



Regional Assessment Resource Centre:

Lunch and Learn Winter Series 2024



Screening for Neurodevelopmental Disorders

Thursday, January 25th | 12pm to 1pm

Transition Supports for Incoming Students

Thursday, February 29th | 12pm to 1pm

Tricky Accommodations Issues

Thursday, March 28th | 12pm to 1pm



Screening for Neurodevelopmental Disorders

Beth Pollock, Ph.D., C.Psych.
Clinical Director, RARC

Winter Lunch and Learn Series
January 25, 2024



Regional Assessment Resource Centre (RARC)

RARC is a Centre of Excellence housing clinical psychologists, educators, transition specialists and researchers.

Services provided under 4 pillars:



Transition



Research



Training



Assessment

HIDC 2024- Hope to see you there!

- 3rd High Incidence Disabilities Conference will be held **May 2 & 3, 2024 in Toronto, Ontario.**
- This year's theme: **Navigating Assessment, Academic Accommodations, and Post-Secondary Supports in a Changing World.**
- <https://www.queensu.ca/rarc/training/workshops-and-conferences> for more information.
- ***Registration opens December 1, 2023***



Scenario #1

- Casey presents to Accessibility Services in the last weeks of August. She has a recent diagnosis (from August 2023) of a Learning Disability in reading and writing and has been receiving accommodations as outlined in an Individual Education Plan (IEP) since early elementary school. She will be starting the Welding program at your institution in a few weeks and would like to discuss accommodations. What do you do?

Scenario #2

- Jackie presents to Accessibility Services in the last weeks of August. She has an early diagnosis (grade three) of a Learning Disability in reading and writing and has been receiving accommodations as outlined in an Individual Education Plan (IEP) since early elementary school. She will be starting the Early Childhood Education program at your institution in a few weeks and would like to discuss accommodations. What do you do?

Scenario #3

- Nelda presents to Accessibility Services in the last weeks of August. She has never been formally assessed but has been receiving accommodations as outlined in an Individual Education Plan (IEP) since early elementary school. She will be starting the Sociology program at your institution in a few weeks and would like to discuss accommodations. What do you do?

Scenario #4

- Trina presents to Accessibility Services in the last weeks of August. She has never been formally assessed, nor has she ever received academic accommodations. Trina reports a history of academic challenges, noting that she has always had to work harder than her peers to succeed. She will be starting the Social Services Worker program at your institution in a few weeks and would like to discuss accommodations. What do you do?

Scenario #5

- Tali presents to Accessibility Services in the last weeks of August. She has never been formally assessed, nor has she ever received academic accommodations. Trina reports a history of academic challenges but states that, in her home country, these assessments/ accommodations were not readily available. She will be starting the Social Services Worker program at your institution in a few weeks and would like to discuss accommodations. What do you do?

Screening Evaluation for Neurodevelopmental Disorders (SEND)

- Screening Questionnaire:
 - Screening Evaluation for Neurodevelopmental Disorders (SEND)
 - Starts with a determination of impairment
 - No impairment- may still benefit from assessment but not a RARC/BSWD referral
 - Explores the possible role(s) of neurodevelopmental conditions
 - Helps identify additional underlying or comorbid conditions that may be affecting success

SEND- Part 1

Please complete the following questions as honestly as possible. You may need to consult with family members to accurately respond to some items.

1. I received poor or failing marks in elementary school (e.g., C's, D's, or R's). If yes, please provide report cards. For mature or international students, alternate evidence could include evidence of failed grades, placement in a special education class, and/or reports from family members of historical academic challenges.

Yes No

2. I received poor or failing marks (e.g., 60s or below) in secondary school. If yes, please provide report cards. For mature or international students, a secondary school transcript may suffice.

Yes No

3. I had an Individual Education Plan (IEP) in elementary and/or secondary school. If yes, please provide at least one IEP from elementary and/or secondary school. For mature or international students, evidence of previous special education services would be sufficient.

Yes No

4. I am struggling to meet curriculum expectations in post-secondary (e.g., attaining poor or failing grades, needing to drop classes due to academic difficulty). If yes, please provide a copy of your post-secondary school transcript (can be unofficial).

Yes No

5. I am currently registered with Accessibility/Disability Services and have access to formal accommodations in my post-secondary program.

Yes No

If yes, please indicate the disability currently being accommodated:

Rationale: Explores historical and current impairment, which provides a basis to evaluate for a possible neurodevelopmental condition.

6. My academic challenges are only evident (circle all that apply):

- a. When I am learning in a second language.
- b. When I am using alcohol and/or drugs.
- c. When I am physically ill (e.g., fibromyalgia, headaches/migraines).
- d. When I consistently get less than 7 hours of sleep a night
- e. When I am mentally unwell (e.g., depression, anxiety)
- f. When perfectionism is interfering with my productivity
- g. When I spend more than 2 hours a day on electronic devices instead of doing schoolwork.

If the student responds positively to 1, 2, or 3 and 4 or 5 and says no to all subitems in number 6, move to Part 2. Otherwise, skip to Part 3.

SEND- Part 2

Rationale: If historical and current academic impairment is noted, exploration for the likely type of neurodevelopmental condition may be helpful.

7. My academic impairment is related to academic skill weaknesses (please circle all that apply):

- a. Challenges decoding words and/or reading slowly and with effort.
- b. Difficulty understanding the meaning of what is read.
- c. Difficulty with spelling.
- d. Difficulty expressing/organizing ideas in writing.
- e. Difficulty with number sense/number facts/or calculations.
- f. Difficulty understanding/applying concepts learned in math.

If the student endorses one or more areas of academic difficulty and these challenges logically relate to historical and current areas of impairment, student should be referred to a psychological services provider for an assessment.

8A. My academic impairment is related to challenges with attention, hyperactivity, and/or impulsivity (please circle all that apply):

- a.** I fail to give close attention to details or make careless mistakes in schoolwork, at work, or during other activities (e.g., accidentally skip items on tests; commit errors on the job, etc.).
- b.** I have difficulty sustaining attention during lectures, during conversations, and while completing independent schoolwork.
- c.** I miss what people say to me because my mind is elsewhere.
- d.** I find it difficult to follow instructions and complete schoolwork, chores, or duties in the workplace (e.g., start tasks but quickly loses focus and am easily sidetracked).
- e.** I have difficulty organizing tasks and activities (e.g., difficulty keeping materials and belongings in order; poor time management skills, etc.).
- f.** I avoid, dislike, or am reluctant to engage in tasks that require sustained mental effort (e.g., completing readings; solving puzzles; preparing papers or reports, etc.).
- g.** I lose things necessary for tasks or activities (e.g., school materials, pencils, wallet, phone, glasses, etc.).
- h.** I am distracted by extraneous stimuli or unrelated thoughts.
- i.** I am forgetful in daily activities (e.g., keeping appointments; meeting up with friends; paying bills, etc.).

8B. My academic impairment is related to challenges with attention, hyperactivity, and/or impulsivity (please circle all that apply):

- j.** I fidget and feel restless (e.g., tap my pen; shake my leg; squirm in my seat).
- k.** I leave my seat in situations when remaining seated is expected (e.g., cannot remain seated in the classroom or in the workplace).
- l.** I am “on the go,” acting as if “driven by a motor” (e.g., uncomfortable sitting still during a meal or meeting).
- m.** I talk excessively.
- n.** I blurt out the answer before a question has been completed (e.g., complete other people’s sentences; cannot wait my turn in conversations).
- o.** I have difficulty waiting for my turn in games or activities (e.g., while waiting in line).
- p.** I interrupt or intrude on others (e.g., butt into conversations, games, or activities; may take over what others were doing; may start using another person’s things without asking).

9A. My academic impairment is related to social/communication challenges and restricted/repetitive patterns of behaviour, interests, or activities (please specify):

- a.** Deficits in social-emotional reciprocity (e.g., establishing or maintaining a conversation and/or failure to initiate or respond to social interactions with peers or Professors that impair functioning).
- b.** Deficits in nonverbal communicative behaviours (e.g., abnormalities in eye contact, body language, and/or gesture that impair functioning).
- c.** Deficits in developing, maintaining, and understanding relationships (e.g., difficulties adjusting behaviour to suite various social contexts to a degree that impairs day-to-day functioning).

9B. My academic impairment is related to social/communication challenges and restricted/repetitive patterns of behaviour, interests, or activities (please specify):

- d.** Stereotyped or repetitive motor movements, use of objects, or speech (e.g., odd hand mannerisms, echolalia).
- e.** Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behaviour (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, need to take the same route or eat same foods every day).
- f.** Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
- g.** Hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of the environment (e.g., indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

- ***In 8, if the student endorses at least 6 items from a to i and/or at least 6 items from j to p and these challenges logically relate to historical and current areas of impairment, student should be referred to a psychological services or medical provider for an assessment.***
- ***In 9, if the student endorses symptoms a through d and at least two symptoms from d to g and these challenges logically relate to historical and current areas of impairment, student should be referred to a psychological services provider for an assessment.***

SEND- Part 3

Rationale: Regardless of whether the student is currently impaired or is reporting feeling that they are underachieving (without evidence of impairment), exploration of other issues that can “mimic” symptoms of a neurodevelopmental disorder is recommended to link students to appropriate interventions and supports (which can be implemented while waiting for formal assessment- if appropriate).

- **To ensure that they have adequate study skills/work habits:**
- *Administer Study Skills and Habits Questionnaire (SSHQ)- if impairment noted, refer to Academic Coach/Learning Strategist/Student Academic Success Services.*
- **To investigate for the possible contribution of psychological symptoms:**
- *Administer APA Cross Cutting Measure
(<https://www.psychiatry.org/getmedia/e0b4b299-95b3-407b-b8c2-caa871ca218d/APA-DSM5TR-Level1MeasureAdult.pdf>)- if challenges identified, refer to Counselling Services.*

- **To investigate for the possible contribution of physical health challenges (poor sleep, erratic eating habits, alcohol/drug use, low iron, thyroid issues, etc.):**
- *Ask student if they are concerned about their sleep, eating habits, or general health. If yes, refer to physician.*
- **To investigate for the possible contribution of social media/technology/video game addiction:**
- *Administer measure of internet addiction (<https://psychology-tools.com/test/internet-addiction-assessment>). If challenges are identified, refer the student to counselling services and an Academic Coach/Learning Strategist.*

What Do I Do in the Meantime?

General guidelines for reasonable INTERIM accommodations

1. If you suspect ADHD. There is no research support for providing extra test-taking time (see Jansen et al., 2018; Miller et al., 2015; Pritchard et al., 2016).

- Referral to learning strategies/academic skills help
- Peer mentors
- Stop the clock breaks (up to 15 min/hour for them to get up, stretch, and refocus)
- Quiet room for tests (but this may make things worse for some students- some may find it of benefit, others not and we are not yet able to predict who will benefit)
- Depending on findings from the screeners, refer out as appropriate for other co-morbid problems, plus refer for diagnostic assessment.

2. If suspect Reading Disability. What are reasonable temporary accommodations?

- Start conservatively (15 min/hour only for tests with a large reading component)
- Depending on other results from above, refer out as appropriate for other problems, plus refer for diagnostic assessment
- Refer for training in use of Read and Write Gold.

3. If suspect Math Disability. What are reasonable temporary accommodations?

- Start conservatively (15 min/hour only for math-based tests)
- Refer to peer tutoring/academic skills centre
- Plus refer for diagnostic assessment

4. If suspect Writing Disability. What are reasonable temporary accommodations?

- Extra time only for tests/activities that require essay writing (not for things like multiple choice)
- Refer for training in use of Read and Write Gold
- Offer use of technology in tests (but this may cause more problems if student is not familiar with using this technology).

5. If suspect Mental Health difficulty. What are reasonable temporary accommodations?

· There is NO research support for provision of extra test-taking time (see Harrison et al., 2021)

Offered accommodations could include:

- quiet room for writing tests
- stop the clock breaks (up to 15 min/hour for them to get up, stretch, and refocus)
- referral to counselling
- possibly to physician for medication consultation
- ability to rewrite test if student has panic attack during test (and if stop-the-clock break does not help them reduce the panic at the time).
- General rule around accommodations, temporary or otherwise.

Questions?





Regional Assessment Resource Centre:

Lunch and Learn Winter Series 2024



Screening for Neurodevelopmental Disorders

Thursday, January 25th | 12pm to 1pm

Transition Supports for Incoming Students

Thursday, February 29th | 12pm to 1pm

Tricky Accommodations Issues

Thursday, March 28th | 12pm to 1pm



HIDC 2024- Hope to see you there!

- 3rd High Incidence Disabilities Conference will be held **May 2 & 3, 2024 in Toronto, Ontario.**
- This year's theme: **Navigating Assessment, Academic Accommodations, and Post-Secondary Supports in a Changing World.**
- <https://www.queensu.ca/rarc/training/workshops-and-conferences> for more information.
- ***Registration opens December 1, 2023***



Thank You!

Regional Assessment and Resource Center (RARC): www.queensu.ca/rarc

Queen's University, Kingston, Ontario Canada

Beth Pollock, Clinical Director (RARC) : beth.pollock@queensu.ca

Connect with RARC:



rarc@queensu.ca



www.queensu.ca/rarc



613-533-6311



Mackintosh-Corry Hall,
B100
68 University Avenue
Kingston, Ontario, Canada
K7L 3N6

