

DCCI Scholarship for Canadian Students with Disabilities

By: Simone Thorne

My disability has shaped the program I am in but also the person I am today. My whole life, I struggled with reading, writing, math, and interacting with others. Even my parents, friends and teachers had difficulty understanding me. They never how to help me reach my goals. When I was in grade eleven, the bullying I went through as a result of my disability led me to get diagnosed with anxiety and depression and how I was so different from others. I suffered bullying from my peers and teachers for a lot of reasons, such as not being able to sit still during class, for how i said certain words or my inability to socialize with people. I was anxious all the time, especially when it came to making friends. As time went on, I lacked the motivation to attend school and be around others. Not only that, but because of my learning disabilities, it was challenging for me to get caught up with my work since no one was around to help me in school, so a majority of the time, I had to teach myself. At one point, the stress of high school, relationships, and my disability got too much too much for me. I started cutting myself and tried to end my life on multiple attempts because I thought my life wasn't worth anything to others. After receiving professional mental health help, I learned I have Borderline Personality Disorder and ADHD.

I realized that I needed to find new ways to adapt to my diagnoses and my challenges, so I had to learn how to be my advocate, which isn't easy, especially when policies and rules prevent me from receiving the proper accommodations. As time went by, I noticed what I lacked in high school was someone to be my advocate to support me and my mental health challenges. In Grade 12 I had a Special Education Resource Teacher say to me, "I can't use my mental health as an excuse to not come to school" that one phase broke my heart for so long. Now I use it for motivation to help others as a student in the Social Service Worker program at Humber College. One day, I was to build and create a safe and positive environment for students of all backgrounds to be able to access mental health care at school. I want them to have access to social workers and psychotherapists for therapy and counselling, to have a voice to be

heard and give them the tools they need to manage their mental health. I want nurses and psychiatrists to provide physical health advice in nutrition, exercise, stress management, and prescribing medication to help them manage their emotions and feelings. I want to create mental health days as part of absences in school systems because I believe having mental health days can benefit a child's learning and well-being. My dream is possible because I have the drive and motivation, to conquer the impossible. The essay's question was to explain how my disability has shaped my decision to my program of study. I believe my disability didn't shape me. My resilience to stand on my own is what led me to choose a career in social work, because i want to fight for others in the way no one ever fought for me.

Ontario High School Information

Academic Data

Literacy Test: English
Community Involvement: Yes
Highest Education: OSSD
Date Credential Achieved: 2019-06-01
Schools Attending / Attended: Dunbarton High School - 905674

Ontario High School Grades - Total Credits To Date: 31.0

Course Code	Completion Date	Mark	Mark Type	Credit	Course Status	Delivery Type	Course Type	Notes	Mident Code
HHG4M9	201906	92	Final	2		Other	Co-Op Out of School	C	905674
IDC4U3	201906	90	Final	1		Day	Regular	I	905674
AMT4M1	201901	96	Final	1		Day	Regular		905674
ENG4C1	201901	82	Final	1		Day	Regular		905674
HHG4M1	201901	88	Final	1		Day	Regular		905674
ENG3C1	201806	82	Final	1		Day	Regular		905674
HFC3M9	201806	89	Final	2		Other	Co-Op Out of School	C	905674
SBI3C1	201806	71	Final	1		Day	Regular		905674
AMT3M1	201801	94	Final	1		Day	Regular		905674
GPP3O1	201801	91	Final	1		Day	Regular		905674
HFC3M1	201801	77	Final	1		Day	Regular		905674
MBF3C1	201801	66	Final	1		Day	Regular		905674
OLC4O1	201708	72	Final	1		Summer	Regular		980420
AMV2O1	201706	88	Final	1		Day	Regular		905674
CHC2P1	201706	88	Final	1		Day	Regular		905674
HFN2O1	201706	90	Final	1		Day	Regular		905674
SNC2P1	201706	86	Final	1		Day	Regular		905674
BBI2O1	201702	75	Final	1		Day	Regular		905674
ENG2P1	201702	78	Final	1		Day	Regular		905674
GLC2O1	201702	91	Final	0.5		Day	Regular		905674
MFM2P1	201702	84	Final	1		Day	Regular		905674
CHV2O1	201611	80	Final	0.5		Day	Regular		905674
AMI1O1	201606	83	Final	1		Day	Regular		905674
BTT1O1	201606	77	Final	1		Day	Regular		905674
MFM1P1	201606	71	Final	1		Day	Regular		905674
PPL1O4	201606	75	Final	1		Day	Regular		905674
CGC1P1	201602	84	Final	1		Day	Regular		905674
ENG1P1	201602	85	Final	1		Day	Regular		905674
FSF1P1	201602	76	Final	1		Day	Regular	F	905674
SNC1P1	201602	76	Final	1		Day	Regular		905674



Simone Thorne <simonethorne7@gmail.com>

Your Offer Has Been Confirmed: Next Steps

1 message

Humber College <noreply@humber.ca>
To: simonethorne7@gmail.com

Tue, Mar 1, 2022 at 7:20 AM



Humber Number: **N01357213**

Program: Bachelor of Social Science Addictions and Mental Health

Campus: Lakeshore Campus

Term: September 2022

Semester: 1

Hi Simone,

Thank you for confirming your offer of admission to the Bachelor of Social Science Addictions and Mental Health program at Humber College! Here are your next steps to keep you on track before classes begin.

Pay Your Tuition Deposit

Your non-refundable tuition deposit will secure your seat in your program. Your deposit can be paid through [MyHumber](#). For more information about making payments, visit humber.ca/fees.

Pay Your Tuition Balance

Your tuition balance must be paid, or arranged to be paid, before registering for classes. Your fee invoice will be available on MyHumber after your tuition deposit is paid. Visit humber.ca/fees for more information.

Register for Classes

Prepare for registration by exploring the Registration Road Map at humber.ca/registration.

Apply for Transfer Credit(s)

If you have completed similar courses at another recognized postsecondary institution, you may be eligible to apply for transfer credit(s) towards your Humber program. Use our step-by-step guide and online database to get you started. For more information, visit humber.ca/transferoptions.

Check the Academic Calendar

Keep track of important dates like registration, Orientation, mid-terms, deadlines and holiday closures using the [Academic Calendar](#).

Should you have any questions, please contact enquiry@humber.ca or call us at 416-675-5000 with your Humber student number.

Thank you for choosing Humber!

Regards,

Admissions Department
Humber College Institute of Technology & Advanced Learning

4/29/22, 8:42 PM

Gmail - Your Offer Has Been Confirmed: Next Steps

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Ontario

Driver's Licence
Permis de conduire

ON
CANADA



1,2 NAME/ NOM

THORNE,
SIMONE, MARIE
768 SUNBIRD TRAIL
PICKERING, ON, L1X 2X4

4d NUMBER/
NUMÉRO

T3613 - 71660 - 15703

4b ISS/ DEL

2021/03/10

4b EXP/ EXP.

2023/07/26

5 DD/ RÉF

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16 HGT/ HAUT.

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Simone Thorne

Simone Thorne

CBM Psychological & Counseling Services
6-1250 St Martins Drive
Pickering, ON L1W 0A2
Tel: 905-492-1152/Fax: 905-492-3192
Email: admin@cbmpsychologicalservices.com

PSYCHOLOGICAL ASSESSMENT

NAME: THORNE, Simone
DATE OF BIRTH: July 3, 2001
AGE: 20 years, 0 months
SCHOOL: Humber College; 1st year Social Service Worker Program
DATES INVOLVED: July 26, August 8 & 17, 2021
DATE OF FEEDBACK: August 27, 2021
DATE OF REPORT: August 23, 2021

REASON FOR REFERRAL

Simone requested the current assessment to gain an updated understanding of her learning profile and social emotional functioning. She has pre-existing diagnoses of social anxiety, Major Depressive Disorder and PTSD and wonders whether she may also have ADHD. Specifically, she hopes the current assessment will clarify what supports she will benefit from during her post secondary studies.

ASSESSMENT PROCEDURES

Interview with Simone

Adult History Questionnaire completed by Simone and her mother.

Beery Test of Visual Motor Coordination (VMI), Sixth Edition

Conners' Adult ADHD Rating Scales (CAARS) (Observer/Self)

Conners Executive Function Inventory - Adult (CEFI-A) (Observer/Self)

Wechsler Adult Intelligence Scale - 4th Edition (WAIS-IV)

Wechsler Individual Achievement Test - III (WIAT-III) Selected Subtests

Wide Range Assessment of Memory and Learning - 2nd Edition (WRAML2)

Symptom Checklist 90-Revised - (SCL-90-R)

Borderline Symptom Checklist – (BSL-23)

Brief Inventory of Psychiatric Functioning- (B-IPF)

Document Review/Additional Sources of Information

Lakeridge Health Urgent Care Consultation Note (Aug 10, 2020)

Lakeridge Health Day Treatment Discharge Report (Feb 21, 2020)

Developmental Pediatrics Consultation Reports by Dr. Clive Schwartz (Jul 2011- Jan 2012)

DDSB Academic Assessment (June 22, 2009)

DDSB Speech & Language Assessment Reports (2008 & 2010)

Grade 12 School Reports and Individual Education Plan (IEP)

- CONFIDENTIAL -

BACKGROUND INFORMATION

Simone lives in Pickering, Ontario with her mother Jennifer, stepfather Kyle, 21-year-old sister and 13-year-old brother. Her sister is a 2nd year student studying Psychology at York University; her brother is a grade 7 student within the Durham District School Board. Both parents are employed full time. Simone is currently in a relationship for 2 months. She describes her home life as stressful since the start of the pandemic. Before, her family members had been busy with sports and extra-curricular activities, now they are all working and studying from home. Simone reports that there are also other stresses related to finances as her mother was unable to work for a while during Covid. She and her sister help out by contributing financially to the household expenses. As well, everyone helps with the household tasks.

Simone was born in Ajax, Ontario. She reports that her mother had a highly stressed pregnancy given severe morning sickness, relationship difficulties with her biological father and caring for her older sister who was a toddler at the time. Simone was born naturally weighing 7 pounds, 6 ounces. Developmental history reveals that Simone experienced delays in her motor and language milestones. She was late with crawling and walking and she was at the lower end of the charts for height. She was also late with talking. Simone stuttered, struggled with her pronunciation and was difficult to understand. Simone was referred for and received speech and language therapy services from the JK until grade 3. Simone describes that she had a lot of separation anxiety as a baby as a result of the relationship difficulties between her parents. Related to this, she began to exhibit behaviour problems at approximately 2-3 years of age that included as biting, hitting, and wetting her clothes, coinciding with her mother leaving her biological father.

In terms of her medical history, Simone has asthma and reports that she sustained a concussion in 2017. Her vision was last assessed in June 2020, and she wears prescription glasses. Her hearing has not been recently assessed but is assumed to be within normal ranges. Simone currently takes prescription medication for depression (Sertraline 150 mg and Mirtazapine 15 mg) that is being prescribed and managed by her GP Dr Shaw. In terms of her appetite Simone reports that she struggled with starving herself and with binge eating when in high school due to body image issues and to a bad relationship. Since then, she tries to practice more positive behaviours such as working out but sometimes still struggles with poor appetite. Simone further reported a history of sleep walking that stopped around grade 9. She currently has problems falling asleep though her medication helps with this.

Simone describes her social functioning as difficult from time to time. However, with treatment, she now feels comfortable with her relationship skills as evidenced by her new romantic relationship. Further, despite her history of difficulty making friends, she had made two friends from her current college, and she still has her best friend whom she has known since grade 7.

In terms of her current functioning, Simone also works part time as a student ambassador with Humber College. Overall, she is able to conduct her day-to-day activities, although she does get easily distracted and can have a hard time sitting still. Before Covid she worked out 5 days a week at the gym which also helped with her depression. She is also able to cook for herself and she reported that she takes great care in her personal hygiene.

Assessment/Treatment History (not exhaustive)

- June 2008 – At 6 years of age while in grade one, Simone completed a Speech and Language Assessment through her school board (DCDSB) given concerns about a history of speech, language, and phonological awareness. The aim of the assessment was to reassess her skill levels and recommend appropriate programming and support. Simone had previously received services in 2007 through the Durham Pre-school speech and Language therapy program. Namely, she had taken part in a block of therapy with the Communication Disorders Assistant to address her expressive grammar, understanding of concepts and phonological awareness. Also in 2007, Simone participated in group therapy focusing on phonological awareness skills. Results found that the majority of Simone's skills were within the normal limits, however these were not being transferred to practical situations such as during conversations and in the classroom.
- June 22, 2009 – Shortly after moving to the Durham District School Board (DDSB), Simone was referred for an academic assessment due to difficulties with the grade 2 curriculum, specifically in reading, writing and numeracy. Results found that she had average oral language skills and that her understanding of math concepts was also good. In contrast, areas of need were found in reading and writing.
- May 2010 – While in grade 3 Simone again completed an updated Speech and Language Assessment with the DDSB due to delays in her academic functioning. Results of this assessment found that Simone had areas of both strength and difficulty. She struggled with verbal problem solving but performed better when problems were visually based. Further, her comprehension, auditory processing, auditory memory, expressive language, and phonological awareness were still areas of need impacting her writing skills.
- July 2011 - January 2021 - Simone and her parents attended 2 consultation appointments with Dr. Clive Schwartz, developmental pediatrician. The first consultation was related to concerns about Simone having a Central Auditory Processing disorder. The second was to evaluate the results of a blind medication trial for ADHD. The initial test over a period of one month suggested that she responded positively while on medication versus placebo. At the time, recommendations to have Simone complete a psychological assessment and complete a longer trial that would be monitored by the testing psychologist did not seem to come to fruition.
- March 2018 – June 2020 – Simone participated on and off in individual treatment with Kanae Li at this practice (CBM Psychological Services), including a psychological evaluation with this writer to assess for Borderline Personality Disorder. Simone was found to exhibit traits of this disorder and was referred for a second opinion with a psychiatrist. The treatment at CBM later transitioned to EMDR therapy with Alice Tu but ended in August 2020 when Ms. Tu went on a leave of absence. At that time, Simone began working with private EMDR therapist Alana Hunt.

- November 2019 – Psychiatric Evaluation with Dr. Parmer of Durham College - see below (report not provided or reviewed).
- February 2020 – Letter confirming Simone's participation in the Mental Health Day Treatment Program at Lakeridge Health from January 6 to February 28, 2020. This intensive program required her to attend group treatment 3-5 days/week from 9am to 12 pm.
- July 2020 – Simone was referred by her family doctor to the Lakeridge Mental Health Urgent Care clinic for diagnostic clarification. At the time of her referral, she was taking Zoloft 100mg and Mirtazapine 15 mg daily. She first saw the clinic nurse in June for her initial intake. This was followed by an appointment with psychiatrist Dr. Ojiegbe. It is noted that both appointments took place by phone due to the Covid pandemic. At this assessment, Dr. Ojiegbe confirmed that Simone's major depressive disorder with significant anxiety was in remission. She also confirmed that Simone did not have Borderline Personality Disorder but that even those traits that had been identified earlier were also in remission. Of note, during this assessment Simone shared with Dr. Ojiegbe that she has previously been diagnosed with depression, anxiety and PTSD and Borderline Personality traits by Dr. Parmer, psychiatrist at Durham College in November 2019.
- August 2020 – Trauma (EMDR) therapy with private therapist, Alana Hunt.

Academic History

Simone attended St Isaac Jogues Catholic school within the DCDSB from JK to grade 1. She next attended Gandatsetiagon Elementary school (DDSB) for grades 2-8 after the family moved to a new home. For grade 6, it is noted that she took part in the board's Special Education program at Vaughn Williard Public School. After graduating elementary school, Simone attended Dunbarton High School from grade 9 until her graduation in grade 12. Throughout her school years from JK to grade 12, Simone experienced learning issues. These were identified as a Learning Disability in grade 2 following a Speech and Language assessment. It is noted that Simone began struggling with social anxiety in grade 7, with depression in grade 11 and with self-harm tendencies and suicidal ideation in grade 12. Despite her struggles, Simone's grade 12 report cards indicated that she was a straight A's student during that year. Transitioning from applied to college level courses in grades 11 and 12, she typically attained scores in the 80's or 90's, from 82 in English to 96 in musical Theatre and Interdisciplinary Studies.

Simone's IEP was developed based on the results of her 2010 Speech and Language assessment. It was found that she required the use of visual supports, the modelling of proper speech, the explicit teaching of memory skills, the use of a scribe and computer aids. Simone's placement indicated regular class with indirect support. Simone's strengths were described as: the use of oral language; skills for applying math concepts to problem solving with visuals; skills for the use of good work habits and effort; writing fluency skills with assistive technology, and computer navigational skills. In comparison, her areas of needs

were described as: reading skills; math calculation and fluency skills; expressive language skills, and phonological awareness skills.

After graduating High School, Simone attended Durham College for one semester during which time she was referred to the day treatment program at Lakeridge Health. She later resumed her studies at Humber College where she is currently completing a 2-year Social Service Worker Diploma. Upon graduation from this program, Simone has plans to transition to University to complete a Social Work degree.

OBSERVATIONS

Simone arrived on time for her scheduled appointments. She was casually and appropriately dressed, and she wore the required face mask. Simone wore glasses throughout each testing session. Simone presented as a willing and cooperative participant during both testing sessions. She shared that memory tasks were difficult for her, and she used tallies and visuals to support her math problem solving. When faced with challenging tasks, she at times visibly struggled (e.g., sighing, rubbing her forehead). It was observed that she was also out of breath after reading the second of the two oral reading fluency passages. In contrast, she worked very hard on the written output portion of the assessment, planning ahead before beginning her essay task, working quickly, and trying to write a whole page. Overall, Simone demonstrated good stamina and effort. As such, assessment results are deemed to be a reasonable estimate of her current levels of functioning.

RESULTS AND INTERPRETATION

Cognitive/Intellectual Functioning

The Wechsler Adult Intelligence Scale - Fourth Edition (WAIS IV) was administered to Simone to determine her level of cognitive functioning relative to Canadian adults her age. The assessment results are presented as percentiles for ease of comparison (*classification chart attached as an appendix*). Results between the 25th and the 75th percentiles are considered to be within the Average range. For example, a result at the 50th percentile indicates that 50 out of 100 same aged individuals attained a score below that of the examinee and 50 out of 100 attained a score above that of the examinee.

Simone's intellectual abilities were developed in a variable manner. In fact, there was a significant discrepancy among the indexes making up her full-scale IQ, rendering this score an invalid indicator of her abilities. Instead, her verbal comprehension skills can be seen to best represent her cognitive functioning. Simone's individual index scores will be described separately below.

WAIS-IV Scale	Percentile Rank	Descriptive Range
Verbal Comprehension	13 th	Below Average
Perceptual Reasoning	9 th	Below Average
Working Memory	1 st	Well Below Average
Processing Speed	2 nd	Well Below Average

General Ability Index	8 th	Below Average
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Simone's performance within the **verbal comprehension** domain, which measures verbal concepts and reasoning skills, vocabulary knowledge, and general fund of information, reflected adequate abilities, and were consistently developed. Her performance when required to find the underlying relationships between word pairs spoken by the examiner fell at the 16th percentile. She attained a score at the same level on tasks requiring her to define common vocabulary words and to answer factual, school-based questions (16th percentile respectively).

Simone's **perceptual reasoning** skills, measuring visual-spatial and non-verbal reasoning, reflected more variable abilities. She performed within the Low Average range (16th percentile) on two tasks; one assessing her ability to indicate which shapes could be used to recreate a visual puzzle and one requiring the completion of increasingly complex matrices by selecting a response from an array. On a third task, when provided with a model of a geometric pattern and asked to reproduce the pattern with coloured blocks as quickly as possible, she attained a score at the 9th percentile.

Simone's auditory **working memory**, (i.e., her ability to encode, manipulate and retrieve verbal information) was developed in the Well Below Average range overall. Her ability to remember increasing sets of numbers forwards, backwards and in sequence was a significant area of need (<1st percentile), while her ability to complete mental math problems was Below Average (5th percentile).

Simone's **processing speed** (i.e., the speed at which she can quickly complete simple visual-motor tasks) was also an area of significant need. She struggled to quickly scan a page to find matching symbols (2nd percentile) and to copy symbols from a legend (5th percentile).

Learning and Memory

The Wide Range Assessment of Memory and Learning, Second Edition (WRAML-2) was administered to assess Simone's memory skills in greater detail. The results obtained during testing are presented in the following table:

WRAML-2 Index	Percentile Rank	Descriptive Range
Verbal Memory	12 th	Below Average
Visual Memory	8 th	Below Average
Attention/Concentration	1 st	Well Below Average
General Memory	2nd	Well Below Average
Verbal Recognition	27 th	Average
Visual Recognition	14 th	Below Average
General Recognition	16th	Low Average

A more detailed analysis of Simone's memory functioning revealed that her general memory, to recall information that she had heard or seen, was significantly weak (Well Below Average range).

Within the **verbal memory** domain, Simone demonstrated Low Average ability (16th percentile) to recall the details of stories read to her (meaningful information) and a list of unrelated words (unstructured information). When assessed after a short delay she demonstrated a slight improvement in her recall of details of the stories (25th percentile; Average range) while her recall of the list of words fell to the 9th percentile. However, she was better able to recognize this same information when assessed with multiple choice questions (Stories; 16th percentile and List of Words; 50th percentile). The latter represents an area of personal strength in her profile.

Within the **visual memory** domain, Simone struggled to recall the details of abstract drawings (5th percentile; Below Average range). She performed more strongly to recall the details of picture cards with social scenes (25th percentile; Average range). Her ability to later recognize this same information was relatively consistent. She attained a score at the 9th percentile on the drawings and at the 37th percentile on the pictures. As such, her long-term recall for visual details represents a personal strength.

In terms of her **attention and concentration**, Simone's auditory sequencing skills (to repeat letter number combinations that she heard) were very weak (2nd percentile; Well Below Average range). Recalling visual sequences that were shown to her was similarly weak (2nd percentile). Overall, Simone's short-term memory skills are consistent weak in line with her working memory skills scores seen on the WAIS-IV.

Visual-Motor Integration

Results from an independent paper-and-pencil task requiring the copying of designs revealed that Simone's visual-motor integration skills were a significant need in her profile (3rd percentile). Yet, when the separate components of these skills were assessed, she demonstrated stronger abilities in the Low Average range tasks of visual perception and motor coordination (both 18th percentile). Assessment observations revealed that Simone worked more slowly to increase her accuracy on the motor coordination task.

Academic Testing – Reading, Writing and Math

Simone completed the Wechsler Individual Achievement Test-Third Edition (WIAT III) to provide a measure of her academic abilities. Simone's results reveal a variable academic profile, with her scores varying from the Average to the Well Below Average range. Her results are presented in the following table:

WIAT III Subtest	Percentile	Descriptive Range
Listening Comprehension	18 th	Low Average
Oral Expression	10 th	Below Average
Word Reading	9 th	Below Average

Reading Comprehension	4 th	Below Average
Pseudoword Decoding	<1 st	Well Below Average
Oral Reading Fluency	5 th	Below Average
Spelling	4 th	Below Average
Sentence Composition	13 th	Below Average
Essay Composition	47 th	Average
Mathematics Problem Solving	12 th	Below Average
Math Computation	2 nd	Well Below Average
Math Fluency - Addition	2 nd	Well Below Average
Math Fluency - Subtraction	1 st	Well Below Average
Math Fluency - Multiplication	2 nd	Well Below Average

Reading:

Simone's reading skills were developed in the Below Average range overall and reflect a significant need in her profile. Her ability to read individual words in isolation and to correctly pronounce pseudowords (i.e., made-up words) based on their phonetic content were both Below Average (9th & 1st percentiles respectively). Similarly, tasks assessing Simone's reading comprehension and reading fluency were equally challenging for her. On the reading comprehension task, Simone struggled to understand passages and had difficulty drawing inferences from what she had read (4th percentile). On the reading fluency task, requiring her to read to passages aloud and answer one question about each, she visibly fatigued with the effort this required. Overall, Simone's reading abilities are weaker than expected based on her WAIS-IV verbal comprehension skills.

Mathematics:

With Below Average results overall (5th percentile), Simone's math skills reflected another area of significant need in her profile. On the subtests assessing her skills, Simone scored in the slightly Below Average range (12th percentile) when required to complete math problems in a booklet. A second math task requiring applied understanding of "real world" math problems was much more challenging. Here Simone attained a score in the Well Below Average range (<1st percentile). Simone's math fluency, or the speed at which she can complete simple calculations in her head was also significantly weak, in the Well Below Average range. Her weakness in this area was consistent with her weak processing speed.

Written Expression:

In contrast to her weak reading skills, Simone's best performance was seen on tasks of written language, though her scores were highly variable. She struggled to correctly spell a list of common English words (4th percentile) but demonstrated areas of strength on tasks of sentence and essay composition. Simone completed two tasks that comprise the Sentence Composition Index. On the sentence combination task requiring her to combine multiple sentences into one new sentence without changing the meaning, she

attained a score in the Below Average range (5th percentile). Simone performed well on the easier items requiring her to combine two sentences but struggled when the items required her to combine three sentences into one. In contrast, Simone's ability to create original sentences, using appropriate vocabulary and writing conventions was strongly developed in the Average range (32nd percentile). Here she demonstrated the ability to create semantically and grammatically correct sentences. On the essay composition task, Simone again demonstrated Average ability to organize and compose her ideas in a longer composition. Simone really tried her best on this task, planning out her thoughts before beginning her essay, and working as quickly as she could to complete it within the allotted time. Analysis of her finished product revealed that despite a number of grammatical errors, she nonetheless has a strong grasp of typical writing conventions. Her essay included an introduction and conclusion, and she made use of transitions and elaborations in responding to the question.

Listening Comprehension and Oral Language:

Simone demonstrated various areas of strength in these two domains. The Listening Comprehension domain included a task which measured Simone's receptive vocabulary (her ability to understand the 'gist' of isolated words). This was strongly developed in the Average range (53rd percentile). In sharp contrast, her ability to answer comprehension questions based on short orally read passages was an area of notable weakness (5th percentile).

Simone's performance in the Oral Language domain also revealed variable abilities. She demonstrated Average ability to quickly retrieve verbal information from long term memory (oral word fluency). However, her expressive vocabulary and sentence repetition skills (to repeat target sentences of increasing difficulty) were slightly Below Average. Simone's weak working memory skills likely impacted her performance on this latter task.

Overall, Simone demonstrates areas of strength in her written expression skills but significant areas of need in her reading and math abilities.

Attention and Executive Functioning

To assess Simone's attention and executive function skills, results of the Conners Adult ADHD Rating Scales (CAARS) and the Comprehensive Executive Function Inventory - Adult (CEFI-A) completed by her and her mother were evaluated. Executive function refers to a collection of processes that direct and manage cognitive, emotional and behavioural function (i.e., attention; emotion regulation; flexibility; inhibitory control; initiation; organization; planning; self-monitoring and working memory). Results reported below highlight areas of strength and/or difficulty. Both self-report and observer forms were completed in a valid manner.

Results of CAARS self-ratings revealed significant elevations on the scales measuring impulsivity and emotional lability, hyperactivity/restlessness, self-concept, and inattention. The scale measuring ADHD index was also clinically elevated. In comparison, observer ratings revealed elevated concerns on the scales measuring inattention/memory, DSM-5

inattentive symptoms and ADHD Index (a measure of individuals at risk for ADHD). Significant and elevated ratings were also seen on the scales measuring self-concept.

With respect to Simone's executive function skills, results of the CEFI-A self-ratings revealed an overall score in the Low Average range by Simone, suggesting that she sees herself as struggling somewhat with her executive function skills. In contrast, her mother reported her executive function skills as Average. Both raters agree that emotion regulation was a significant concern for Simone while Simone additionally reported significant concerns with attention and working memory.

Altogether, results of clinical interview, client history and assessment measures are reflective of a profile consistent with significant difficulties with attention. Specifically, Simone completed a medication trial at 10 years of age that revealed a positive response to medication versus placebo. Further, there is evidence of ongoing attention difficulties including significant inattention, distractibility, and emotional lability as well as difficulties with weak working memory that continue to significantly impact Simone's functioning. While it cannot be ruled out that Simone's mental health struggles have also mimicked symptoms typically associated with ADHD, she has taken part in various therapies including trauma therapy that she has greatly benefited from. Assessment of Simone's executive function, skills that are typically also impaired within an ADHD profile suggested some struggles in this area. As such, Simone's longstanding and ongoing difficulties with inattention as seen by both herself and her mother are sufficient to meet criteria for a diagnosis of **Attention Deficit Hyperactivity Disorder (ADHD) – Inattentive Subtype**. Given this diagnosis, Simone is encouraged to consult with her family physician to discuss possible treatment methods, including the options for a follow up medication trial. As well, Simone will require academic accommodations when she resumes her studies.

Social-Emotional Functioning

As previously noted, Simone's pre-existing diagnoses of Major Depression with anxiety as well as her Borderline Personality Traits were deemed to be in remission at the time of her 2019 psychiatric assessment. However, given her current increased levels of emotional distress, she hoped to have an updated evaluation of her current social and emotional functioning. Simone completed the SCL-90, the Borderline Symptom List (BSL-23), the Brief Inventory of Psychosocial Functioning (B-IPF) and the Sentence Completion Test, a projective measure that is designed to minimize socially desirable responses.

Overall, assessment results confirmed that with the help of trauma therapy Simone has seen a substantial reduction in the level of her PTSD symptoms, suggesting that her PTSD can also be deemed to be in remission. However, assessment results also showed that she is currently under a significant amount of psychological distress. Information garnered from clinical interview revealed that Simone has recently been struggling with a number of changes in her life, in part due to the effects of the Covid pandemic. Her home functioning, her studies, and the relationship with her boyfriend have all been impacted rendering her less able to cope. Thus, while Simone's depression, anxiety and PTSD symptoms were being well managed with medication and psychotherapy, she has experienced a flare up in these symptoms for which she will require an increased level of support. Similarly, a number of borderline traits and tendencies were also noticeable in her current day to day functioning

however, it was encouraging to note that Simone does her best to keep these at a manageable level. Simone is no doubt benefiting from a variety of positive factors in her life. For example, assessment results revealed that Simone has a very close attachment with her family members and that she has set a number of life goals for herself. Nonetheless, given the increased level of stress she is currently under as she struggles to adjust to these recent life changes, she will be aided by connecting as soon as possible with a therapist for individual counseling support.

SUMMARY AND FORMULATION

In summary, Simone is a 20-year-old 1st year Social Service Worker student at Humber College who requested the current assessment to have a better understanding of her current levels of functioning. Simone was previously diagnosed with a Learning Disability and with PTSD and Major Depression with Anxiety, the latter deemed to be in remission following a 2019 psychiatric assessment. Throughout testing, Simone was a willing and motivated participant, and she demonstrated many positive behaviours indicative of good effort.

Cognitively, Simone demonstrated a variable profile of skills that varied within the slightly Below Average to Well Below Average range. Given this variation, her verbal comprehension skills (slightly Below Average) were deemed to be the best measure of her cognitive functioning. Within this domain she demonstrated a relative strength (Low Average range) in all areas assessed (i.e., vocabulary, fund of language and ability to finding commonalities between word pairs spoken by the examiner). In line with her cognitive scores, Simone similarly demonstrated a relative strength in her long-term memory skills, especially in her ability to recall verbal information (verbal recognition; Average range).

In comparison, Simone's visual perceptual skills were Below Average but were variable. She demonstrated relative strengths in copying visual patterns and in perceptual organization but struggled to predict visual patterns. As such, she would be expected to struggle more on visual tasks especially if these are not supported with verbal descriptions.

In contrast to the above, Simone's cognitive proficiency, a measure of her processing speed and working memory skills were significantly weak in the Well Below Average range. In terms of functional implications, Simone will struggle significantly to efficiently process information when problem solving compared to her same aged peers. For example, given her slow processing speed, she will struggle to copy material onto paper quickly, to accurately, produce charts and/or diagrams, and to notice visual details with relative ease. Similarly, students with working memory problems typically struggle to simultaneously process information. This can be seen when required to listen to a lecture while summarizing and recording the information, in difficulty sustaining attention, and in difficulty processing and/or recalling large amounts of verbal information.

Academically, Simone demonstrated a variable profile. Her strongest performance was seen on tasks of written expression (i.e., essay and sentence composition) and in her oral language skills (i.e., receptive vocabulary), while her overall reading and math skills represented areas of significant need. A more detailed analysis of her scores revealed that she struggled greatly on a spelling and a reading decoding task which likely further impacted her oral reading fluency and reading comprehension skills. Similarly, she

struggled on a math computations and math fluency task, results that were not surprising considering her noted weakness in processing speed and working memory. Based on the above, Simone's results are sufficient to meet criteria for a diagnosis for a **Specific Learning Disorder in reading and math**.

Assessment of Simone's attention and executive function skills revealed evidence for longstanding and ongoing difficulties with attention and some aspects of executive function sufficient to meet criteria for a diagnosis of **Attention Deficit Hyperactivity Disorder (ADHD) – Inattentive Subtype**. Further, in terms of her social and emotional functioning, assessment results suggest that Simone has worked hard on accessing treatment over the years, resulting in several of her diagnoses going in remission. She is currently facing a flare up of some of these symptoms, however, with extra support, it is expected that she will again be able to successfully manage them. Simone has namely shown herself to be a very motivated, hardworking, and capable young woman. Despite her years of emotional struggles, she continues to be gainfully employed, and she has successfully pursued her studies, taking time out as necessary to attend treatment programs. In this she is an excellent advocate for her herself. It is expected that Simone will continue to make good progress in her academic pursuits when provided with learning supports. Based on assessment results, Simone's relative strengths and needs can be described as follows.

Relative Strengths	Relative Needs
<ul style="list-style-type: none">• Verbal Comprehension skills• Verbal Memory for meaningful details• Verbal Recognition• Visual Recognition for meaningful details• Visual Perception/Motor Coordination• Essay Composition/Sentence Composition• Listening Comprehension• Oral Language• Math reasoning• Motivated/Hard worker/Good work ethic	<ul style="list-style-type: none">• Non-verbal reasoning skills• Working Memory• Processing Speed• Visual memory• Visual Motor Integration Skills• Some areas of Executive functioning• Reading Decoding/Reading Comprehension/Oral Reading Fluency• Numerical Operations/Math Fluency• Spelling

RECOMMENDATIONS (To supplement those already in place)

1. Simone is encouraged to meet with her academic advisor within the Accessible Learning Centre at her college to review the current report and discuss the implementation of the recommendations outlined below.
2. Given Simone's learning profile, it will be essential that she have available for her use appropriate technology in order to support her studies. In general, this equipment should include a laptop computer, appropriate software (e.g., Kurzweil

3000; Dragon Naturally Speaking, graphic organizing programs) and training, as needed.

- For Reading, Simone requires **text-to-speech software** which will read aloud scanned or digital text-based documents in order to circumvent difficulties with processing speed. This will enable her to access and showcase her knowledge of curriculum reading materials. This technology will also assist with reading comprehension by allowing repeated reading if needed. The use of active reading strategies/tools, i.e. bimodal input, reference tools and annotation tools will reinforce understanding.
 - The use of **graphic organizers** and appropriate software will be help with organizing ideas as well as for her slow processing speed.
 - **Brainstorming webs** provide structure and focus for thinking and can support the process of breaking down a task and seeing the inter-relationships.
 - **Voice recognition (speech to text) software** will allow Simone to document ideas quickly and unencumbered by writing demands while demonstrating knowledge in written form. **Word prediction software** will assist with spelling and writing fluency and improve the overall writing products.
3. Simone is encouraged to take advantage of any relevant help provided by the Accessible Learning Centre, for example, test taking strategies, time management skills, etc.
 4. Due to the nature and extent of Simone's learning profile, she would benefit from taking a reduced course load.
 5. Due to her Learning Disability, Simone cannot complete written tests and examinations within typically allotted times. When writing is a substantial component of the evaluation process, she requires at least 50-100% extra time. Also, given that instructor's discretion is the usual policy on extensions, and most occur in response to a student's need (rather than as accommodations), preventative efforts are preferred. They should include:
 - a. Earliest possible access to final assignment descriptions.
 - b. Early, brief and frequent instructor consultations on drafts.
 - c. Tutoring/coaching in real-time organizing of written responses
 6. Online resources on teaching and supporting students who struggle with organization and attentional difficulties are available at: www.teachADHD.ca, and Centre for ADD/ADHD Advocacy in Canada, www.caddac.ca. Furthermore, Simone may find the book, **Attention Deficit Disorder** by Dr. Thomas E. Brown helpful.

7. To learn more about the specific challenges for individuals with Learning Disabilities, Simone is strongly recommended to visit the Learning Disabilities of Ontario Website: www.ldao.on.ca.
8. Given weak processing speed, the amount of information Simone is required to copy should be decreased. In this regard, Simone's notetaking during lectures should be supported by having access to a scribe. Also, when possible, Simone would benefit from receiving handouts and other course materials from course instructors in advance.
9. As well, because many professors at the university level post their lecture notes online, when feasible, Simone is encouraged to print and review these prior to each class so that she has an appreciation for the topic of the day and can therefore take only those notes which will provide supplemental information.
10. Simone is also encouraged to record lectures. This will allow her to review the material at a later time and use it as a review for tests and exams.
11. Simone may benefit from sitting in an optimum position in the classroom – one that is close to the instructor and away from external noises.
12. In order to aid Simone in the studying process, she is encouraged to purchase companion study guides for the textbooks of her more challenging courses (some of these are found on CDs which are contained in the back of the textbooks). These study guides will summarize the most important information from each chapter and provide sample questions to test her recall of course material. Study questions contained at the end of each chapter within the textbooks are also useful in helping students target the most salient information from each chapter.
13. Simone may have difficulty analyzing a whole and breaking it down into its component parts. As such, she may become overwhelmed with larger tasks, (e.g., projects) and would require assistance in breaking them down into a series of more manageable, daily sub-tasks.
14. Simone would benefit from employing strategies that can help her monitor her own learning, which in turn, will strengthen her executive functioning. This would include goal setting with explicit, concrete steps, monitoring her progress for achieving these goals in a structured way, and using positive self-talk to complete work. Metacognition, or the act of "thinking about one's own thinking", is one of the most important components of executive functioning. Thus, Simone should aim to develop a plan for her study time, test himself, and challenge himself to integrate new learning with old concepts that she knows she has a strong grasp of.

15. Given Simone's weaker working memory, the use of visual mnemonic devices would be helpful. A good website for examples of these devices is:
<https://psychcentral.com/lib/memory-and-mnemonic-devices/>
16. As well, given weaknesses with working memory and attention, it is recommended that Simone write tests in a separate testing room free of distractions.
17. Wherever feasible, permit the use of faculty approved memory aids for tests/exams.
18. If relevant, permit the use of a calculator during exams.
19. Simone will likely have difficulty processing/integrating/ and/or recalling large amounts of verbal information (for example, oral instructions and lengthy lectures) and difficulty recalling material she has seen. When possible, multi-modal teaching tools should be used when presenting information to Simone, to increase the likelihood of retention given her relative strengths in visual memory. For instance, she would benefit from combining visual information and instruction with verbal information when possible. Visual cues can also be used to help her remember important information. This could include charts, brainstorming maps, simple graphs, pictures etc. Visually highlighting key information within written instructions would also be beneficial. Finally, hands-on, experiential learning is the mode that Simone would be able to encode information.
20. Given difficulties with attention, and working memory, Simone should be exempted from writing more than one exam in one day.
21. As well, due to difficulties memorizing information, where feasible, Simone would benefit from the following exam accommodations: open book exams; a sheet with key terms and/or the options to do online tests at home.
22. Simone may benefit from additional tutoring support. Two organizations that comes highly recommended are teachers on call:
<https://www.teachersoncall.ca/site/home> and Teachers to Go:
www.teacherstogo.ca.

These results and recommendations were discussed with Simone in August 2021. I hope this information is helpful in understanding Simone and in responding to her needs. Please contact the office if there are any questions about this report at 905-492-1152 or by email at cmarscott@cbmpsychologicalservices.com.

Name: THORNE, Simone
DOB: July 03, 2001

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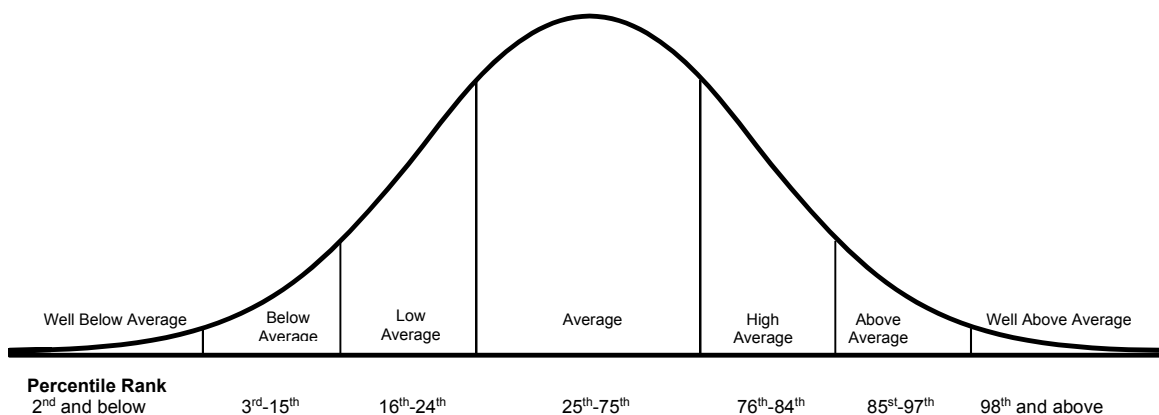


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Classification Codes Used in this Report



PERCENTILE: This score ranks a child's test performance relative to the performance of other children her/her age. Percentiles range from 1 to 99. A percentile score of 20 means that 20 out of 100 children would have scored lower than this child, 80 out of 100 would have scored higher. Percentile scores of 16 to 84 are within the average range.

STANDARD SCORE: A standard score, like a percentile, compares a child's test performance to the performance of other children her/her age. Standard scores from 85 to 115 are within the average range, with 100 as the mid-point. A second type of standard score has 10 as the mid-point, with the average range from 7 to 13.

STATISTICAL SIGNIFICANCE: If a result is called "significant", then there is a statistically high probability that the finding is not due to chance and therefore may be important to note. For example, $p < .05$ means that there is a 95% probability that the finding is accurate and reliable; $p < .01$ means that there is a 99% probability that the finding is accurate and reliable.

ALTHOUGH ACTUAL SCORES ARE REPORTED IN THE TEST DATA SUMMARY, IT IS IMPORTANT TO VIEW THESE SCORES AS BEST ESTIMATES.