

11.6. Ability to undertake structured cognitive, functional and developmental assessments

- An ability to draw on knowledge of a range of neurodevelopmental disorders and how they present across the developmental range, including features in the domains of:

- cognition
- behaviour, and the behavioural 'phenotypes' associated with neurodevelopmental presentations
- emotion
- social functioning

- An ability to draw on knowledge of current literature relevant to cognitive testing and underlying cognitive models, and its relevance for test design and interpretation

Pre-assessment

- An ability to gather data from all relevant sources (including parents/carers, services and professionals involved in the child/young person's care), to:

- contribute information to the overall assessment
- guide the selection of assessment procedures that are likely to be appropriate and relevant
- identify any factors that may impact on the administration of testing (such as physical or sensory impairments)

- An ability to identify any inconsistencies across respondents, and consider their likely relevance in relation to the assessment process

- An ability to locate and interpret previously conducted structured and/or medical assessments to inform the current assessment process, specifically to:

- inform the selection of testing procedures used in the current assessment
- provide a baseline measure/measure of comparison
- compile a developmental profile

Ability to select tests relevant to the referral issues

- An ability to generate hypotheses that might account for the impairment (or presentation) based on information gleaned pre-assessment, and:

- to draw on knowledge of psychometric theory to select an appropriate testing strategy
- an ability to adjust the hypothesis, where necessary, based on the outcome of the hypothesis-testing strategy

- An ability to draw on knowledge of assessment procedures to select those relevant to the assessment question

11.1
11.2
11.3
11.4
11.5
11.6
11.7



11.1
11.2
11.3
11.4
11.5
11.6
11.7

■	An ability to draw on knowledge of the populations on which tests have been standardised, and any implications this will have for children/young people in relation to their:
	■ age
	■ gender
	■ socioeconomic status
	■ country of origin
	■ ethnicity
	■ level of functioning

Test administration

■	The ability for the tester to administer only those assessment procedures for which they are appropriately qualified
■	An ability to recognise that all aspects of the initial encounter may provide important data for the assessment (including, e.g., the initial meeting in the waiting room, or the ways in which those present interact with each other)
■	An ability to provide a testing environment that promotes optimal performance from the child/young person (e.g. using age-appropriate language and being friendly rather than distant/clinical, or minimising potential distractions in the room)
■	Where appropriate, an ability to encourage parents to allow the child/young person to come into the testing environment by themselves (to reduce the chances that they will be distracted), and to recognise where this separation impacts on test performance, and:
	■ where parents/carers are included in the testing situation, an ability to explain the importance of allowing the child/young person to complete the testing independently
■	An ability to monitor the child/young person's behaviour and interactions throughout the assessment, including:
	■ their level of motivation/engagement with the assessment process
	■ their activity levels
	■ their level of concentration or distractibility
	■ their social/communication skills
	■ their specific areas of difficulty/competence
	■ their reaction to failure/success
	■ their persistence
	■ any reassurance-seeking
	■ their receptivity to encouragement/reinforcement
■	An ability to document these observations systematically and to identify whether they are consistent with reports from other sources
■	An ability to draw on knowledge of child development to gauge when behaviour is within 'normal' limits (e.g. knowing how the ability to concentrate varies with age)



11.1
11.2
11.3
11.4
11.5
11.6
11.7

■	An ability to draw on knowledge of common reactions to assessment (such as anxiety) and to take into account their impact on the child/young person's functioning
■	An ability to engage the child/young person throughout the testing process, alternating periods of rest, 'fun activity' and testing to maintain motivation and concentration
■	An ability to draw on knowledge of the ways in which the assessment process may impact on functioning in (neuro)developmental disorders (e.g. the structured non-distracting testing environment may improve the functioning of children/young people with autism spectrum disorder)
■	An ability to adhere to standardised testing structure and protocol, as described in the relevant manual:
	■ implementing any variations in 'rules' in line with the procedures specified in the manual (e.g. the criteria for discontinuing a test, or for prompting the child/young person)
	■ applying the criteria for scoring to the responses made by the child/young person so that results remain relevant to norms and standardisation
	■ recording responses accurately
	■ following scoring procedures
■	An ability to establish whether additional non-clinic-based assessment is required (e.g. behavioural observation in the school or home)
■	An ability to draw on knowledge of test-retest reliability to ensure that tests are not re-employed too soon (i.e. potentially invalidating any results)
■	An ability to identify where a child/young person being assessed differs from the samples on which standardisation is based, and to interpret and report their results in relation to this limitation
■	Where it is not possible to follow the standardised testing procedure (e.g. because the child/young person is uncooperative, or has profound/specific difficulties), an ability to adapt testing (and to record the adaptations that have been made), and:
	■ an ability to recognise that while adapting tests has practical value (in terms of identifying the child/young person's strengths and weaknesses), the resulting scores will not be psychometrically sound
■	An ability to select and/or adapt tests to match the needs of children/young people with sensory difficulties or physical limitations

Ability to interpret test results

■	An ability to integrate data from testing with behavioural observations and information from other assessment sources to produce a coherent account of the child/young person's functioning
■	An ability to interpret results in terms of:
	■ the child/young person's level of functioning (across the domains assessed)
	■ their relationship to functioning in the standardised sample for the test



11.1
11.2
11.3
11.4
11.5
11.6
11.7

	<ul style="list-style-type: none"> the pattern or profile of results, across the domains tested the significance of individual test results in the context of their overall functioning
■	An ability to apply the findings to:
	<ul style="list-style-type: none"> describe/explain the child/young person's functioning describe/explain the ways in which their current environment may be impacting on the child/young person/young person's functioning describe how the interaction of the two may result in particular behaviours, strategies or patterns of impairment (e.g. apparent underperformance)

Ability to use the assessment to identify an intervention plan

■	An ability to adopt a strengths-based approach to the development of intervention strategies
■	An ability to use findings from assessment to suggest strategies which:
	<ul style="list-style-type: none"> are aimed at enhancing the child/young person's skill and abilities alter the child/young person's environment, with the aim of enhancing/maximising their functioning
■	An ability to communicate intervention strategies to those delivering them, using language and concepts which are clear and adapted to the context
■	An ability to support individuals who are carrying out interventions based on the assessment outcome, ensuring that they understand and can carry-through the intervention plan

Ability to report on the assessment

■	Ability to report the results of the assessment verbally (to the team) and in writing using clear, concise and appropriate language, including:
	<ul style="list-style-type: none"> the reasons for testing sources of information materials used (including what each test measures) testing procedure (including relevant behavioural information) any adaptations
■	An ability to communicate findings verbally to children/young people and where appropriate parents/carers, including discussion of:
	<ul style="list-style-type: none"> their experience of the testing process the meaning of the findings for the child/young person and for the family/carers any areas that the child/young person and family/carers need clarifying their expectations for the distribution and use of the report



11.1
11.2
11.3
11.4
11.5
11.6
11.7

11.7. Specialist assessments

Specialist assessments are usually delivered by specific professions (rather than by all members of the multi-disciplinary team). Their restricted use reflects the specialist areas of knowledge and skills associated with each profession (though some specialist assessments may be undertaken by other professionals who have had specific training in their use).



- An ability to identify, administer and interpret the results of specialist assessments
- An ability to engage the child/young person with the assessment (e.g. by addressing any concerns/queries, and ensuring that they understand the rationale for the assessment)
- An ability to feedback the meaning and implications of results from specialist assessments to the young person
- An ability to feedback the interpretation and implications of assessments to the inpatient team, both verbally and in writing
 - an ability to convey results and their interpretation verbally and in writing to other relevant parties (e.g. with other services, and to parents/carers)

Examples of profession-specific specialist assessments

Examples from occupational therapy

- Specialist assessments relevant to occupational functioning, e.g.:
 - assessments using the Model of Human Occupation (MoHO) battery
 - Model of Creative Ability (Creative Participation Assessment [CPA] Tool and Activity)
 - Assessment of Motor and Process Skills (AMPS)
 - Sensory Integration and Praxis Test (SIPT)
 - Bruininks-Oseretsky Test of Motor Proficiency 2nd Edition (BOT2)

Examples from speech and language therapy

- Specialist assessments of receptive and expressive speech and language, e.g.:
 - Clinical Evaluation of Language Fundamentals (CELF-5 UK)
 - CELF-5 Metalinguistics
 - Expression, Reception, Recall of Narrative Instrument (ERRNI)
 - Test for Reception of Grammar (TROG-2)



Examples from social work

- Specialist assessments relevant to social functioning and resources, including safeguarding chronology (identifying any safeguarding concerns), genograms and assessment of social circumstances

Examples from clinical psychology

- Psychometric assessments of cognitive and neuropsychological function, emotional assessments, risk assessments, symptom-specific assessments and personality-based assessments
- Focused psychological assessment methods including behavioural observation, functional assessment, developmental assessments, semi structured interviews, use of tools such as a timeline and/or genograms

Examples of medical assessments

- Specialist medical assessments, including:
 - Mental State Examination
 - diagnostic assessments
 - case formulation
 - legal assessments in relation to the Mental Health Act, Mental Capacity Act and Children’s Act
 - assessment of physical health, including the identification of organic conditions
 - assessment of medication/side effects and response to treatment

- 11.1
- 11.2
- 11.3
- 11.4
- 11.5
- 11.6
- 11.7**

