

PSY615: Week Three School Psychologist-Based Personality and Behavior Assessment Scenario

PSYCHOLOGICAL EVALUATION

(Johnson Middle School)

Jane Smith

Date of Evaluation: 10/12/2013

Grade: 8

Age: 14

PURPOSE FOR EVALUATION:

Jane was recommended for evaluation by the school psychologist due to recent behavior problems and declining academic performance.

ASSESSMENT PROCEDURES:

The clinical psychiatrist on duty recommended the following assessments:

- Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A)
- Mental Status Examination
- Review of School Records
- Review of Prior Medical Records
- Interview and Observation

ASSESSMENT RESULTS:

Note: Typically, this section reports test results of all the recommended assessments. Here you are provided with the abbreviated results from the MMPI-A, the mental health examination, records review, and interview/observation.

Interpretive results from the MMPI-A are presented below.

Validity Considerations

Jane's approach to completing the MMPI-A was open and cooperative. The resulting MMPI-A results appear valid and is probably a good indication of her present level of personality functioning. Her compliance is a good indicator of positive involvement with this evaluation.

Symptomatic Behavior

This student's MMPI-A clinical profile indicates multiple serious behavior problems including explosive behavior, school maladjustment, and adolescent conduct problems. She can be moody, resentful, and impulsive. Jane also shows signs of adolescent alienation (social isolation), low

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self-esteem, and depression. She may run away or isolate herself to avoid punishment. Her lack of good judgment may lead her to inappropriate behavior and get her into trouble.

Her two highest clinical scales, Depression (D) and Psychopathic Deviate Subscales (Pd), are clearly above the other scales in the measure, and occur at this high a level in less than 1% of the normative sample (by Pearson Assessments).

An examination of her underlying personality factors on the PSY-5 scales could help explain any behavior problems she is currently exhibiting. Jane seems to be self-isolating and appears to have increasing social alienation. She tends to see the world in a negative light, worries to excess, and may develop more belligerent behavior expressions.

Interpersonal Relations

Jane is an intelligent and likeable person. She seems to make a good initial impression on others, but seems unable to build deep and lasting relationships. She is empathetic and gets along with other children younger than her, but seems to have trouble with building positive connections in her peer group.

The MMPI-A Content Scales profile offers some additional information about her interpersonal relationships. She reported some interpersonal suspiciousness, which indicates a distrust of others. She also shows high levels of antisocial attitudes and negative peer-group influences, which might help to explain her emotional outbursts and belligerent behaviors.

Diagnostic Considerations

More information will have to be collected about Jane's emotional and behavioral problems before a complete diagnosis can be made. Her elevated scores on the Psychopathic Deviate Subscales (Pd) suggest that behavior problems should be considered.

She has exhibited at-risk behaviors such as smoking. She acknowledges she had been criticized by her parents for her behavior and should be monitored for potential use of drugs and alcohol.

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Treatment Considerations

Jane's behavior and emotional issues should be central in any treatment planning. Her clinical scales profile suggests she is a good candidate for a behavioral treatment strategy. Consistency will be important to reinforce appropriate behaviors.

She has the potential for drug and alcohol abuse. She has acknowledged such inclinations and intervention strategies should be included in the treatment plan.

She should be monitored and evaluated for potential suicidal thoughts and ideation, and possible suicidal behaviors. Appropriate cautions should be taken if such behaviors become evident.

Jane has shown academic potential and positive interest in some activities. Her skill and abilities, as well as those positive aspects, should be reinforced.

BACKGROUND INFORMATION:

Jane was referred to the school psychologist for evaluation due to recent emotional outbursts in the classroom and lack of academic progress in the most recent 6-week period. She reports having recent troubles with bullying from peers, and often appears sad. Information regarding Jane's developmental progress, family history, school history, and behavior at home was provided by her parents. Jane's developmental milestones were reported to be within normal time ranges. Her parents indicated that she can be trusted, seems to get along well with other children and her younger brother, but often seems restless and is easily frustrated.

School records indicate that Jane had five excused absences due to illness so far this year, and no unexcused tardies. She has been referred for in-school suspension three times for behavioral outbursts in the classroom. Jane's grades consist of mostly C's and she is failing two of her classes. Her writing and readings skills are well above the average for her age, and she seems to work better when working directly with teachers rather than peers.

Records indicate Jane is up to date on required shots, has completed vision and hearing testing, and her physical well-being appears to be in the normal range for her age group.

Her parents have indicated that Jane has been showing increasing signs of frustration and argumentative behavior. They also indicate that she has intentionally missed curfew several times. They also stated that

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they have found her experimenting with smoking cigarettes. Jane's parents seem concerned that her behavior will move beyond their control.

MENTAL STATUS EXAMINATION:

Observational conclusions of the patient's attitude were as follows:

Jane seems to be intelligent and aware of her surroundings and situation. She appears remorseful about her emotional outbursts, but she does not consider her actions to be severe. She was compliant with all parts of the evaluation and stated that she is willing to work with the student intervention team.

Jane stated that her increasing frustration with peers was due to being bullied by some of her peers, and she indicated that she often feels sad and depressed. She stated that she had been experimenting with smoking. Jane stated that she has had thoughts of suicide recently, but she indicated no intention to act. Observation and further assessment is recommended.