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| **SASC Feedback Proforma for the Review of a Diagnostic Assessment Report** | | | |
| **Member Name:** | **APC No:** | | |
| **Date:** | | |
| **This report demonstrates that** | **Criterion Met**  **(2)** | **Criterion met in part**  **(1)** | **Criterion not met**  **(0)** |
| 1. Confidentiality is maintained throughout the report. |  |  |  |
| 1. The assessor has a thorough understanding of how cognitive processing contributes to the identification of the SpLD/s under consideration. |  |  |  |
| 1. A range of background information has been gathered from a variety of sources and that this has been used to inform the assessment and the diagnostic decision. |  |  |  |
| 1. Age appropriate assessment materials have been chosen to cover all core components as relevant to the SpLD(s) under consideration (note that where adults are over 25, and no appropriate adult-normed test is available, tests can be used diagnostically, without quoting standard scores or level descriptors). |  |  |  |
| 1. Information in the report reflects that tests have been administered correctly and all scores are calculated, converted and reported with 100%. accuracy. |  |  |  |
| 1. There is a thorough understanding of statistical terms and of different scoring systems used by different tests and subtests. |  |  |  |
| 1. Judicious and accurate use is made of relevant statistical data within test manuals (for example prevalence). |  |  |  |
| 1. Scores are related to the average with consistency and unexpected differences in performance are acknowledged and discussed. |  |  |  |
| 1. Scores are accompanied by relevant qualitative analysis, observation and evaluation of performance, noting the possible effect on test performance of any compensatory strategies that might have been used. |  |  |  |
| 1. All information is drawn together to provide a clear interpretation and synthesis of the assessment evidence |  |  |  |
| 1. The diagnostic decision is clearly stated and supported by evidence contained within the report, including the background information. |  |  |  |
| 1. The diagnostic decision is mapped to an up to date and recognised definition of the SpLD(s) under consideration. |  |  |  |
| 1. The impact of the identified SpLD(s) on the individual is recognised and outlined. |  |  |  |
| 1. Recommendations are clear and individually tailored. |  |  |  |
| 1. Accessibility has been considered for the non-specialist in terms of sensitive and professional language, format and length. |  |  |  |
| **Additional comment** (if any)  Mark: ?/30 (?%) | | | |

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| **APC Renewal Application Outcome** |
| **CPD:** Approved/Not Approved(comment if necessary)  **Diagnostic Assessment Report:** Approved/Not Approved |

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| **Action** |
| If the report has not passed issuing body to complete this action box to reflect next steps.  We hope you will find our review useful in your future practice.  If you have any questions on this feedback please feel free to contact the office at [email](mailto:info@patoss-dyslexia.org) of issuing body and we will gladly do all we can to help.  **Thank you for your application and your ongoing support of name of issuing body.** |

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| **Important Note** |
| This review is intended to be constructive to support development of professional skills in this specialist area. You should be mindful that any report can be called as evidence in a court or tribunal and so care must be taken to ensure that they would stand up well to such scrutiny. |