The SpLD assessment service at the University of Cambridge.

Background

The University of Cambridge believes that the diagnostic assessment of students with specific learning difficulties (from initial screening through full diagnostic assessment to feedback session) should be a multi-disciplinary team approach (involving a range of both educational and medical professionals) that systematically explores the reasons for the difficulties described, considers other possible explanations, cross-references all findings, and so aims to arrive at a diagnosis that is robust, transparent and has been rigorously tested. In keeping with the ‘best practice’ recommendations from the professional bodies in the field, (ADSHE, PAToSS, BDA, NADP) at all stages the University’s assessment process aims to be empowering and enabling for the student by facilitating increased understanding of the difficulties the student experiences and provide support, strategies and approaches that help the student to compensate for the difficulties they experience. In this way the process aims to help the student to engage with their academic activities in a way that more closely reflects their potential and on a more level playing field with their non-SpLD peers.

The details of the current model used are as follows (please also see appendix 1 for flow diagram of the process):

1. Screening process

a. Initial contact

The SpLD assessment process is initiated when a student e-mails the University’s Disability Resource Centre (DRC) with concerns that s/he may have an undiagnosed specific learning difficulty. The DRC responds with a standard e-mail that includes the following information:

- Details of an appointment to meet with the SpLD adviser for an initial screening
- a recommendation that the student seeks full eye test with an ophthalmic optician prior to the screening interview (if s/he had not had one carried out recently) in order to rule out the possibility that the problems described are due to ocular or visual abnormalities
- contact details of a suitable local eye clinic which can undertake the appropriate eye tests and also assess for visual stress.
- a pre-screening questionnaire for self-completion and return (for details of the pre-screening questionnaire, please see next section)
- the student is also asked to supply a short piece of unedited hand written work, such as lecture notes, handwritten essay, or an exam script, to enable the SpLD adviser to make some preliminary observations of the student’s performance in key areas.

Pre-screening questionnaire
Content
As mentioned above, the student is sent a pre-screening questionnaire for self completion and return prior to the meeting with the SpLD Adviser. The pre-screening questionnaire consists of the following:
- a number of closed questions
- the opportunity to provide a narrative response.

The questions focus on identifying difficulties in the following areas:
- educational background
- speech & language
- literacy
- motor co-ordination
- social interaction
- establishing the main difficulties that are currently being experienced.

b. Screening interview
All students who contact the service with concerns relating to a possible SpLD are offered a meeting with the SpLD adviser for a screening interview. The screening interview lasts around 1.5 hours and includes the following elements:

Interview Questionnaire Form
As a starting point, a hypothesis will provisionally have been made from the student's responses to the pre-screening questionnaire and the student's writing sample, and the screening interview aims to re-evaluate this hypothesis. Therefore, the SpLD adviser conducts a semi-structured interview with the student, using the questions on the interview questionnaire form as trigger points.

The questions in the semi-structured interview are categorised into the following main areas:
- medical background (including physical and mental health)
- social background
- educational background
- language and listening behaviours
- writing and spelling behaviours
- reading
- note-taking
- Maths
- memorisation
- spatial/temporal

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1 The SpLD adviser is a specialist teacher who holds a post graduate qualification in SpLD, as well as a current SpLD practising certificate, and so has the appropriate experience and professional understanding of SpLD necessary to identify the presence of possible characteristics of SpLD (DfES, 2005).
2 The interview questions used in the screening of students at the University of Cambridge have been formulated to take into account the experiences of the University's particular cohort, however it is recognised that there are a range of commercially available standardised questionnaires and computer based screeners.
The interview questionnaire aims to both highlight patterns associated with an SpLD, as well as eliminating other reasons for the difficulties described, which could be confused with signs of SpLD.

If the responses to the semi-structured interview questions indicate the presence of any characteristics associated with ADHD, ASD, DCD/dyspraxia, mental health conditions or other SpLD's, the SpLD Adviser will undertake additional sets of semi-structured interview questions and also involve other medical professionals. The process is as follows:

i. ADHD

If the responses to the semi-structured interview questions indicate the presence of any characteristics associated with ADHD then further questionnaires are used, based on the DSM-V criteria for ADHD. These include a further discussion as follows:

- a general discussion of symptoms
- establish that sufficient symptoms of inattention and/or hyperactivity and impulsivity are present to the point that is disruptive and inappropriate for developmental level
- establish that these were present in childhood (being mindful that they may not be considered to be ‘impairments’ at that stage)
- establish that these are present in different setting,
- establish that these cause significant impairment in social, academic or work functioning
- establish the current challenges and barriers that are being experienced
- note any history of mental health problems.

A further set of semi-structured interview questionnaires are then used, as follows:

- The Adult ADHD Self-report Scale (ASRS) symptom checklist
- CAARS– Self Report questionnaire
- A copy of the CAARS-Observer questionnaire is given to the student to pass to a close member of family to complete on his/her behalf.

The outcomes of this screening interview and the questionnaires are written up as a report and passed to the student with a letter for his/her GP requesting a referral for the student to be assessed by an ADHD psychiatrist at the adult ADHD clinic (template letter available). The student is also referred to an educational assessor as an educational report is valuable in informing the support and reasonable adjustments beneficial at University (as well as being accepted by the University’s Board of Exams for the purposes of applying for exam access arrangements). Given the prevailing length of time for NHS referral to an ADHD specialist, this educational assessment ensures that the student receives support and adjustments without undue delay. The student can also
pass this report to his/her GP as the basis for referral to the ADHD psychiatrist at the adult ADHD clinic

ii. DCD/Dyspraxia

If the responses to the semi-structured interview questions indicate the presence of DCD/dyspraxia then further DCD/dyspraxia specific questionnaires are completed, as follows:

- a general discussion of symptoms establishing the following:
  - a childhood history of motor difficulties
  - current impairments in motor functioning
  - that the impairment significantly interferes with academic achievement / activities of daily living
  - noting the current challenges and barriers that are being experienced
- The student is given a ‘Dyspraxia - Signs and Symptoms’ information sheet checklist, and asked to mark each symptom with the codes N= never, S= sometimes and O= often
- A DCD/dyspraxia specific semi-structured interview is then administered, covering the following areas:
  - Gross motor co-ordination skills
  - Fine motor co-ordination skills
  - Speech & Language
  - Eye movements
  - Perception
  - Learning, thought & memory
  - Emotion & behaviour
- The Adult DCD/Dyspraxia Checklist (ADC) for Further and Higher Education (Kirby & Rosenblum, 2008) is then administered.
- selected standardised tests may be chosen on an individual basis to test the SpLD adviser’s hypothesis

If the outcome of these questionnaires, discussion and tests indicates the possible presence of DCD/dyspraxia, the SpLD adviser will recommend that the student meets with his/her GP, in order to eliminate other possible medical conditions that could present with motor coordination problems, before an assessment for DCD/dyspraxia is conducted by an Educational Psychologist or Specialist Teacher. The student is provided with a letter of referral that s/he can pass to the GP in order to make this appointment.

iii. ASD

If the responses to the semi-structured interview questions indicate the possible presence of ASD, the SpLD adviser offers the student an AS screening. This includes the following:

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3 taken from the Dyspraxia Foundation website:
http://www.dyspraxiafoundation.org.uk/services/ad_symptoms.php
- o a general discussion of symptoms establishing the following:
  - o a history of impairments in social communication, social interaction and restricted/repetitive patterns of behaviour or interest
  - o noting the current challenges and barriers that are being experienced and the impact of these on academic achievement and activities of daily living
  - o The student is given the ‘CLASS profile of AS guide’ and asked to mark which statements they associate with and why
  - o the AQ is administered
  - o the EQ is administered.

If the outcome of this screening indicates characteristics associated with ASD, the student is then directly referred to a psychiatrist at the local AS diagnostic clinic, CLASS (Cambridge Lifespan Asperger’s Syndrome Service), for a full diagnostic assessment.4

iv. Mental health conditions

If any of the responses to the semi-structured interview questions indicate the possible presence of a mental health condition, the SpLD adviser will take the following action:

- o refer the student to the University’s mental health adviser - or
- o refer the student to the University’s counselling service,
- o recommend that the student contacts his/her GP to discuss symptoms.
- o The SpLD adviser may also liaise with the student’s college nurse to discuss these concerns.
- o Provide the student with the contact details of the University’s mental health advice line (available throughout the night)

**Standardised Tests**

Following the semi-structured interview, the SpLD Adviser may conduct selected standardised tests. These will be chosen on an individual basis to test the SpLD adviser’s hypothesis formed by the responses to the interview questions.

**Initial Interview Written Report & Recommendations**

Following the screening interview, the SpLD Adviser writes up the outcomes of the session as a short report and takes the following action:

- • The student is sent a copy of the write up to ensure that his/her voice is centralised as well as allowing him/her to check the accuracy of the contents of the screening outcomes.
- • The SpLD Adviser refers the student to an educational assessor (either an Educational Psychologist or Specialist Teacher with a current PAToSS

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4 CLASS have agreed to accept referrals for AS assessment direct from the DRC, although it is noted that other H.E institutions may need to refer the student to their GP for an onward referral for diagnostic assessment at an Adult AS diagnostic clinic.
practicing certificate) for a full diagnostic assessment for a specific learning difficulty, where the signs have been identified

- where signs of ADHD, ASD, DCD/dyspraxia and/or mental health conditions are present the SpLD Adviser refers the student to the appropriate medical practitioner (as detailed above).
- The SpLD Adviser sends a copy of the write up of the screening interview to the diagnostic assessor as part of the preliminary data gathering and information sharing process.

**Interim support**

In the interim, if signs of SpLD, ADHD, ASD and/or mental health conditions have been identified during the initial screening interview, a range of interim support measures are recommended by the SpLD Adviser. These can include the following:

- access to College based study skills tuition and/or writing tutor,
- a range of library workshop courses to help with library and researching skills,
- the University’s online study skills resources (known as ‘Transskills’)
- the Counselling services workshops (these are general group workshops covering anxiety, exam stress, etc).
- The college nurse for medical advice and support

N.B. During the screening interview, the SpLD Adviser will ask the student to describe successes, good experiences and any particular approaches that they have found helpful. This information will be used to inform support.

This concludes the screening element of the SpLD assessment service.

**2. Full Diagnostic Assessment process**

Once a student has undertaken a screening interview at the DRC and demonstrates sufficient signs of an SpLD to warrant further investigation, the SpLD Adviser refers the student to an independent educational assessor (either an Educational Psychologist or Specialist Teacher with a current PAToSS practicing certificate) for a full diagnostic assessment.

**The DRC’s pool of recommended assessors**

In order to assist the student in locating an assessor who is suitably qualified and has experience of conducting assessments for students in HE, the DRC has compiled a list of suitable assessors for whom the DRC implements on-going quality assurance processes. This ensures the following:

- the quality of the report is of an acceptable standard
- the diagnosis is carried out by a professional who is appropriately qualified in the diagnostic assessment of SpLD in students in H.E;
- the report is suitable for applying for funding via Student Finance (DSA)
- the report is likely to meet the current criteria of the Board of Exams for the purposes of applying for exam access arrangements.
However, it should be noted that a student is not obliged to use one of the DRC’s pool of recommended assessors. Should a student wish to select an alternative assessor, the DRC supports the student in this decision by providing a written set of guidelines that can be passed to the student’s chosen assessor, along with advice to help the student locate a suitably qualified assessor who has experience in assessing students in Higher Education.

3. DRC Feedback service

Once the diagnostic assessment report has been compiled by the diagnostic assessor the following process occurs:

- One copy of the report is sent to the student by the diagnostic assessor.
- One copy of the report is sent to the DRC by the diagnostic assessor.
- On receipt of the report, the DRC immediately sends an e-mail to the student offering an appointment with the SpLD Adviser to discuss the outcome of the report and the support that is available.
- At the same time, the student is also provided with details of Disabled Student’s Allowances with the aim of minimising any delay in funding for support where the student is waiting for the appointment with the SpLD Adviser.

The feedback interview lasts for 1.5 hours with the SpLD Adviser and involves a detailed discussion of the following:

- The nature of the student’s SpLD profile
- how this impacts on his/her academic activity
- support, adjustments and compensatory strategies that may be beneficial.

The details of the feedback interview are as follows:

1. **Discussion and explanation of the student’s SpLD profile.** The SpLD adviser discusses/explains the contents of the diagnostic assessment report in order to ensure that the student:
   - Understands the contents and implications of the report
   - Understands his/her diagnosis and learning profile.
   - Understand his/her experiences in the context of a recognised neurodiverse profile,
   - Has the tools to explain his/her profile to others.
   - Feels empowered by the diagnostic experience

2. **Exam access arrangements.** The outcomes of the diagnostic report are discussed in the context of its recommendations, including exam access arrangements. This aims to ensure that the student:
   - understands the reasons why these recommendations have been made
   - understands the process for applying for exam access arrangements
   - understands how to use these adjustments appropriately in the exam situation

The SpLD adviser is likely to recommend that the student works with a specialist study skills tutor to practice using the adjustments in exam
conditions prior to exams, if s/he has not used these adjustments in exams before.

3. **Student support documents (SSD).** The recommendations of the report in relation to course based activities are also discussed and a student support document (SSD) is compiled in dialogue with the student. The SSD is the vehicle for passing recommendations for reasonable adjustments and appropriate inclusive teaching practices to all members of staff involved in the student’s teaching and learning. It advises staff of the student’s diagnosis, explains the impact on study and recommends appropriate adjustments under the following headings:
   a. Lectures
   b. Tutorials
   c. Practicals
   d. Library
   e. Accommodation
   f. Exam access arrangements

This SSD is sent electronically to the student in the first instance to allow him/her adequate time to consider its contents. Once agreed by the student, the SSD is disseminated to University staff involved in the student’s teaching and learning on a ‘need to know’ basis (any University required documentation, such as the Agreement for Recording Lectures, is also completed at this point).

4. **Assistive Technology.** The SpLD Adviser acquaints the student with a range of assistive technology that may help to compensate for the identified areas of difficulty highlighted in the diagnostic report. The assistive technology will be discussed in detail & fully demonstrated at a Needs Assessment, so this preliminary discussion aims to help the student consider some of the issues and questions s/he may have in relation to assistive technology in anticipation of the Needs Assessment. The student is also given this information on hand-outs and provided with equipment on loan, in the interim, if required.

5. **Human support (NMA).** The SpLD Adviser discusses any NMA support that the student may benefit from, such as:
   a. specialist 1:1 study skills sessions
   b. Mentoring/ coaching
   c. note-takers
   d. proof-readers
   e. amanuensis.

The student is provided with information sheets that explain the areas that mentoring and 1:1 specialist study skills sessions can address. The SpLD Adviser ensures that the explanation of NMA support is related to the experiences/difficulties the student has described in the screening interview.

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5 The information sheets include the ADSHE Mind Map of the possible range of specialist 1:1 support. This is available from www.adshe.org.uk
and/or has been identified on the diagnostic report. A limited number of NMA sessions are arrangement, if required, in anticipation of the DSA application.

6. **Disabled Student’s Allowances (DSA).** The cost of the NMA support and assistive technology is usually met from Disabled Student’s Allowances (DSA). During the feedback session, the SpLD adviser takes the following action:
   - The SpLD adviser assists the student in completing the DSA application form
   - The SpLD adviser explains the process of this grant application (including the needs assessment process) and provides this explanation in writing.
   - As the DSA application is a lengthy process the SpLD adviser implements interim support until the DSA funding is finally agreed, as follows:
     - up to five 1:1 specialist study skills sessions and/or mentoring sessions
     - the loan of equipment (where available) from the DRC loan pool.
     - Students are advised if they are eligible to attend the SuperReading course and/or ADHD coaching course for students, which are funded by DSA and held at the DRC.

7. **Signposting to other professionals.** During the diagnostic assessment process with the external assessor, other difficulties or concerns may have been identified that were not directly attributable to the SpLD diagnosis. These may include mental health difficulties, ADHD, AS, and/or visual stress, for example. In these instances the SpLD adviser takes the following actions:

   a. **ADHD.** If ADHD traits have been identified by the diagnostic assessment, the SpLD adviser will direct the student to make an appointment with his/her GP to request a referral to an Adult ADHD clinic. The medical route may provide the student with the opportunity to access NHS services for any medications and/or therapies that could be helpful as well as checking whether or not the characteristics of ADHD that have been identified in the report could be the result of other mental health conditions. The DRC has produced a referral letter (with reference to the NICE guidelines) that the student can pass to his/her GP, which explains the reasons for referral as well as providing the contact details of the nearest Adult ADHD clinic.

   b. **Mental Health.** If characteristics associated with mental health conditions have been identified in the diagnostic report, the SpLD adviser will refer the student to the University’s mental health adviser and counselling services. The SpLD adviser will also recommend that the student seeks an appointment with his/her GP and will liaise with the student’s college nurse. In addition, students are alerted to the group workshops provided by the counselling service that address issues such as anxiety, exam stress, etc., as well as being given the
details of the University’s helpline providing counselling support during ‘out of office’ hours.

c. **ASD.** If traits of ASD have been suggested in the diagnostic assessors report, the SpLD adviser will discuss with the student the option for a detailed screening for AS to be carried out within the DRC, leading to a referral to the local adult AS assessment service (CLASS).

d. **Visual stress.** If the presence of visual stress has been indicated on the diagnostic report, the SpLD Adviser conducts a screening for coloured overlays and provides the student with the coloured overlay of choice during the feedback interview. The SpLD Adviser will also signpost the student to a suitably qualified ophthalmic optometrist/ eye clinic for a full assessment for visual stress and further options.

e. **DCD/Dyspraxia.** If DCD/dyspraxia has been diagnosed by the diagnostic assessor, the student may benefit from a referral to an Occupational Therapist to address difficulties with motor coordination. If this is warranted, the SpLD adviser will provide the student with letter for his/her GP with a request for onward referral to an OT.

8. Students are also provided with general information sheets relating to their diagnosis. These sheets include the following:
   a. **Information hand-out sheet for University staff.** This is a guide for lecturers and tutors to teaching and support for students in Higher Education in relation to the specific diagnosis that the student has received. The student can pass this hand-out to any member of staff involved in their teaching and learning, as they feel necessary. It provides a short list of signs and symptoms of the diagnosed condition along with a general overview of the impact of the diagnosis on learning and gives key recommendations for helpful teaching approaches that members of staff can implement.
   b. **General help sheet for students.** This is a one sheet document that lists the type of help & support available for a student and is specific to the given diagnosis. This information sheet also lists the sources of support available (both within and external to the University), along with the contact details of national and local support groups and gives details of useful texts.

9. Finally, students are invited to attend the University’s social group that relates the each of the individual neurodiverse areas. The following groups are currently running at the DRC:
   a. AS social group
   b. ADHD social group,
   c. SpLD social group
   d. A number of groups for different mental health conditions (run by the student’s Union).
   e. Visual Impairment social group

These groups are student led and provide an opportunity to meet and socialise with other students with similar diagnoses and to share strategies, tips and experiences.
All the information discussed during the feedback session is provided in written as well as verbal form and in an SpLD appropriate format. Students are invited to record the meeting, should they so wish. Full details of the signs and symptoms of the different neurodiverse profiles, as well as impact on study and the recommended inclusive teaching practices, are also provided to staff on the DRC’s website and intranet.

The structure and contents of the feedback meeting concludes the assessment experience for the student and aims to ensure that the student has:

- a full understanding of their diagnosis
- any necessary NMA support, such as 1:1 specialist study skills sessions and/or mentoring implemented
- a student support document with recommendations for adjustments/support.
- made the DSA application for funding for assistive technology and NMA support
- been signposted to any other professional or service that they may require.
- been provided with assistive software and a voice recorder on loan
- been given coloured overlays, coloured rulers & coloured writing paper if required.

This aims to ensure that the assessment process is one of empowerment and enablement, rather than simply an exercise in labelling.

4. Quality assurance

The DRC operates a range of quality assurance measures, which it uses to monitor the assessment service. This includes the following:

- anonymous feedback from students and student surveys of satisfaction with each element of the service.
- The DRC organises annual meetings with the diagnostic assessors and opportunities to share practice.
- There is a formal annual review of the SpLD assessment service, during which time the student feedback and any recommendations from the professionals bodies in the field (such as ADSHE, PAToSS, NADP, BDA, etc) are implemented
- The SpLD team maintain constant ongoing monitoring of the model in view of new research or changes in recommendations that may affect any aspect of the assessment model.

Conclusion

The advantages of the current assessment model, from initial contact through screening interview to diagnostic report, feedback and the implementation of support, are as follows:

- it is systematic and so encourages consistency of experience.
- It attempts to balance this consistency of approach with flexible thinking and a focus on the individual.
- In order to ensure that the outcomes arrived at are substantiated by the evidence, and also discussed thoroughly and sensitively with the student,
each stage is lengthy (the screening appointment and feedback sessions each last around 1.5 hours, with the full diagnostic assessment taking around 3+ hours). This aims to:

- provide adequate time to reliably determine and test the hypothesis,
- sensitively address the emotional ramifications that can be associated with a diagnosis of SpLD. (NADP, 2007)
- meet the ‘duty of care’ guidelines set out by the NADP (NADP, 2007, p35)
- recognise that any diagnosis potentially has a significant psychological effect on the student as well as legal ramifications.
- help the student towards a greater understanding of their learning style (including strengths as well as challenges)
- assist the student in using this understanding to inform strategies and interventions
- encourage self-advocacy

Crucially, the process aims to be a multi-disciplinary approach. It recognises that not one single professional (either educational or medical) has all the expertise necessary for a completely robust diagnosis, but that different professionals have different areas of relevant expertise as well as boundaries of knowledge. This model aims to ensure that a full assessment of the individual’s difficulties has been achieved by involving each appropriate professional at the relevant stage. As a result, the assessment process requires the involvement of the following professionals (co-ordinated by the SpLD adviser):

- SpLD adviser (Specialist Teacher with practising certificate)
- ophthalmic optician/optometrist,
- mental health services (University mental health co-ordinator and counselling services)
- GP
- University nurse
- SpLD diagnostic assessor (Educational Psychologist and/or Specialist Teacher with practising certificate).
- Specialist Psychiatrists
- Occupational Therapist
Appendix 1
SpLD Assessment Procedure – Flow Chart

Initial contact
Appointment arranged, pre-screening questionnaire sent, eye test recommended, piece of written work requested. (Appointment reminder e-mail sent 24 hours before appointment due)

Initial Screening Interview
Conducted by disability adviser.
Including review of pre-screening questionnaire, structured interview questions, observation & selected hypothesis driven tests.

Review of hypothesis

Feedback on initial findings.
Discussion of initial finding with student & explanation of next stages. Disability adviser writes up report and forwards to selected assessor. Copy report sent to student for agreement

Diagnostic Report received
E-mail sent to student with appointment, DSA, and exams arrangement information

Full Assessment
With selected EP from University pool of assessors (selection determined by hypothesis)

Directed to other professional
e.g. Occupational therapist, GP, psychiatrists, ophthalmic optician

Feedback on diagnostic report
Discussion of report findings with disability adviser

Support arranged:
Assistive technology, non-medical human support, course based adjustments, library adjustments, Exam access arrangements

Student Evaluation

Directed to other agencies
Counselling / GP / eye clinic / psychiatrist / OT

Review
Annual review of process to include guidelines from professional bodies on best practice, review of current tests, data, student evaluation & comparison with other HE models.
REFERENCES


