389 of 672 OMTARIO HOSPITAL SCHOOL ORILLIA

ANNUAL

PSYCHOLOGICAL ASSESSMENT

Name:

Date: September 3, 1975

No:

Birth dates September 8, 1961

Educations

A.A.M.D. Level:

severe

			TESTERESULTS				
TESTS		C.A.	Mo Ao	- I.Q			OTHER
				Verb	Perf	Full	O.J. E. E. L.
Kuhlmann		14-0	16 mon.				
Vineland Social		14-0	2-5 yrs.	THE COLUMN TWO IS NOT		Constant of the second	
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revious Tests	Date						Special Conditions
Kuhlmann	6/2/74	12-5	15-5				(no speech used)
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Referral Information

was admitted to this facility on December 3, 1973. Both his father and mother are recorded as having schizoid personalities and have received psychiatric counseling. His father has rather unusual differences in I.Q. scores - Verbal I.Q. 130 and Performance I.Q. 106.

His mother had 11 pregancies of which 7 are alive and all are recorded in the file as having "problems", schizophrenia tendencies. The conditions in the home were reported by social worker as "bad".

Thomas, our resident, has a history of delayed milestones, for example he walked at 32 years. There is an early history of wanting to be alone and the parents stated that he would cry when handled.

He was made a ward of the C.A.S. in August 1965 and went to the Sunbeam Home. He was withdrawn at this home, would sit in the corner, was not a behaviour problem. (He could successfully ride a bike at this home.)

The E.E.G. of January 1974 is a normal record.

Etiology: heredity. Medical Diagnosis: severe mental retardation due to heredity, biological conditions.

Thomas does not use speech to communicate.

Discussion of Conclusions

came with his counsellor for the assessment. This proved to be beneficial as is rather shy of strangers. He found it extremely difficult to relate to the psychometrist. In all the sub-tests he would cover his eyes with his hands or arm and he seemed to be very uncomfortable.

His relationship with his counsellor is well established and he will initiate interaction with some counsellors, however he does not frequently initiate interaction with the counsellors yet. He responds to tickling and in the assessment situation he often would get up and go over to his counsellor and sit on his knee for assurance and security.

He does not interact with his peers very much and no relationships have been noticed. As recorded in his file, he still continues to withdraw and hide behind doors or sit in the corner.

There is no evidence of aggression towards staff or peers.

It was difficult to get to focus on the sub-tests. He did try but he was hindered by his "shyness" covering of his eyes, etc. He was given the Leiter test but this was not appropriate. The Vineland Social Maturity Scale indicates that he is functioning at 2½ years and the Kuhlmann Scale score gives him a Mental Age of 1 year 4 months. These tests do not give an accurate score due to his inability to look at the tasks carefully.

Summary

is a friendly shy fellow. As indicated above, he is not comfortable when eye contact is demanded. He has had a very poor home environment and rejection is indicated during those important years. He is getting attention now and this is still obviously difficult for him to handle. The amount of attention that staff can give is not great due to a large group of children but this is not as important in case as more gradual is best. I would however endorse certain specific time periods when he can get short one to one with a counsellor. His attention span is short and this needs work. The personal relationship periods with the counsellor could possibly help with his poor eye contact, "shyness" (possible insecurity?).

Recommendations

- (1) Short one to one situations with his counsellor on irregular basis, but consistent basis.
- (2) Developmental training in cottage by counsellor or in special D.T. room (short attention span).
- (3) See speech pathologist for ideas and recommendations regarding development of speech.

WAG/mp

Children's Activity Unit Psychometrist.

Appendix

- toilet trained to routine, some accidents

- eating skills good

- attempts to clean teeth now can dress with encouragement
- responds to his name

- enjoys camping

- aware of size differences
- able to match some geometric shapes
- low motivation in developmental training