Course Syllabus: Psychology 751 Section 001 - Fall 2011 Semester  
School Psychology Assessment Practicum (2 credits)
Instructor: Mittie T. Quinn, Ph.D. - Adjunct Faculty
Office: Therapy and Assessment Center of Fairfax  
3925 Old Lee Hwy, Ste.52A, Fairfax, VA 22030  
703-385-7575 x2, mquinn2@gmu.edu

Class Meeting: Wednesdays, 12:00 – 2:00 - GMU Center for Psychological Services
Office Hours: 2-3 Wednesdays
Office: Clinic

Course Objectives:
Students will:
- Develop skills in interviewing, collecting and organizing demographic information
- Develop skills in planning, administering, scoring and interpreting psycho-educational assessments
- Develop familiarity with diagnoses typical to school-aged children and adolescents
- Develop the ability to communicate results verbally and in writing to parents and other school professionals
- Learn to translate assessment data into intervention recommendations
- Learn to work under supervision and in collaboration with peers and colleagues.

Prerequisites: Assessment courses PSYC 709, 710 and 722

Course Structure and Requirements
This is the first of a two-semester practicum during which time students are required to complete a total of seven comprehensive assessments. During the Fall semester, students will meet regularly for group supervision and presentations and will complete two cases. The instructor and students will also schedule meetings as needed to review and discuss individual reports. During the Spring Semester, the students will meet regularly with their assigned supervisor and will complete five additional cases.

Composition of the methods and tests used in the comprehensive evaluations will vary as a function of the referral question. The components of an evaluation will typically include a measure of intelligence (e.g. Wechsler, Stanford Binet, DAS, WJIII Cog), measures of information processing (e.g. Bender, Beery VMI, TAPS3, WJIII Cog, etc.); achievement (e.g. WJIIIAch, WIAT2, K-TEA, Key Math3, Nelson Denny Reading, etc.); behavior rating scales (e.g. BASC2, ASEBA, Conners’); social-emotional screening instrument (e.g., DAP:SPED); emotional-personality assessments (e.g. Robert’s Apperception Test, TAT, Rorschach, etc.); interviews of the client and parent(s); and other methods as directed by the supervisors. Student and instructor will consult on selection of instruments for individual cases.

Grading
Grading will be based primarily (80%) on the quality of your written psycho-educational reports for all seven cases. For the first two cases (completed during the fall semester), you will receive a grade for the final, rather than initial drafts of the assessment reports. Grades for your reports will be assigned according to the attached rubric. It is my assumption and anticipation that your final drafts will be worthy of “A” grades. For the remainder of your reports (#3-7), your grade will be based on the first draft of the report. Failure to complete testing and final reports for seven comprehensive
cases by May 16, 2011 will result in a grade of "F" unless the student, supervisor, and the program director have approved an alternate plan.

Class participation grade will be based on attendance, participation and contributions to class discussions. This grade will also be based on completion of occasional assigned reading assignments that are relevant to the current discussions. Students should attend the required Clinic training workshop on August 26, 2011 and review NASP and APA Ethical guidelines before our first class meeting.

Your grade for “Interpersonal Interactions with clients” will be determined from client comment sheets completed by all Clinic clients.

Your final grade will be based on the following:
1. Quality and accuracy of your reports (80%)
2. Class participation and adherence to Clinic / ethical guidelines (Note, ethical violations can result is dismissal from the course.) (5%) Failure to comply with Clinic or ethical guidelines may result in a failing grade for Practicum.
3. Test administrations, scoring accuracy, related basic skills (5%)
4. Interpersonal interactions with clients (10%)

I recommend the following submission schedule for your reports:
- First Assessment Report – October 19-26
- Second Assessment Report – December 1 - 7

You may initiate your third case when the second case is complete or over the Winter holiday - January interterm period.

Grades are giving based on the following accumulated points:
A = 96 – 100; A- = 92 – 95; B+ = 89 – 91; B = 86 – 88; B- = 83 – 85. Grades below 83 are considered failing.

Class Meetings:

August 26
Clinic Orientation – Dr. Mehlenbeck

Class 1 (Sept 7)
(ON LINE via EMAILs or BlackBoard)
Course expectations, scheduling issues, clinic procedures, etc

Class 2 (Sept 14)
Share assigned case information, discuss development of test battery

Class 3 (Sept 21)
Share assigned case information- progress and pitfalls

Class 4 (Sept 28)
Individual meetings - sign up for times

Class 5 (Oct. 5)
Review: DSMIV Diagnoses vs Educational Diagnoses

Class 6 (Oct 12)
Developing Evidenced based Interventions

Class 7 (Oct 19)
Review: Report Writing; Comprehensive Feedback Conferences

Classes 8 – 15
Issues and questions arising from individual assessments

Class time beyond October 19 will be reserved to provide supervision and feedback according to the needs of the class and individual students. This will be determined by the class as the semester progresses.

The George Mason University Honor Code will be upheld in this course. Please familiarize yourself with it.

If you are a student with a disability and you need academic accommodations, please see me and contact the Disability Resource Center at 703-993-2474. All academic accommodations must be arranged through that office.
Resources Relevant to Interventions:

# Rubric for Scoring Reports

<table>
<thead>
<tr>
<th>AREA</th>
<th>CONTENTS</th>
<th>CAUTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clarity of Writing</td>
<td>Report includes no grammar, syntax or punctuation errors; No professional jargon or “buzz” words; no slang terms unless used by client and these are presented in quotes.</td>
<td>Check for consistent use of present, past and future verb tense and use of pronouns; run spellcheck and grammar check on your final version; Search and destroy your “buzz” words.</td>
</tr>
<tr>
<td>Identifying Information</td>
<td>5 pts.</td>
<td>Double check data, esp. birthdates and age</td>
</tr>
<tr>
<td>Reason for Referral</td>
<td>Who is referring? What are the specific questions for which answers are sought?</td>
<td>Can be short section.</td>
</tr>
<tr>
<td>Assessment Techniques</td>
<td>5 pts.</td>
<td>Include test acronyms, (e.g. WISC-IV) following formal &amp; complete name; italicize titles.</td>
</tr>
<tr>
<td>Background Information</td>
<td>15 pts.</td>
<td>Be alert to include information relevant to the referral question and/or the test findings &amp; recommendations; be sure to attribute source of information.</td>
</tr>
<tr>
<td>Observations</td>
<td>Specifically describe (rather than label) behaviors you observed which could be relevant to the results reported.</td>
<td>Include your assessment of the validity of results and reasons for your judgment (this can be in a separate short section if you wish)</td>
</tr>
<tr>
<td>Test Results</td>
<td>25 pts.</td>
<td>Work on integration of data from all sources; Include brief descriptions of each test and relevant subtests. First time mention of particular tests, full title is included. Thereafter, acronym may be used; Double check scores transcribed from appendix for accuracy.</td>
</tr>
<tr>
<td>Summary and Conclusions</td>
<td>10 pts.</td>
<td>This highlights the take-home points of the assessment. Note: Some readers look only at the summary and recommendation sections.</td>
</tr>
<tr>
<td>Recommendations</td>
<td>Relevant to both referral questions and findings.</td>
<td>Tie recommendations to findings. If you find a particular area of deficit, be sure to offer a strategy or intervention relevant to that deficit. Good intervention resources are invaluable here, as is your own judgment.</td>
</tr>
<tr>
<td>Score Summary</td>
<td>5 pts.</td>
<td>Double check for accuracy of scores and transcription from protocols; organize the scoring tables in the same fashion as your narrative – use same headers.</td>
</tr>
</tbody>
</table>

5 pts.

15 pts.