
Practicum in Child Assessment: Part I
EDCP 738
Fall 2017, Thursdays 9 am – 12:15 pm (Seneca 1102M)

Instructor: Jill Jacobson, Ph.D.
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COURSE SYLLABUS

Overview and Goals

This course is the first part of a two-semester practicum sequence in child assessment. You will conduct practicum work in the on-campus PEER clinic as well as in Prince George's County Public Schools. During the fall semester, you will conduct your first case alongside your school supervisor, using this opportunity to learn the assessment process from start to finish and taking on part of the responsibility for testing and report writing. After completing this initial experience early on in the semester, you will conduct three comprehensive evaluations of referred children by the end of the fall semester: one case through the PEER clinic, and two cases within the school setting. For PEER cases, you will be supervised by the course instructor, and for school cases, you will be supervised by both the course instructor and school site supervisor. The expectation is that you will become increasingly autonomous in applying the knowledge and skills to conduct psycho-educational assessments during the semester, and then continue to develop these skills in the spring. All of your test protocols will be checked for accuracy by our teaching assistant (Annie Goldthrite) according to procedures outlined in the PEER Manual. Though double-checking of your protocols by the TA provides a "safety net" as you conduct your first real cases, you will be required to quickly learn precise administration and accurate scoring of standardized tests administered throughout the course.

Course Goals: A major goal of the course is the systematic application of concepts, strategies, and tools to the process of diagnostic assessment. You will engage in the following activities throughout the semester. These activities are all consistent with developing APA's profession wide-competences (ii, iii, iv, v, vi) and NASP competencies (2.1, 2.4, 2.8).

1. Identify and clarify the referral questions, conduct a record review, and plan an evaluation;
2. Interview children, parents, teachers, and/or others involved in the care or education of the child;
3. Observe children in the classroom and during the evaluation process;
4. Administer an appropriate battery of psychoeducational tests (e.g., cognitive, achievement, developmental, social-emotional-behavioral measures);
5. Learn new measures and procedures that are pertinent to cases;
6. Score, interpret, and write up test results;
7. Integrate and synthesize material from a variety of tests and other sources in relation to the referral issues and formulate recommendations for interventions;
8. Effectively communicate interpretations and recommendations in written form;
9. Effectively communicate information from the evaluation orally to parents, teachers, other professionals, and/or the examinee as appropriate;
10. Reflect on professional practice following the scientist-practitioner model by synthesizing information from various assessment sources with research and theory;
11. Attend the relevant meetings in the school settings, when possible.

A second goal of the course is for you to understand and apply the following assumptions about assessment (Teglasi syllabus):

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- Assessment is conducted for the purpose of understanding the concerns presented about the child to make informed decisions and select appropriate intervention strategies.
- A “problem” is understood in relation to the whole child as he or she interacts in various contexts (family, school, community) and responds to various situations and tasks.
- Assessment is not a matter of giving tests and reporting test scores. Rather, it is a systematic process of gathering information requiring insight and judgment. Competent assessments demand an open mind and careful examination of various sources and types of data, including prior history, current concerns, performance/behaviors in various life contexts, and responses to the administered measures, as well as reports obtained from various sources.
- Various theoretical perspectives give rise to specific assessment principles and strategies. A flexible repertoire of theoretical constructs and assessment tools best equips students to tackle the range of presenting problems encountered.
- Competence in diagnostic assessment requires the synthesis of a broad knowledge base (development, psychopathology, individual differences, measurement theory) and mastery of specific tools and strategies. These competencies cannot be taught formulaically in step-by-step or cookbook fashion. Rather, students synthesize concepts and models that are woven together during supervision of individual case studies so that theory and practice are systematically integrated.
- Assessment data are placed into context in three ways (Teglasi et al., 2012): (1) child as context – each data point is understood in the context of the whole child; the various attributes within a child team up to face the environment; (2) child of context – what has been learned or not learned from past experience continues to influence current functioning, hence a developmental perspective is taken; and (3) child in context – functioning depends on the match between the child’s developing resources and the demands of various contexts; the “match” in current and anticipated future contexts is considered.

Course Requirements

Class Participation: This doctoral-level course is taught as a practicum/seminar. Most weeks, there will be assessment activities ongoing from approximately 9 to 11 am, followed by a class meeting from 11:15 am to 12:15 pm. Assessment activities will begin promptly at 9 am, thus you should expect to arrive well enough in advance to make any necessary preparations. When you do not have a current PEER case, you will observe the ongoing cases with the rest of the class. Group supervision and discussion are the primary formats for class meetings. You are expected to complete assigned readings/practice administrations, discuss your cases, and participate in discussions about other students’ cases each week. Your class participation grade will be based on: completion of practice test administrations, attendance, timeliness, preparation for and participation in clinic activities, self-review of your client sessions, and preparation for and participation in class meetings.

Initial Case Experience: You will complete your first case conjointly with your school supervisor. You and your supervisor will begin working on the case early in the fall semester, with the majority of the case completed before you begin your next case. Your supervisor will guide you through the assessment process, from the initial referral to the eligibility meeting. You and your supervisor will collaboratively

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plan your respective responsibilities for completing the assessment, which should include administering one standardized test and writing two sections of the final report. You will submit your test protocol to the TA for review. A written draft of your sections of the report must be reviewed by the course instructor and revised before submitting to your school supervisor. To receive a passing score on the initial case, you will submit a brief write up of this assessment experience by 10/12. The write up should include: (a) a two-page description of the case, including client demographics, initial referral concern, assessment plan, key findings, and conclusions, (b) a one-page description of your involvement with and contributions to the case, (c) a one-page self-reflection on your skill development and areas for growth, and (d) a half-page summarizing feedback from your supervisor at the conclusion of the case. You are responsible for asking your supervisor to provide feedback for this final portion of the case write up.

Three Comprehensive Evaluations: You will complete one case at the on-campus PEER clinic and two cases in the school setting (3 total). For grading purposes, you will maintain an **electronic case file** for each evaluation using Box (details below). The standard evaluation for each case will include a review of the child's background information; testing and classroom observations; interviews with the parent, teacher, and child; and measures of the child's cognitive abilities, visual-motor integration, and socio-emotional functioning and/or behaviors. PEER evaluations will also include at least one measure of the child's academic achievement. We will not focus class time on details of test administration and scoring, as this content was covered during your previous Cognitive Assessment course. Due to the breadth of available instruments as well as newly revised/published tests, you will likely administer instruments that are unfamiliar to you during the semester. On your own time, you must review and practice administration of all tests prior to administering the test with your client(s). You are strongly encouraged to coordinate practice sessions with your classmates and school supervisors and use video recording through the clinic to perfect your test administration. Standardized tests that are not administered properly will not be accepted, as these scores are invalid. Please bring any questions about administration and specific instruments to class and individual supervision.

One PEER Case: Each PEER case involves an intake interview with parents (conducted by us together), approximately three testing sessions (conducted by you), and a feedback conference with parents (conducted by us together). It may also be appropriate to provide feedback to the child, depending on the child's age and parent input. When providing feedback to the child, we will work together. Our PEER clinic has a brand new location in the Seneca Building as of Fall 2017. Detailed information on processes and procedures for clinic activities will be detailed in the 2017-2018 PEER Manual (to be distributed in mid-September).

Two School Cases: You will begin your initial case experience right away, as this experience will prepare you to conduct your own cases. You are strongly encouraged to work with your school supervisor to identify and begin your first comprehensive case by early October, with the second case starting no later than the beginning of November. These two comprehensive school cases should be completed by mid-December. Questions or concerns about your school cases should be directed to the course instructor immediately so that they can be addressed in a timely fashion. Additional detailed information about your school practicum roles and responsibilities can be found in the Assessment Practicum Agreement.

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Electronic Case Files: For each of the three comprehensive evaluations, you will maintain an electronic case file using a folder shared with me on Box (www.box.umd.edu). To protect client confidentiality, all electronic files will be de-identified and password protect using our designated class password. I will provide more information about de-identification and other measures to protect confidentiality in class.

- **Evaluation Plan:** You will develop an evaluation plan that includes the date the evaluation is due, reason(s) the student was referred for evaluation, measures chosen for the standard assessment battery, key activities related to the assessment and report writing process, and a timeline for completion of all assessment and report writing activities. The standard assessment battery includes:
 - Record review
 - Parent/guardian interview
 - Teacher interview(s)
 - Social, emotional, and/or behavioral rating scale(s)
 - School observation (school cases only)
 - Cognitive test
 - Achievement test (PEER only)
 - Visual-motor integration test
 - Child interview

If you suggest modifying or supplementing the standard assessment battery, please identify the measures that are being added or removed and provide a rationale for doing so (i.e., information from the child's background, reasons for referral, test performance that warrants the change). If you are adding measures, also include (a) the referral question or hypothesis that will be addressed with the measure, and (b) how the measure will answer the referral question or hypothesis, citing the manual and/or relevant theory, research, and practice as applicable. Your initial evaluation plan will be developed and revised throughout the case. You should keep the evaluation plan document updated as the case progresses, as I will periodically consult this document to keep track of your progress on the case. The evaluation plan template is on Canvas.

- **Client Contact Notes:** After each activity involving clients and related individuals (e.g., children, parents, teachers), you will write a brief client contact note that includes the date and summary of the activity or activities. For testing sessions, you will include the tests administered and your testing observations. For interviews, you will summarize the information obtained. A template for the Client Contact Note is on Canvas.
- **Evaluation Report:** You will write an evaluation report for each case, using either the PEER report template or the PGCPs report template. You will write your report as the case progresses, submitting drafts of sections as you complete them. You should only submit drafts that have been proofread and self-edited, in addition to completing revisions based on the feedback already received from your school supervisor and me. You will upload your report drafts to Box and notify me by email when a draft is ready for my review. You are responsible for keeping track of progress on your case and upcoming deadlines. For PEER, you should complete your final draft of the report within 3 weeks of the final testing session. For school cases, you will work with your school supervisor to identify a deadline for submitting the report. You should plan to send me a complete draft of the report at least one week before the report is due to your supervisor. Report templates are on Canvas.

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- **Supervision:** You are responsible for scheduling meetings with me for supervision outside of class time and writing up a brief summary of each supervision session. Within *1 week of receiving a school referral or conducting a PEER intake*, you will review the available records and meet with me for supervision to discuss the case and develop the evaluation plan. As the case progresses, you will need to schedule additional supervision meetings: *(1) within 1.5 weeks of completing the standard assessment battery, (2) after completing additional measures, if applicable, and (3) after submitting your report draft with complete scores*. We will meet for supervision approximately 3-4 times for each case (note: supervision will sometimes occur during class, and we may discuss more than one case during a supervision meeting). You will also receive written feedback on report drafts throughout each case. I will upload my feedback in Box within 1 week of receiving a draft, and you should make revisions based on my feedback before sending a subsequent draft. Please come to supervision prepared with relevant materials, topics for discussion, and questions. It is especially important to update your case file before supervision meeting. Within 48 hours of the supervision session, you will upload your supervision session summary to Box. A template for the Supervision Summary is on Canvas

Topic Leadership: You will make one class presentation during the fall semester. Topics include: (a) assessment of bilingual children, (b) assessment of dyslexia/reading disability, and (c) assessment of specific learning disability. Assignment to topics will occur at the beginning of the semester. Some references have been made available to you on Canvas but you are welcome to find and include additional, relevant references. You should plan to meet with me at least one week before your presentation to review the topic, clarify expectations for the depth and breadth of your presentation, and discuss any additional sources. You will give a formal presentation (approximately 20 minutes) and facilitate an in-class discussion (10 minutes). If you are not presenting on a given topic, you should select and read at least two of the relevant readings in advance of the presentation. You will submit your presentation materials on Canvas prior to your presentation.

School Case Presentation: You will select one of your school cases to present during class. In your case presentation, you will show how the data from various sources contributed to the conceptualization and addressed the referral questions. You should discuss the planning of the assessment battery, integration of data using various methods and sources, hypothesis testing, and applications of models, theories, and/or literature. You will present the completed case to the class (15 minutes) and lead the class in a relevant discussion (5 minutes). You should use a visual aid, such as PowerPoint slides or a handout (please remember to exclude identifying information to protect client confidentiality).

Evaluation

Course Requirement	% of Grade	Due Date
Class Participation	10%	--
Initial Case Experience	5%	10/12
PEER Case	30%	12/14
School Cases	40% (20% each)	11/16, 12/7
Topic Leadership	10%	11/9, 11/16, or 11/30

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School Case Presentation	5%	12/7
TOTAL	100%	--

*If prior arrangements are made, deadline may be extended.
90 – 100 = A, 80 – 89 = B, 70 – 79 = C, 60 – 69 = D, Below 60 = F

Additional Information & Expectations

Attendance: Regular attendance to class is required to successfully complete this course. In the unlikely event that you become ill or must miss class on the day that you are scheduled for assessment activities, you should contact me by phone and email as soon as possible. Unexcused absences or failure to provide notification of your absence may result in grade reduction. If you miss class, you may be asked to complete an additional assignment to make up for missed class time.

Religious Observation: Please inform the instructor of any intended absences for religious observances in advance.

Accommodations: If you have a documented disability and wish to discuss academic accommodations, please see the course instructor during the first week of class.

Academic Integrity: In all class work and assignments, it is expected that you adhere to the highest personal and professional standards that reflect both the objectives of the University of Maryland and our professional ethics. Proper citations, paraphrasing, and quotations are essential in all work, including materials prepared for class presentations. Your work is expected to be consistent with the affirmation in our University's Code of Academic Integrity (*I pledge on my honor that I have not given or received any unauthorized assistance on this examination/assignment*).

Timely Completion of Assignments: You are expected to complete assignments as specified by the due dates in the syllabus, unless other indicated. Late assignments will not receive full credit unless you have made prior arrangements with me. You must complete all assignments, which includes uploading the final materials to Box and/or Canvas, by 12/14. Due to the nature of the assessment process, cases not completed by the end of the semester may receive an extension if I have given prior approval. In these instances, you will receive a grade of "Incomplete" until the case is completed. In addition to course deadlines, you are responsible for working with your school supervisor to ensure that school evaluations are completed in accordance within the special education process timelines. Failure to meet school timelines presents a legal and ethical problem for your school supervisor, may result in termination of your school placement, and will impede your completion of the course.

Confidentiality, Case Management, and Test Copyrights: You must engage in ethical and professional behavior and adhere to the APA and NASP standards for confidentiality, case management, and test copyrights. Proper informed consent must be obtained before engaging in assessment activities. It is your responsibility to ensure that there is proper documentation of consent before you begin working with clients. All materials related to cases are to remain confidential, which means you must take adequate measures to protect client information on paper records as well as electronic materials. Paper records with identifying information should be stored in their proper locations: school case records

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should remain in the designated file at the school site; PEER case records should remain in the client's folder in the Seneca Building. If you wish to make copies of paper records so that you can work on cases outside of these locations, you must remove all identifying information. Even de-identified documents should be safeguarded (e.g., not left unattended or in the car, only used in a private space/not used at Starbucks). Electronic files should also be de-identified until the final report is ready, at which time you will add identifying information for printing. As an additional layer of protection, you must encrypt all electronic client files with our class password. Only de-identified materials should be shared in class. Please also keep in mind that copyrighted test materials must be safeguarded for ethical and legal reasons.

Course Materials and Readings

Required readings and selected references for topic leadership will be posted on Canvas or can be accessed through the UMD Library System. Additional resources can be accessed through the UMD Library System or available through supervision.

Textbooks

- Dombrowski, S. (2015). *Psychoeducational Assessment and Report Writing*. New York: Springer-Verlag.
- Weiss, L., Saklofske, D., Holdnack, J., & Prifitera, A. (2016). *WISC-V Assessment and Interpretation: Scientist-Practitioner Perspectives*. San Diego, CA: Academic Press.

Full References for Additional Weekly Readings

- Week 2 (9/7)
 - Weiner, I. (1989). On competence and ethicality in psychodiagnostic assessment. *Journal of Personality Assessment*, 53, 827-831.
- Week 3 (9/14)
 - Wilcox, G., & Schroeder, M. (2015). What comes before report writing? Attending to clinical reasoning and thinking errors in school psychology. *Journal of Psychoeducational Assessment*, 33(7), 652-661.
 - Lee, D., Reynolds, C. R., & Willson, V. L. (2003). Standardized test administration: Why bother? *Journal of Forensic Neuropsychology*, 3, 55-81.
- Week 4 (9/21)
 - Shrank, F., Decker, S., & Garruto, J. (2016). *Essentials of WJ IV Cognitive Abilities Assessment*. New York: Wiley. [available through lib.umd.edu]
 - Mather, N., & Wendling, B. (2015). *Essentials of WJ IV Tests of Achievement Assessment*. New York: Wiley. [available through lib.umd.edu]
- Week 5 (9/28)
 - Loe, S., Kadlubek, R., & Marks, W. (2007). Administration and scoring errors on the WISC-IV among graduate student examiners. *Journal of Psychoeducational Assessment*, 25(3), 237-247.
 - Keefer, K. (2015). Self-report assessments of emotional competencies: A critical look at methods and meanings. *Journal of Psychoeducational Assessment*, 33(1), 3-23.

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- Smith, S. (2007). Making sense of multiple informants in child and adolescent psychopathology: A guide for clinicians. *Journal of Psychoeducational Assessment, 25*(2), 139-149.
- Week 6 (10/5)
 - American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed.)*. Arlington, VA: American Psychiatric Publishing. [available through lib.umd.edu]
 - Individuals with Disabilities Education Act, 20 U.S.C. § 1400, 300.39 (2004a). Retrieved from <http://idea.ed.gov/explore/view/p/,root,regs,300,A,300%252E39>,
 - Individuals with Disabilities Education Act, 20 U.S.C. § 1400, 300.8 (2004b). Retrieved from <http://idea.ed.gov/explore/view/p/,root,regs,300,A,300%252E8>,
- Week 8 (10/19)
 - Lichtenstein, R. (2013). Writing psychoeducational reports that matter: A consumer-responsive approach. *NASP Communiqué, 42*(3).
 - Lichtenstein, R. (2013). Psychoeducational reports that matter: A consumer-responsive approach, part 2. *NASP Communiqué, 42*(4).
 - Lichtenstein, R. (2014). Psychoeducational reports that matter: A consumer-responsive approach, part 3. *NASP Communiqué, 42*(6).
- Week 9 (10/26)
 - Cormier, D., McGrew, K., & Ysseldyke, J. (2014). The influences of linguistic demand and cultural loading on cognitive test scores. *Journal of Psychoeducational Assessment, 32*(7), 610-623.
 - Ortiz, S. O. (2014). Best practices in nondiscriminatory assessment. In A. Thomas and P. Harrison (Eds.), *Best practices in school psychology: Foundations* (pp. 61 – 74). Bethesda, MD: NASP.
- Week 10 (11/2)
 - Flanagan, D., Ortiz, S., & Alfonso, V. (2013). Cross-battery assessment of individuals from culturally and linguistically diverse backgrounds. In A. Kaufman & N. Kaufman (Series Ed.), *Essentials of cross-battery assessment* (3rd ed., pp. 287-350). Hoboken, NJ: John Wiley & Sons, Inc.
 - Kranzler, J., Flores, C., & Coady, M. (2010). Examination of the cross-battery approach for the cognitive assessment of children and youth from diverse linguistic and cultural backgrounds. *School Psychology Review, 39*(3), 431-446.
 - Noland, R. (2009). When no bilingual examiner is available: Exploring the use of ancillary examiners as a viable testing solution. *Journal of Psychoeducational Assessment, 27*(1), 29-45.
 - Olvera, P., & Gomez-Cerrillo, L. (2011). A bilingual (English & Spanish) psychoeducational assessment model grounded in Cattell-Horn Carroll (CHC) theory: A cross battery approach. *Contemporary School Psychology, 15*, 117-127.
 - Styck, K., & Watkins, M. (2013). Diagnostic utility of the culture-language interpretive matrix for the Wechsler Intelligence Scales for Children – Fourth Edition among referred students. *School Psychology Review, 42*(4), 367-382.
- Week 11 (11/9)

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- Cottrell, J. M., & Barrett, C. A. (2016). Defining the Undefinable: Operationalization of Methods to Identify Specific Learning Disabilities among Practicing School Psychologists. *Psychology in The Schools, 53*, 143-157.
- Flanagan, D., Fiorello, C., & Ortiz, S. (2010). Enhancing practice through application of Cattell-Horn-Carroll theory and research: A “third method” approach to specific learning disability identification. *Psychology in the Schools, 47*(7), 739-760.
- Herr, C., & Bateman, B. (2013). Learning disabilities and the law. In H. Swanson, K. Harris, & S. Graham (Eds.), *Handbook of learning disabilities* (2nd ed., pp. 51-68). New York: Guilford Publications.
- Kovaleski, J., Lichtenstein, R., Naglieri, J., Ortiz, S., Klotz, M., & Rossen, E. (2015). Current perspectives in the identification of specific learning disabilities. *NASP Communiqué, 44*(4).
- McGill, R., Styck, K., Palomares, R., & Hass, M. (2016). Critical issues in specific learning disability identification: What we need to know about the PSW model. *Learning Disability Quarterly, 39*(3), 159-70.
- Miciak, J., Taylor, W., Denton, C., & Fletcher, J. (2015). The effect of achievement test selection on identification of learning disabilities within a pattern of strengths and weaknesses framework. *School Psychology Quarterly, 30*(3), 321-334.
- Miciak, J., Williams, J., Taylor, W., Cirino, P., Fletcher, J., & Vaughn, S. (2016). Do processing patterns of strengths and weakness predict differential treatment response?. *Journal of Educational Psychology, 108*(6), 898-909.
- Week 12 (11/16)
 - Finn, E., Shen, X., Holahan, J., Scheinost, D., Lacadie, C., Papademetris, X., . . . Constable, T. (2014). Disruption of functional networks in dyslexia: A whole-brain, data-driven analysis of connectivity. *Journal of Biological Psychiatry, 76*, 397-404.
 - Lilienfield, S., Lynn, S., Ruscio, J., & Beyerstein, B. (2010). Myth #17: The defining feature of dyslexia is reversing letters. In *50 great myths of popular psychology: Shattering widespread misconceptions about human behavior*. Retrieved from http://www.psychologicalscience.org/media/myths/myth_17.cfm#
 - Marinus, E., Mostart, M., Segers, E., Schubert, T., Madelaine, A., & Wheldall, K. (2016). A special font for people with dyslexia: Does it work and, if so, why?. *DYSLEXIA, 22*, 233-244.
 - Norton, E., Black, J., Stanley, L., Tanaka, H., Gabrieli, J., Sawyer, C., & Hoeft, F. (2014). Functional neuroanatomical evidence for the double-deficit hypothesis of developmental dyslexia. *Neuropsychologia, 61*, 235-246.
 - Shaywitz, S., & Shaywitz, B. (2013). Making a hidden disability visible: What has been learned from neurobiological studies of dyslexia. In H. Swanson, K. Harris, & S. Graham (Eds.), *Handbook of learning disabilities* (2nd ed., pp. 643-657). New York: Guilford Publications.
 - Shaywitz, B., Weiss, L., Saklofske, D., & Shaywitz, S. (2015). Translating scientific progress in dyslexia into twenty-first century diagnosis and interventions. In L. Weiss, D. Saklofske, J. Holdenack, & A. Prifitera (Eds.) *WISC-V assessment and interpretation* (pp. 269-286). San Diego, CA: Elsevier Science.
 - Vandermosten, M., Hoeft, F., & Norton, E. (2016). Integrating MRI brain imaging studies of pre-reading children with current theories of developmental dyslexia: A review and quantitative meta-analysis. *Behavioral Sciences, 10*, 155-161.

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Weekly Class Schedule

Date	Topics	Assignments/Readings	Due
Week 1 8/31	Course overview and review of procedures	PGCPS practicum information	
Week 2 9/7	Psycho-Educational Assessment & Report Writing Process Conducting a Record Review and Writing the Background Section	Dombrowski (2015): Ch. 1-5 Weiner (1989)	PGCPS paperwork and set up meeting with school supervisor
Week 3 9/14	Preparing for PEER Intake Interviews Developing an Evaluation Plan Behavioral Observations and the DSM-5 (Guest speaker: Dr. Kelly Lee, 9-11 am)	Dombrowski (2015): Ch. 6 Lee, Reynolds, & Willson (2003) Wilcox & Schroeder (2015)	Meet with school supervisor and begin initial case experience
Week 4 9/21	No class – Rosh Hashanah	Mather & Wendling (2015): Ch. 1-4 Shrank et al. (2016): Ch. 1-4 Weiss et al. (2016): Ch. 1-2	Complete two practice administrations: (1) WISC-V or WJ IV COG, (2) WJ IV ACH
Week 5 9/28	PEER Intake(s) Rating Scales—Self & Multiple Informants	Loe et al. (2007) Keefer (2013) Smith (2007)	
Week 6 10/5	PEER Intake(s) IDEA Eligibility Determination Process & Timelines	Dombrowski (2015): Ch. 10-14, 19 IDEA (2004a; 2004b) DSM-5 (2013) – ID, DD, ASD, ADHD, SLD	
Week 7 10/12	PEER Testing Sessions Writing Up Assessment Results Interpretation of the WJ IV ACH (Guest speaker: Dr. Kelly Lee, 11:30-12:15)	Dombrowski (2015) – Ch. 7-8 Weiss et al. (2016) – Ch. 3-4	Initial case experience write-up Begin School Case #1 by this date
Week 8 10/19	PEER Testing Sessions Report Writing – Summary and Recommendations	Dombrowski (2015) – Ch. 9 Lichtenstein (2013-2014)	

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Week 9 10/26	PEER Testing Sessions Diversity Issues in Assessment	Cormier et al. (2014) Dombrowski (2015): Ch. 17 Ortiz (2014)	
Week 10 11/2	PEER Testing Sessions Assessment of Bilingual Children (Topic leader: _____)	<i>Select two of the following:</i> Flanagan et al. (2013) Kranzler et al. (2010) Noland (2009) Olvera & Gomez-Cerrillo (2011) Styck & Watkins (2013)	Begin School Case #2 by this date
Week 11 11/9	PEER Testing Sessions Assessment of Specific Learning Disability (Topic leader: _____)	Weiss et al. (2016): Ch. 8 Cottrell & Barrett (2016) <i>Select two of the following:</i> Flanagan et al. (2010) Herr & Bateman (2013) Kovaleski et al. (2015) McGill et al. (2016) Miciak et al. (2015)	
Week 12 11/16	Communicating Assessment Results Preparing for PEER Feedback Conferences Assessment of Dyslexia/Reading Disability (Topic leader: _____)	Dombrowski (2015): Ch. 18 Weiss et al. (2016): Ch. 9 <i>Select two of the following:</i> Finn et al. (2014) Lilienfeld et al. (2010) Marinus et al. (2016) Norton et al. (2014) Shaywitz & Shaywitz (2013) Vandermosten et al. (2016)	Complete School Case #1
Week 13 11/23	NO CLASS - Thanksgiving		
Week 14 11/30	Feedback Conference(s) WISC-V Administration with Q- interactive	Weiss et al. (2015): Ch. 11	Watch UMD Workshop on Q- interactive
Week 15 12/7	Feedback Conference(s) School Case Presentations	TBA	Complete School Case #2 Complete PEER Case
12/14	All Assignments Due		