Olivia's **General Ability** (GAI) score was within ***Average*** limits and above those of approximately 50% of children her age. The *General Ability* score is based upon the Verbal

Comprehension, Visual Spatial and Fluid Reasoning subtests, and provides an estimate of general intelligence that is less reliant upon working memory and processing speed. However, Olivia's overall score on tests of **Cognitive Proficiency** (CPI) was markedly lower, within ***Low Average*** limits, and above those of approximately 19% of children her age, indicating an area of comparative weakness. Working memory and processing speed are cognitive proficiency skills that enable information to be efficiently processed in the service of learning, problem solving and reasoning.

Traditional IQ scores generally have not been found useful in discriminating children with ADHD from a nonclinical population; however, children with ADHD demonstrate weaknesses that are reflected in lower CPI scores in relation to GAI scores.

BASIC SKILLS/ACADEMIC ASSESSMENT

The *Wechsler Individual Achievement Test* (3rd Edition), the *York Assessment of Reading for Comprehension* (*YARC*- Australian Edition, Form A) and the *Wide Range Assessment of Memory & Learning (2nd Edition)* were used to assess Olivia's academic skills. Again, percentile ranks are given as a way of measuring how a child performs in relation to others the same age (50 being the average). Table 2 (Page 9) shows Olivia's results.

Discussion of Results

Olivia's reading accuracy and reading speed was below average, although she correctly answered most of the follow up comprehension questions. She also lost concentration and lost her place a few times. Olivia made every effort to 'sound out' words but when faced with more complex words, she generally skipped them.

Olivia's spelling and sentence building skills were about two years behind, but when writing the essay composition she demonstrated good ideas, despite her poor text organisation. Olivia would benefit from using clear scaffolds and structures to plan all her written work e.g., *Mind Maps*. Furthermore, she may need extra time to think things through and to complete tasks.

Olivia's struggled to maintain concentration when completing the *Listening Comprehension* tasks and her correct answers were inconsistent. In the classroom setting, Olivia is likely to lose focus when listening, particularly if the topic is not of interest to her. Regular checks should be made to ensue that Oliva knows what to do.

Olivia's score on tests of oral expression was well within *Average* limits, and her written mathematical skills were also age appropriate. However, she struggled to maintain focus when listening to the (oral) maths problems solving questions, with her result on this test being in *Low Average* limits.

Table 2: Percentile Ranks, Descriptive Range and Age Equivalence on Tests of Reading, Written Expression, Receptive Vocabulary, Oral Expression, & Maths.

Test	Subtest	Task	Percentile Rank	Descriptive Range	Age Equivalent*
Reading (YARC)	**Accuracy**	To read aloud short passages	16	Low Average	7:10 years
	Reading Comprehension	To read short passages, answer questions and make inferences.	25	Average	8:03 years
	Reading Rate	Pace of reading	18	Low Average	7:10 years
Written Expression (WIAT-III)	**Spelling**	To spell target words	23	Low Average	7:08 years
	Sentence Building	To write sentences using target words; including punctuation, accurate spelling & grammar.	18	Low Average	7:00 years
	Essay Composition	To write a short essay using text organisation & theme development.	45	Average	8:10 years
Listening Comprehension	**Receptive Vocabulary**	To point to a picture of an object or action when given a word.	16	Low Average	7:04 years
	Oral Discourse Comprehension	To listen to short excerpts & answer questions.			
Oral Expression	**Expressive Vocabulary**	To say word when given a definition & picture clue.			
	Oral Word Fluency	To list animals and colours under time constraints	50	Average	9:06 years
	Sentence Repetition	To listen to & repeat phrases.			
Mathematics (WIAT-II)	**Numerical Operations**	To solve written math's problems.	30	Average	8:08 years
	Maths Problem Solving	To solve a word or stated problem using visual clues.	18	Low Average	8:00 years

***** Chronological Age = 9:04 years: Age equivalents are not as accurate as percentile ranks (not consistent across tests) and should be used as a general guide only.

BEHAVIOUR OBSERVATIONS

The *Connors 4* is a set of rating scales that are used to gather information about the behaviours of children and to check for the likelihood of ADHD. The scores are compared with what is typically reported by parents and teachers of 9-year-old girls. Leyla and Ms. Katherine Fechter, Year 3 Class Teacher, completed online forms. Table 3, below, presents the results, which are classified in the following way:

Very Elevated:	(T Score 70+) Many more concerns than are typically reported indicating behaviours that are significantly different to other children of the same age.
Elevated:	(T Score 65 – 69) More concerns than are typically reported.
Slightly Elevated:	(T Score 60 – 64) Slightly more concerns than are typically reported.
Average:	(T Score 40 – 59 Typical levels of concern.
Low:	(T Score <40) Fewer concerns than are typically reported.

A T-Score calculates how much a result varies from the average (50 being average).

Table 3: Parent & Teachers' Observations of Olivia's Behaviour

Categories:	Description:	Parent Rating:	T Score:	Teacher Rating:	T Scores:
Inattention/Executive Dysfunction	Trouble paying attention/sustaining attention; difficulties with planning, organisation, time management.	Elevated	69	Very Elevated	70
Hyperactivity	Restlessness, difficulty staying seated, needing to move too much, talking too much.	Elevated	66	Average	59
Impulsivity	Interrupts others, blurts out answers, acts before thinking, trouble waiting for a turn.	Average	50	Slightly Elevated	64
Emotional Dysregulation	Overreacts, loses temper, has trouble calming down, has trouble controlling emotions	Very Elevated	81	Average	44
Depressed Mood	Feels sad, lacks enjoyment, feels hopeless about the future.	Slightly Elevated	60	Elevated	66
Anxious Thoughts	Difficulties with regulating fears or worries, appears tense or nervous, worries too much about different things.	Slightly Elevated	64	Average	48
Schoolwork	Is late to complete work, loses homework, does not check work for mistakes.	Very Elevated	71	Elevated	66
Peer Interactions	Annoys others, not invited to go out, others not wanting to be friends with them.	Average	45	Average	51
Family Life	Creates stress and chaos among family members, causes disruptions.	Very Elevated	88	-	-
ADHD Inattentive Symptoms:	**Symptom Count required: ≥6/9 (DSM-V)**	**Elevated (6/9)**	**69**	**Very Elevated (8/9)**	**72**
ADHD Hyperactive/Impulsive Symptoms:	**Symptom Count required: ≥6/9 (DSM-V)**	**Average (4/9)**	**58**	**Average (5/9)**	**59**
ADHD Connors4 Index	**Probability of ADHD**	**Very High**	**99%**	**Very High**	**93%**

Discussion of *Conners 3* Results:

Leyla's questionnaire responses indicated that Olivia displays more difficulty with attention and executive dysfunction than typically reported e.g., she avoids effortful tasks, has trouble listening, has trouble finishing things. Olivia also engages in more hyperactive behaviour than is typically reported e.g., she leaves her seat, gets overly excited and has trouble sitting still. Olivia is not usually impulsive at home, but she struggles to regulate her emotions, she loses her temper and has trouble calming down. She can also appear to be sad and very tired at times and has considerable difficulty controlling her worries, particularly at bedtime when she does not like to be alone. Leyla notes more concerns than are usually reported about Olivia's problems with defiance and anger e.g., she refuses to follow rules and annoys people on purpose. These difficulties seriously affect Olivia's schoolwork, she has trouble completing work and does not check for mistakes. Olivia's interactions with her family often cause stress, since she disrupts family activities and tends to argue.

Based on Leyla's ratings, the symptom count meets criteria for ADHD (Inattentive Type), with the total ADHD symptoms being within *Very High* limits.

Ms Katherine Fechter, Year 3 Class Teacher, notes many more concerns than are generally reported regarding Olivia's inattention and executive dysfunction e.g., she is often forgetful, has trouble getting started and often avoids effortful tasks. Olivia does not engage in more hyperactive behaviour than her peers, but she exhibits slightly more impulsivity than is usual for a 9-year-old girl e.g., she blurts out what comes to mind and acts before thinking. In contrast to her behaviour at home, Oliva does not have problems with emotion regulation when she is at school, and Ms Fechter comments that she does not get angry or upset easily. However, she does seem to be tired and can seem sad at times, although there are no signs of anxiety or oppositional or defiant behaviour. Olivia's attention problems seriously affect her schoolwork, and she often has trouble completing her work, does not check for mistakes and is late to complete tasks

Based on the Katherine Fechter's ratings, the symptom count meets criteria for ADHD (Inattentive Type), with the total ADHD symptoms being within *Very High* limits.

During the assessment session, Olivia worked hard but often lost focus, particularly when listening to instructions or when completing listening comprehension items.

These results should be discussed further with a paediatrician.

MEASURES OF MENTAL HEALTH & WELLBEING

Olivia has previously shown significant signs of separation anxiety and the *Spence Children's Anxiety Scale (Self-Report)* was completed by Olivia.

Olivia's overall responses were within the *Elevated* (clinically significant) range, and she indicated that she experiences many feelings of anxiety. Examples include:

Olivia **ALWAYS:**

- Worries that she will get a scared feeling when there is nothing to be afraid of.
- Gets bothered by thoughts or pictures in her mind.
- Is scared of the dark.
- Is scared when she has to take a test.
- Worries about being away from her parents.
- Worries that something awful may happen to someone in her family.
- Has to keep checking that things are done right e.g. checking that doors or windows are locked.
- Feels scared if she has to sleep on her own.
- Worries that something bad may happen to her.

SUMMARY & CONCLUSION

Olivia's **Full IQ** score (*WISC-V*) was found to be within the ***Average*** range (94th percentile). However, since there were significant differences between her scores, the Full IQ is not a meaningful representation of her overall ability. Olivia's **verbal comprehension, visual spatial, fluid reasoning** and **working memory** results were within *Average* limits, although she struggled to maintain focus when completing auditory working memory tasks. Her **processing speed** skills were within *Very Low* limits (5th percentile) and an area of significant weakness, which indicates that she would need extra time to complete tasks.

Olivia's *General Ability* (GAI) score was within ***Average*** limits and above those of approximately 50% of children her age, while her scores on tests of **working memory** and **processing speed** skills (**cognitive proficiency**) were markedly lower, within the *Low Average* range, and above those of approximately 19% of children her age, indicating an area of comparative weakness.

Olivia's **reading accuracy** (7:10 years) and **reading rate** (7:10 years) was behind her chronological age (9:04 years), although her **reading comprehension** (8:03 years) was within *Average* limits when compared to her peers. Olivia's **spelling** (7:08 years) and **sentence building** (7:00 years) results were lower than her **essay composition** score (8:10 years). Her **oral expression** skills (9:06 years) were significantly stronger than her **listening comprehension** skills (7:04 years), while her written **numerical operations** result (8:08 years) was more advanced than her **maths problem solving** score (8:00 years).

The results of the ***Conners 4*** questionnaires completed by Leyla and Ms Katherine Fechter, Class Teacher, indicate that there are many more concerns than are typically reported regarding Olivia's inattention and executive functioning and her difficulties are impacting her schoolwork and homelife. Although Olivia can be defiant and oppositional at home, she is well behaved and generally calm when she is at school. The symptom count (DSM-5) was met for ADHD (Inattentive Type) at home and school, but these results should be discussed further with a paediatrician.

The results of the *Spence Children's Anxiety Scale* (SCAS self-report) were within the *Elevated* range (clinically significant), which indicates that Olivia experiences very high levels of anxiety and she often feels panic particularly when separated from her parents.

RECOMMENDATIONS

- Referral to a paediatrician for further assessment and review of Olivia's attention and concentration (Dr James Thomas, Artarmon, 8068 2420).

- Referral to a psychologist for help with anxiety, particularly separation anxiety and sleeping, with support for Layla and Simon regarding parenting strategies. (Discuss with GP and school counsellor regarding psychologists in the local area).

- Intensive learning program for help with reading accuracy, reading rate, spelling and written expression. If this is not possible within the school context, referral to a speech and language therapist or specialist educator (*PosAbility*, Lane Cove, 9420 4101). NB: If Olivia's literacy skills remain below average following 6 to 12 months of intensive intervention, further assessment to check for specific learning disorder).

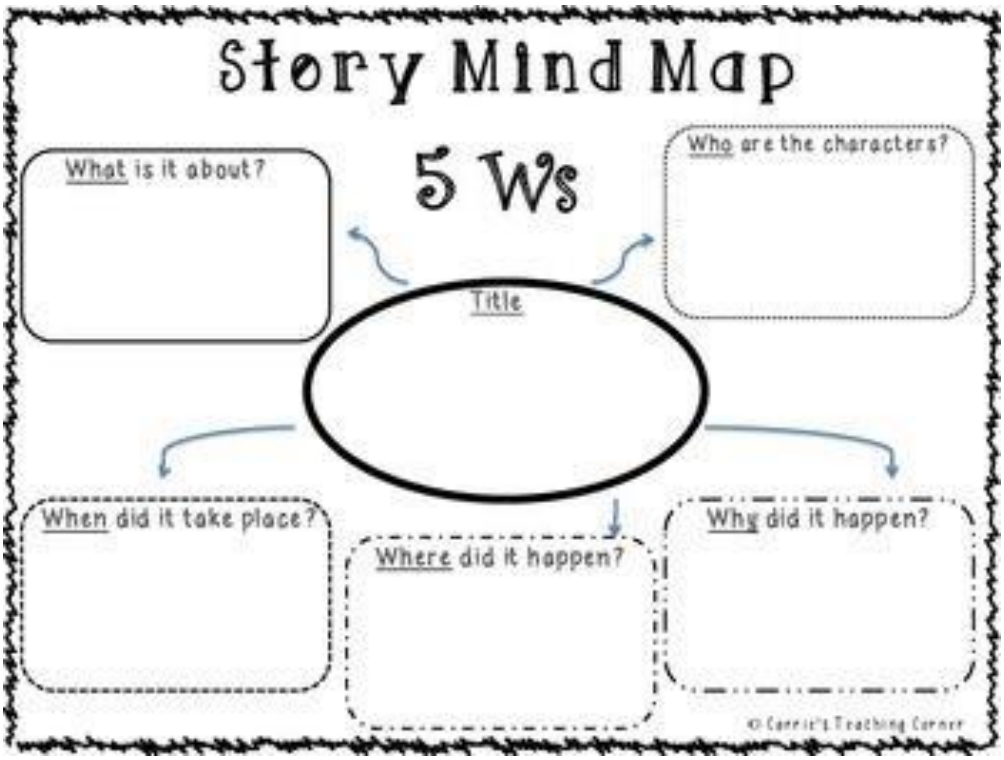
- All complex tasks to be broken down into small, easily achievable steps to ensure that Olivia can maintain focus and achieve success, using one step instructions.
- Awareness that Olivia is at risk of frustration and under achievement due to her attention and concentration difficulties
- When giving Instructions: maintain eye contact; be precise and check that Olivia knows what to do. Keep it simple: one thing at a time.
- Use straight forward, simple language when giving instructions, and repeat whenever necessary.
- Mornings and evenings can be stressful so try to keep to the same mealtimes, bed, and wake times.
- 'Prime' Olivia before a new activity, to ensure she knows what to expect and what is required.
- Ensure Olivia is seated in an area relatively free from distraction e.g., away from doors and windows.
- Olivia may need extra time to think things through and to complete written work.
- Provide a separate calm, distraction-free and quiet space where Olivia can go to work if she is struggling to stay on task.
- Individual or paired work may be more successful than larger group activities.
- Olivia would benefit from using *Mind Maps* and scaffolds to help with planning before she writes (See Appendix 1, adapt as necessary)
- See Appendix 2, Working with Children with Attention Difficulties.

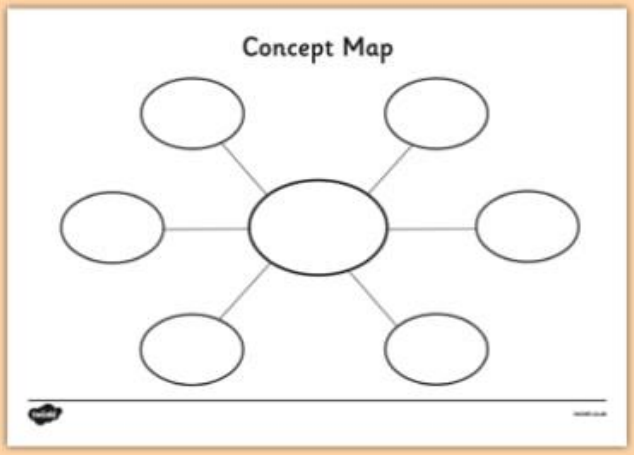
Dr Beverley Thirkell
Educational, Developmental & Counselling Psychologist

MAAPi
Member
Australian
Association of
Psychologists Inc

APPENDIX 1: MIND MAPS

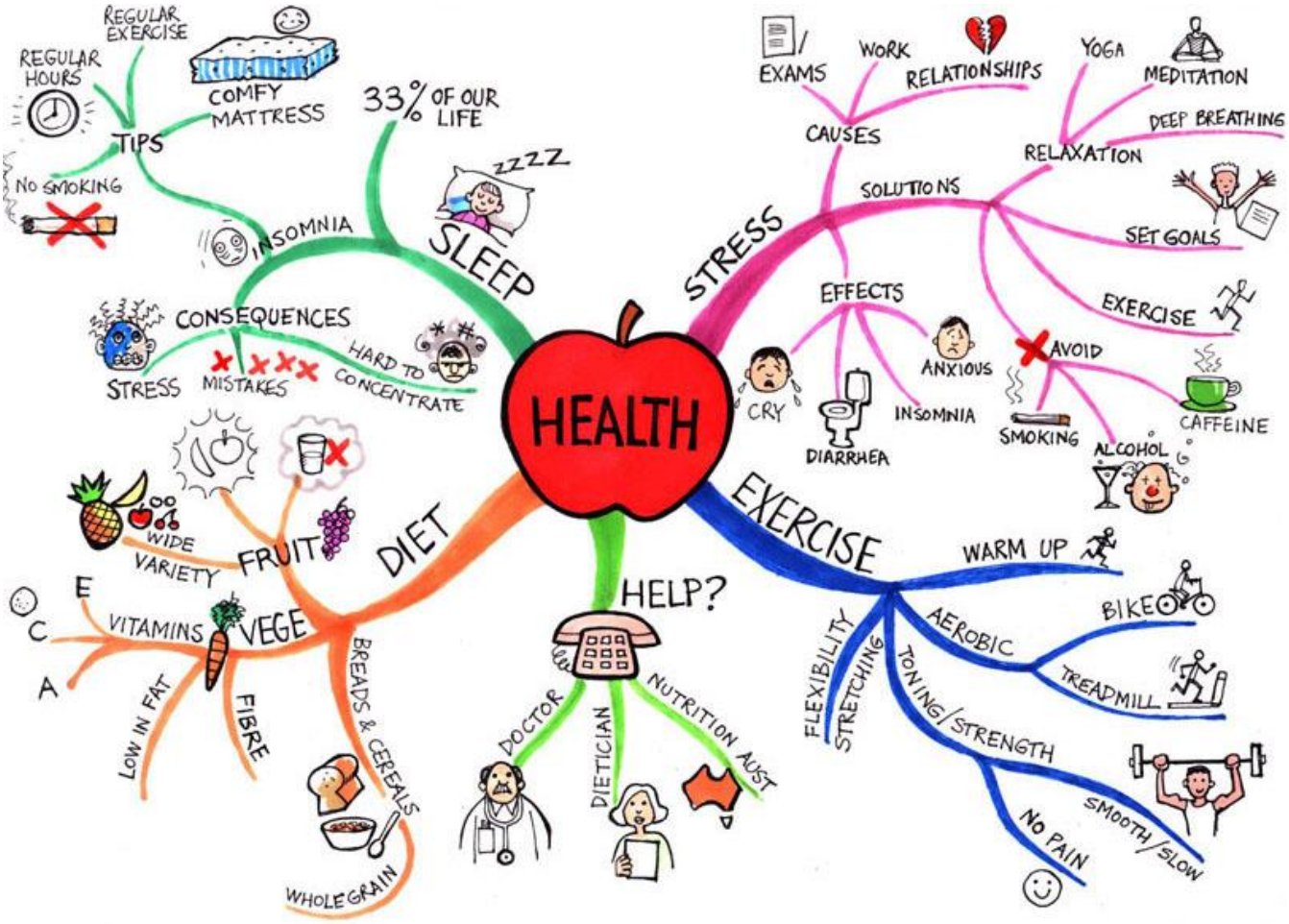
(Adapt as necessary)





YOUR PARAGRAPHS SHOULD INCLUDE *PEEL*:

1. **Make your POINT**
2. Support your point with **EVIDENCE and examples**
3. **EXPLAIN** how the evidence supports your point
4. **LINK** the point to the next point in the following paragraph.



APPENDIX 2: WORKING WITH CHILDREN WITH ATTENTION DIFFICULTIES

To Increase Engagement:

- Identify questions the student can answer & call on them to participate/share.
- Show an interest in and find out student's opinions & ideas.
- Avoid lectures.
- Determine if tasks are too difficult or too easy.

To Increase Organization Skills:

- Provide visual prompts (what materials do I need?).
- Use Mind Maps/checklists to organize thoughts/ideas.
- Divide assignments into easily achievable chunks.
- Provide a schedule of daily events & review expectations.
- Prime the student for a new activity to ensure they know what is required.
- Keep tasks relatively short and varied.
- Ensure student has a clear desk/workspace before beginning a task.
- Teach successive planning: beginning/middle/end.

To Increase Focus on Task:

- Give short, precise instructions in straight forward language; maintain eye contact.
- Use a visual timer & ask, 'How long will you need?'
- Ensure the student is seated in an area relatively free from distraction e.g., away from doors and windows, and in direct line of sight of the teacher.
- Provide a designated quiet place where the student can go if they feel under pressure (to do a favourite task or calm down).
- Give frequent breaks for physical activity e.g., run errands, & allow for extra movement.
- Individual/paired work may be more successful than group activities.
- Schedule demanding tasks in morning sessions.
- Lengthy reading/writing tasks can be difficult for maintaining concentration, use other means e.g., verbal test responses, voice to text technology, audio books.

To Increase Positive Behaviour:

- Focus on the positive; praise/reinforce/acknowledge whenever possible (correct rather than criticize).
- Allow time for the student to refocus & gain control.
- Privately remind the student they are learning coping skills ('don't blurt out').
- Develop a private signal when blurting ('take a break/allow someone else to speak').
- Allow student time to share feedback before lesson & tell them which idea to share in class.
- Prepare planned response for misbehavior.
- Seat student near good role models.
- Use small and immediate rewards for achievements e.g., sticker chart for completion of tasks, with a specified target that brings a small reward using the student's preferences. A 'rewards menu' can be helpful: extra time on the computer, extra art activity time etc. Ensure that the target set is easily achievable. Don't forfeit previous rewards for difficult behaviour.
- Ignore negative behaviour where possible.
- Praise another student who is carrying out an instruction.
- Be specific when redirecting ('please sit back in your seat and finish your writing').
- Stay calm where possible & criticize the behaviour not the student.