

# CHILD HEALTH & EDUCATION STUDY

A national study in England, Wales and Scotland of all children born 5th – 11th April 1970



## SPECIAL TEST BOOKLET

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Under the auspices of the University of Bristol and the National Birthday Trust

PLEASE COMPLETE IN BLOCK CAPITALS

Surname										
Forenames										
Sex	<div style="display: flex; justify-content: space-around; align-items: center;"> <span><i>i5004</i></span> <div> <div style="display: flex; justify-content: space-between; width: 100%;"> <span>DAY</span><span>MTH</span><span>YR</span> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <span><i>0</i></span><span><i>4</i></span><span><i>7</i></span><span><i>0</i></span> </div> </div> </div>									
Date of Birth										
Today's Date	<div style="display: flex; justify-content: space-around; align-items: center;"> <div> <div style="display: flex; justify-content: space-between; width: 100%;"> <span>DAY</span><span>MTH</span><span>YR</span> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <span><i>i5006</i></span><span><i>m7</i></span><span><i>y7</i></span> </div> </div> </div>									
School Name										
For office use only <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>										

PLEASE READ THE INTRODUCTION TO THE INSTRUCTION BOOKLET  
BEFORE WORKING THROUGH THIS SPECIAL TEST BOOKLET



## The Special Tests

These tests consist of the

- (1) Fundamental Concepts Test
- (2) Copying Designs Test
- (3) Draw a Man Test
- (4) Young's Mathematics Test
- (5) Thackray Reading Readiness Profiles (Auditory and Visual Discrimination)

Some sections of the **Fundamental Concepts Test** utilise the materials in the polythene bags, labelled 1, 2 and 3

The bags contain

- (1) 36 red and blue counters (squares and circles)
- (2) 10 strips of card from 3cm to 12cm in length
- (3) Two balls of plasticine of equal weight

The child will require a pencil to complete several of the tests. It will also be helpful to have some plain paper to hand for tests which require the child to look at printed material, in order to cover over preceding and subsequent items which could otherwise distract the child

The **Special Tests** are fun for the child to do and might be presented as games. The child need not labour on with any item if it becomes apparent that he or she cannot manage it. However, it is important that the teacher indicates all items that the child is unable to answer. This will require particular care with the **Young's Mathematics Test** and the sections of the **Thackray Reading Readiness Profiles** where no provision has been made for teachers marking such items. If any tests are not administered, please indicate this on the separate **Report Form**

The timetable for the tests is left to the teacher's discretion, but it is recommended that the tests are administered in sessions lasting around 40 minutes each. As far as possible, individual sections of a test should not be divided between different sessions. Administration will be easier for the teacher if he/she sits on one side of the Study child rather than opposite. Throughout the instructions for the tests, the suggested iteration for the teacher is given in *italics*. These words should not be modified in such a way as to alter their meaning, but passages may be repeated if the child fails to understand what has been said. The teacher can add words of encouragement throughout the testing, but should not indicate to the child that particular answers are right or wrong.

Whenever a child offers more than one response to an item, the teacher should ask the child which response is the correct one. If the child still fails to give a single response, please mark the item as "no response"

Should the child be unable to use a pencil to make written responses then the teacher may write the child's verbal responses or indicate his/her pointing responses. It is, of course, impossible for the teacher to assist with tests which require the child to draw or copy



# 1 FUNDAMENTAL CONCEPTS TEST

This test contains nine sections aimed at assessing basic numeracy, simple mathematical skills and the stages of reasoning hypothesised by Piaget and others. These sections are Counting, Oddities and Matching, Relative Number, Classification, Seriation, Addition, Subtraction, Conservation and Spatial Concepts

## (a) COUNTING

The materials used in this section are in the small polythene bag marked (1)

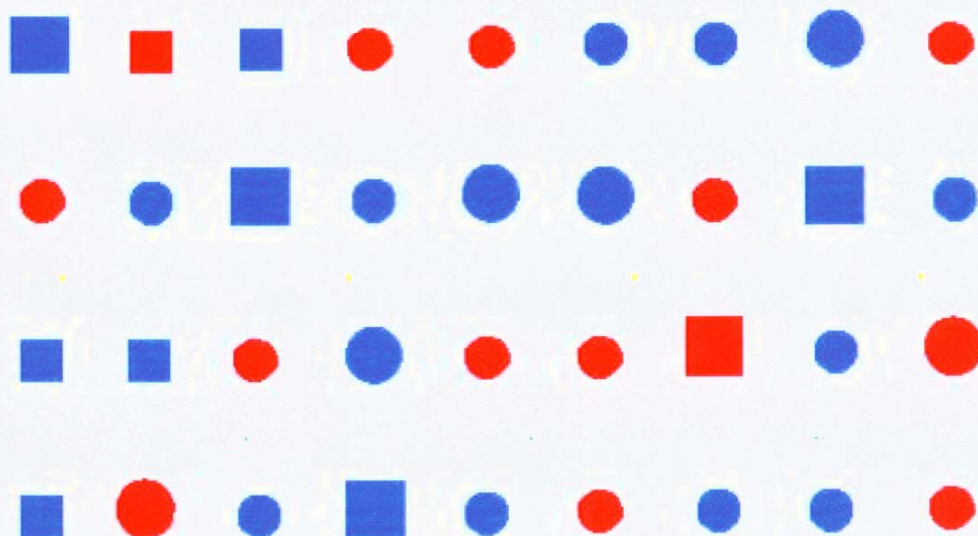
They consist of

- 4 large blue squares and 4 small blue squares
- 4 large blue circles and 10 small blue circles
- 1 large red square and 1 small red square
- 2 large red circles and 10 small red circles

These materials will be used again in later sections of the Fundamental Concepts Test

**INSTRUCTIONS FOR TEACHER:** Please place all the counters on the desk, in four rows of nine in any order in front of the child

For example



Please say to the child, "Let's count these aloud. Start here and go along the row" point to the counter at the left of the nearest row (arrowed) and say "Point to each one and count aloud". Do not start the child off by saying "one" or "one, two" etc

Note whether the child counts correctly in sequence and whether he/she co-ordinates counting with pointing

(i) Which number did the child count up to correctly (i.e. not including the first error)?

(Maximum is 36)  35010

(ii) When the child first made an error, was this because of

incorrect sequencing of numbers?

lack of co-ordination of counting and pointing?

some other error?

Tick all that apply

☐ 35011

☐ 35012

☐ 35013

please specify 35014



**INSTRUCTIONS FOR TEACHER** Gather all the counters into a loose pile in front of the child. Say "Now put **TWO** counters over here", indicating a place on the desk at the preferred side of the child (i.e. right-hand side for a right-handed child \*).

Please try not to wait expectantly for the child to place more counters if he/she has not placed sufficient. Try not to curtail any of the child's actions when the correct number of counters has been placed. If you are not sure that the child has completed the task say, "Have you finished?" Record any comments about the child's actions that you think are important, in the space provided at the bottom of the page §

(iii) **TWO COUNTERS** How many counters did the child place?

i5015

If the child is unsuccessful with this task, move on to section (b) Oddities and Matching

If the child completes the task successfully, gather the counters into a single pile and repeat the procedure with **FIVE** counters

(iv) **FIVE COUNTERS** How many counters did the child place?

i5016

If the child is unsuccessful, repeat the procedure for **THREE** and **FOUR** counters and record his/her performance below. If the child is successful with **FIVE**, repeat the procedure for **SIX** and **SEVEN** and record his/her performance below

If unsuccessful with **FIVE**:

(v) **THREE COUNTERS** How many counters did the child place?

i5017

(vi) **FOUR COUNTERS** How many counters did the child place?

i5018

Now proceed to Section (b) Oddities and Matching

If successful with **FIVE**

(vii) **SIX COUNTERS** How many counters did the child place?

i5019

(viii) **SEVEN COUNTERS** How many counters did the child place?

i5020

§ Please make any comments about the child's actions which you think are important

i5021 = Highest number of counters correctly placed  
(without errors on lower numbers)

i5022 = Comment made (not coded)

This completes the Counting Section

\* If there is any difficulty in ascertaining the child's handedness, assume that this was indicated by the hand which the child used for pointing in the previous section







(b) ODDITIES AND MATCHING





ODDITIES

**INSTRUCTIONS FOR TEACHER** Please sit to one side of the child when administering this section. Prepare the following three rows of counters, one at a time, in front of the child. For each row say to the child, "*Which one is different from the rest? Point to the one that is different* ". Record the child's response below by ticking the box under the counter that he/she indicates.





(i) Please start with this arrangement i5023

					
Tick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1	2	3	4	
If the child does not point to any of the counters, tick here					5 <input type="checkbox"/>

(ii) Please repeat with this arrangement i5024

small circles					
Tick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1	2	3	4	
If the child does not point to any of the counters, tick here					5 <input type="checkbox"/>

(iii) Please repeat with this arrangement i5025






					
Tick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1	2	3	4	
If the child does not point to any of the counters, tick here					5 <input type="checkbox"/>








## MATCHING

**INSTRUCTIONS FOR TEACHER:** Please prepare the following three rows of counters, one at a time, in front of the child. For each row point to the counter in the middle (marked **STANDARD**) and say to the child, "*Which is the same as this? Point to the one that is the same*". Record the child's response below by ticking the box under the counter that he/she indicates.






(iv) Please start with this arrangement i 5026

				
Tick <input type="checkbox"/>	<input type="checkbox"/>	<b>STANDARD</b>	<input type="checkbox"/>	<input type="checkbox"/>
1	2		3	4
If the child does not point to any of the counters, tick here 5 <input type="checkbox"/>				

(v) Please repeat with this arrangement i 5027

				
Tick <input type="checkbox"/>	<input type="checkbox"/>	<b>STANDARD</b>	<input type="checkbox"/>	<input type="checkbox"/>
1	2		3	4
If the child does not point to any of the counters, tick here 5 <input type="checkbox"/>				

(vi) Please repeat with this arrangement i 5028


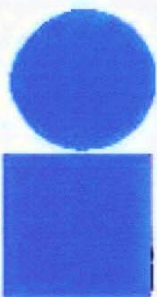

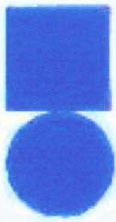

				
Tick <input type="checkbox"/>	<input type="checkbox"/>	<b>STANDARD</b>	<input type="checkbox"/>	<input type="checkbox"/>
1	2		3	4
If the child does not point to any of the counters, tick here 5 <input type="checkbox"/>				



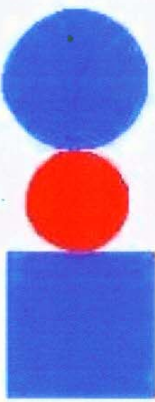
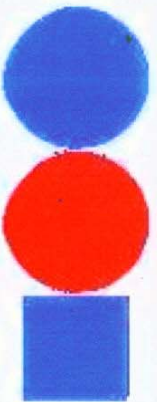
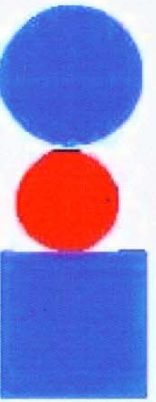
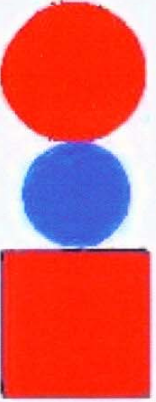

# MATCHING (cont.)

**INSTRUCTIONS FOR TEACHER.** Please show the child the three series of configurations on this page, one at a time. Cover the page with blank pieces of paper and uncover only one series at a time. For each series point to the **STANDARD** (in the middle) and say to the child, "Which is the same as this? Point to the one that is the same." Record the child's response below, by ticking the box under the figure he/she indicates.

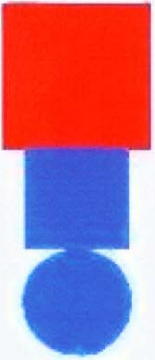
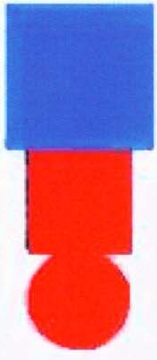
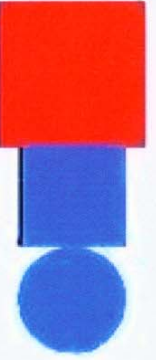
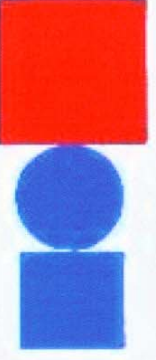
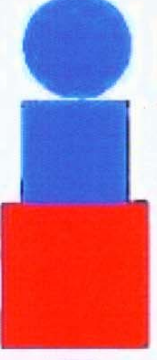
(vii) Please show this series first i 5029

				
Tick <input type="checkbox"/>	<input type="checkbox"/>	<b>STANDARD</b>	<input type="checkbox"/>	<input type="checkbox"/>
1	2		3	4
If the child does not point to any of these, tick here				
				5 <input type="checkbox"/>

(viii) Please repeat with this series. i 5030

				
Tick <input type="checkbox"/>	<input type="checkbox"/>	<b>STANDARD</b>	<input type="checkbox"/>	<input type="checkbox"/>
1	2		3	4
If the child does not point to any of these, tick here				
				5 <input type="checkbox"/>

(ix) Please repeat with this series: i 5031

				
Tick <input type="checkbox"/>	<input type="checkbox"/>	<b>STANDARD</b>	<input type="checkbox"/>	<input type="checkbox"/>
1	2		3	4
If the child does not point to any of these, tick here				
				5 <input type="checkbox"/>

This completes the Oddities and Matching Section

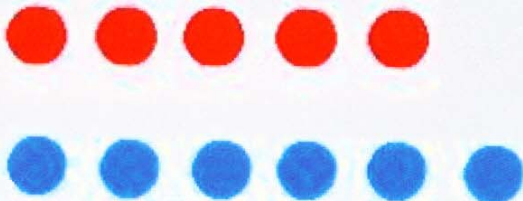
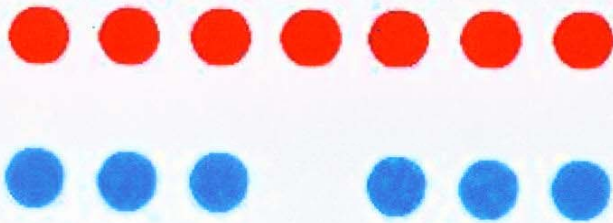
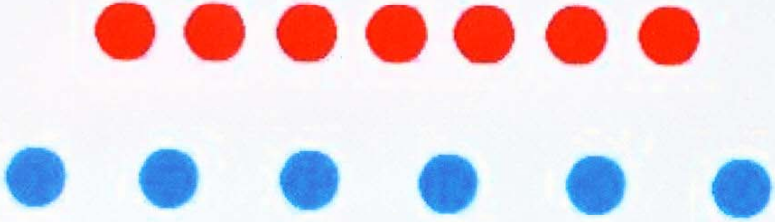


(c) **RELATIVE NUMBER**

This section uses the counters again

**INSTRUCTIONS FOR TEACHER:** Please prepare the following arrangements of counters, one at a time, on the desk in front of the child. For each arrangement ask the child, "*Which row has more counters? Point to the row with more counters.*" Record the child's response by ticking the appropriate box. After each presentation transform the arrangement by following the instructions below

After all three presentations please repeat them all again (1 to 11)

<p>(i) Place five red and six blue circles exactly as shown</p> 	<table><thead><tr><th></th><th>1st sequence</th><th>Repeat sequence</th></tr></thead><tbody><tr><td></td><td>15032</td><td>15035</td></tr><tr><td>Correct</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>Incorrect</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>No Response</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>		1st sequence	Repeat sequence		15032	15035	Correct	<input type="checkbox"/>	<input type="checkbox"/>	Incorrect	<input type="checkbox"/>	<input type="checkbox"/>	No Response	<input type="checkbox"/>	<input type="checkbox"/>
	1st sequence	Repeat sequence														
	15032	15035														
Correct	<input type="checkbox"/>	<input type="checkbox"/>														
Incorrect	<input type="checkbox"/>	<input type="checkbox"/>														
No Response	<input type="checkbox"/>	<input type="checkbox"/>														
<p>(ii) Now add two red circles and move one blue circle to make a new arrangement, exactly as shown:</p> 	<table><thead><tr><th></th><th>1st sequence</th><th>Repeat sequence</th></tr></thead><tbody><tr><td></td><td>15033</td><td>15036</td></tr><tr><td>Correct</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>Incorrect</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>No Response</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>		1st sequence	Repeat sequence		15033	15036	Correct	<input type="checkbox"/>	<input type="checkbox"/>	Incorrect	<input type="checkbox"/>	<input type="checkbox"/>	No Response	<input type="checkbox"/>	<input type="checkbox"/>
	1st sequence	Repeat sequence														
	15033	15036														
Correct	<input type="checkbox"/>	<input type="checkbox"/>														
Incorrect	<input type="checkbox"/>	<input type="checkbox"/>														
No Response	<input type="checkbox"/>	<input type="checkbox"/>														
<p>(iii) Now spread out the blue counters:</p> 	<table><thead><tr><th></th><th>1st sequence</th><th>Repeat sequence</th></tr></thead><tbody><tr><td></td><td>15034</td><td>15037</td></tr><tr><td>Correct</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>Incorrect</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>No Response</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>		1st sequence	Repeat sequence		15034	15037	Correct	<input type="checkbox"/>	<input type="checkbox"/>	Incorrect	<input type="checkbox"/>	<input type="checkbox"/>	No Response	<input type="checkbox"/>	<input type="checkbox"/>
	1st sequence	Repeat sequence														
	15034	15037														
Correct	<input type="checkbox"/>	<input type="checkbox"/>														
Incorrect	<input type="checkbox"/>	<input type="checkbox"/>														
No Response	<input type="checkbox"/>	<input type="checkbox"/>														

This completes the Relative Number Section



(d) **CLASSIFICATION**

(i) **INSTRUCTIONS FOR TEACHER.** Please gather all 36 counters (circles and squares) into a loose pile in front of the child and say, "*Put all the red ones over here*" indicating a place on the desk at the preferred side of the child

How many **RED SHAPES** did the child put in the place indicated?

☐

n b if i5038  
none,

How many **BLUE SHAPES** did the child put in the place indicated?

☐

then i5039  
write "O"

Please make any comments about the child's actions which you think are important

i5040 = correct or not

i5041 = comment made (not coded)

(ii) **INSTRUCTIONS FOR TEACHER.** Please gather all the counters into a single pile again and say, "*Now put all the squares over here*" indicating a place on the desk at the preferred side of the child

How many **SQUARES** did the child put in the place indicated?

☐

n b if i5042  
none,

How many **CIRCLES** did the child put in the place indicated?

☐

then i5043  
write "O"

Please make any comments about the child's actions which you think are important

i5044 = correct or not

i5045 = comment made (not coded)

(iii) **INSTRUCTIONS FOR TEACHER** Please gather all the circles into a single pile and remove the squares from the desk. Say to the child, "*Now put all the small ones over here.*"

How many **SMALL CIRCLES** did the child put in the place indicated?

☐

n b if i5046  
none,

How many **LARGE CIRCLES** did the child put in the place indicated?

☐

then i5047  
write "O"

Please make any comments about the child's actions which you think are important

i5048 = correct or not

i5049 = comment made (not coded)

(iv) **INSTRUCTIONS FOR TEACHER** Please gather all the counters (circles and squares) into a pile and say, "*Now put all the blue squares over here.*"

How many **BLUE SQUARES** did the child put in the place indicated?

☐

i5050

How many **BLUE CIRCLES** did the child put in the place indicated?

☐

n b if i5051  
none,

How many **RED SQUARES** did the child put in the place indicated?

☐

then i5052  
write "O"

How many **RED CIRCLES** did the child put in the place indicated?

☐

i5053

Please make any comments about the child's actions which you think are important

i5054 = correct or not

i5055 = comment made (not coded)



(v) **INSTRUCTIONS FOR TEACHER:** Please gather all the counters into a single place again and say to the child, "*Now put all the small red circles over here* "

How many **SMALL RED CIRCLES** did the child put in the place indicated?

☐ i5056

How many **LARGE RED CIRCLES** did the child put in the place indicated?

☐ i5057

How many **SMALL RED SQUARES** did the child put in the place indicated?

☐ i5058

How many **LARGE RED SQUARES** did the child put in the place indicated?

☐ i5059

n b if  
none,

How many **SMALL BLUE CIRCLES** did the child put in the place indicated?

☐ then  
write "(  
i5060

How many **LARGE BLUE CIRCLES** did the child put in the place indicated?

☐ i5061

How many **SMALL BLUE SQUARES** did the child put in the place indicated?

☐ i5062

How many **LARGE BLUE SQUARES** did the child put in the place indicated?

☐ i5063

Please make any comments about the child's actions that you think are important

i5064 = correct or  
not

This completes the Classification Section i5065 = comment  
made (not coded)

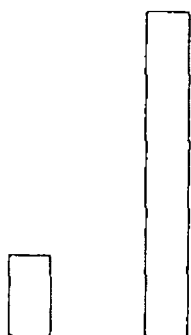


(e) SERIATION

The materials for the test of seriation are in the polythene bag marked (2) They consist of TEN strips of card of lengths 3cm, 4cm, 5cm, 6cm, 7cm, 8cm, 9cm, 10cm, 11cm and 12 cm. The lengths of the strips are marked on their reverse side

**INSTRUCTIONS FOR TEACHER:** Pick up the smallest (3cm) and biggest (12cm) strips and place them in front of the child, lining up the base of the strips (The strips should be turned so their marked sides are not showing )

(i)



Say to the child, "*Which one is the biggest? Point to the biggest one.*"

i 5066

Tick to indicate the child's response

Correct ☐

Incorrect ☐

No response ☐

Then say to the child, "*Which one is the smallest? Point to the smallest one.*"

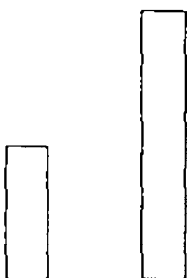
i 5067

Correct ☐

Incorrect ☐

No response ☐

(ii) Repeat this procedure with the 5cm and 10cm strips



Say to the child, "*Which one is the biggest? Point to the biggest one.*"

i 5068

Correct ☐

Incorrect ☐

No response ☐

Then say to the child, "*Which one is the smallest? Point to the smallest one.*"

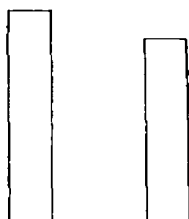
i 5069

Correct ☐

Incorrect ☐

No response ☐

(iii) Repeat with the 8cm and 7cm strips



Say to the child "*Which one is the biggest? Point to the biggest one.*"

i 5070

Correct ☐

Incorrect ☐

No response ☐

Then say to the child, "*Which one is the smallest? Point to the smallest one.*"

i 5071

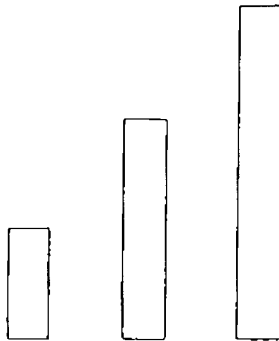
Correct ☐

Incorrect ☐

No response ☐



**INSTRUCTIONS FOR TEACHER** Please show the child the 4cm, 8cm, and 12cm strips arranged here



Say to the child, "*These shapes are in order. The smallest one is first (point) and the biggest one is last*" (point). Remove these strips and hand the child the 3cm, 7cm and 11cm strips. Say, "*Put these shapes in order with the smallest at one end and the biggest at the other end*".

(iv) Write down the sequence of the child's arrangement from left to right

cm      cm      cm      *i 5072*

Please make any comments about the child's response which you think are important

*i 5075 = comment made (not coded)*

(v) Take away these strips and repeat the test with the 4cm, 6cm, 8cm, 10cm and 12cm strips

Write down the sequence of the child's arrangement from left to right

cm      cm      cm      cm      cm      *i 5076*

Please make any comments about the child's response which you think are important

*i 5079 = comment made (not coded)*

(vi) Take away these strips and repeat the test with all ten strips

Write down the sequence of the child's arrangement from left to right

cm      cm      cm      cm      cm      cm      cm      cm      cm      cm      *i 5080*

Please make any comments about the child's response which you think are important

*i 5083 = comment made (not coded)*



## SERiation (Cont )

Remove the 5cm, 8cm, and 11cm strips and arrange in front of the child the seven remaining strips **in order of size** as shown. Hand the child the 8cm strip and say, "Now can you put the piece back in order?"

(vii) Record where the child places the strip

The 8cm strip was placed between the  cm strip and the  cm strip *i5084*

If the 8cm strip was placed incorrectly by the child, reposition it correctly

(viii) Now repeat the same procedure with the 5cm strip

The 5cm strip was placed between the  cm strip and the  cm strip *i5085*

If the 5cm strip was placed incorrectly by the child, reposition it correctly

(ix) Now repeat the above procedure with the 11cm strip

The 11cm strip was placed between the  cm strip and the  cm strip *i5086*

Please make any comments about the child's responses which you think are important

*i5087 = comment made  
(not coded)*

This completes the Seriation Section



(f) **ADDITION**

This task uses the counters again

**INSTRUCTIONS FOR TEACHER** Please place **ONE** small circle in front of the child and say, *"Here is one counter. If I put one more counter next to it how many would there be?"* Do **not** put one more counter on the desk or show him another counter

- (i) Record the child's answer below

Child's answer  *15088* If no answer, tick here ☐

- (ii) Repeat this procedure placing **THREE** circles in a row in front of the child and say, *"Here are three counters. If I put one more counter next to them how many would there be?"*

Child's answer  *15089* If no answer, tick here ☐

- (iii) Repeat this procedure placing **TWO** circles in a row in front of the child and say, *"Here are two counters. If I put one more counter next to them how many would there be?"*

Child's answer  *15090* If no answer, tick here ☐

- (iv) Place **TWO** small circles in front of the child and say, *"Here are two counters. If I put two more counters next to them how many would there be?"*

Child's answer  *15091* If no answer, tick here ☐

- (v) Repeat this procedure placing **FOUR** circles in a row in front of the child and say, *"Here are four counters. If I put two more counters next to them how many would there be?"*

Child's answer  *15092* If no answer, tick here ☐

- (vi) Repeat this procedure placing **THREE** circles in a row in front of the child and say, *"Here are three counters. If I put two more counters next to them how many would there be?"*

Child's answer  *15093* If no answer, tick here ☐

This completes the Addition Section



(g) SUBTRACTION

**INSTRUCTIONS FOR TEACHER**· Please place **TWO** small circles in front of the child and say, *"Here are two counters. If I take one of them away how many would be left?"* Do not remove a counter

(i) Record the answer below

Child's answer ☐ *15094* If no answer, tick here ☐

(ii) Repeat this procedure placing **FOUR** circles in a row in front of the child

Child's answer ☐ *15095* If no answer, tick here ☐

(iii) Repeat this procedure placing **THREE** circles in front of the child

Child's answer ☐ *15096* If no answer, tick here ☐

(iv) Place **FOUR** circles in a row in front of the child and say, *"Here are four counters If I take two of them away how many would be left?"*

Child's answer ☐ *15097* If no answer, tick here ☐

(v) Repeat this procedure placing **SIX** circles in a row in front of the child

Child's answer ☐ *15098* If no answer, tick here ☐

(vi) Repeat this procedure placing **FIVE** circles in a row in front of the child

Child's answer ☐ *15099* If no answer, tick here ☐

This completes the Subtraction Section



(h) **CONSERVATION**

The materials for this test are in the small polythene bag marked (3) and consist of two balls of plasticine of equal weight

**INSTRUCTIONS FOR TEACHER:** Place the two plasticine balls on the desk in front of the child. Say, "*Are these two balls the same?*" (If the child does not agree invite him/her to make them the same.) Now roll one of the balls into a sausage. Say, "*Is there as much plasticine in the sausage as there is in the ball?*"

i5100

- (i) Record the child's response      Yes ☐    No ☐    Don't Know ☐    No Response ☐
- (ii) Break the sausage into five little pieces. Say, "*Is there as much plasticine in all the little pieces together as there is in the ball?*"

i5101

Record the child's response      Yes ☐    No ☐    Don't Know ☐    No Response ☐

- (iii) Now roll the little pieces of plasticine back into a ball so that there are two balls of equal size. Say, "*Suppose I roll one of the balls back into a sausage, will the sausage be as heavy as the ball?*"

i5102

Record the child's response      Yes ☐    No ☐    Don't Know ☐    No Response ☐

- (iv) Now roll one ball into a sausage. Say, "*Does the sausage weigh the same as the ball?*"

i5103

Record the child's response      Yes ☐    No ☐    Don't Know ☐    No Response ☐

Please make any comments about the child's responses which you think are important

i5104 = comment made (not coded)

This completes the Conservation Section

(i) **SPATIAL CONCEPTS**

**INSTRUCTIONS FOR TEACHER** Please hand the pencil to the child. Show the child the diagram on the next page and say, "*Here is a steep hill. Draw two houses and two telegraph poles on the hill.*"

i5105



This completes the Fundamental Concepts Test. Before proceeding with the Copying Designs Test, please ask the child to write his/her name, in pencil, in the space below.

Child's name

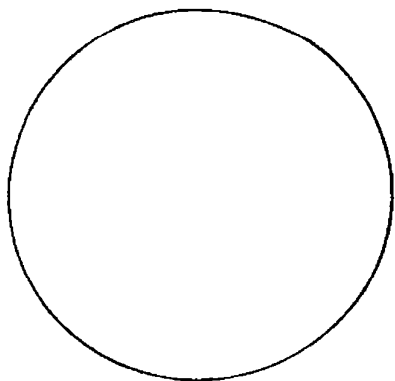
j5106 - name written or not

## 2 COPYING DESIGNS TEST

- a Please ask the child to copy, in pencil, the designs on the next two pages, as carefully as possible.
- b Fold the booklet back so that the child can only see one page at a time.
- c Point to each design in turn. Say, "*See if you can make one just like this - here*" and point to the space beside the design.
- d Two attempts at copies of a design should be made by the child before trying the one in the next row.

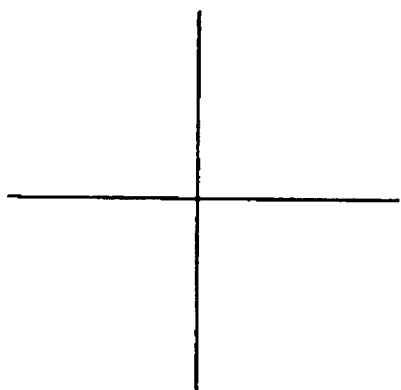
Do not give the child any more help than the instructions allow





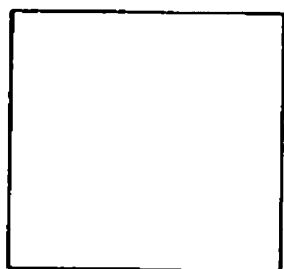
i5110

x5110



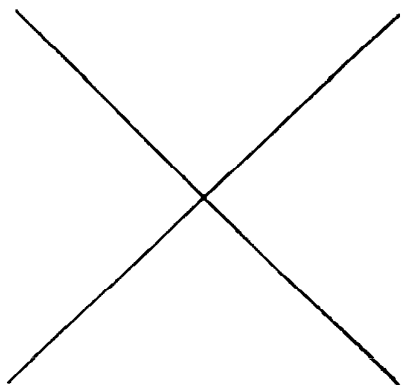
i5111

x5111



i5112

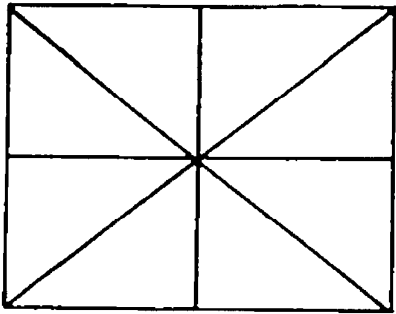
x5112



i5113

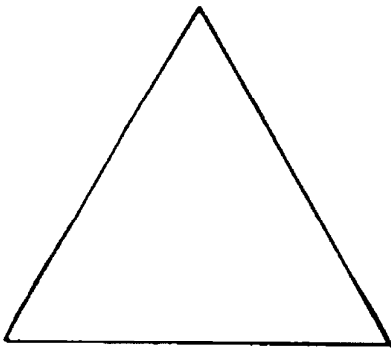
x5113





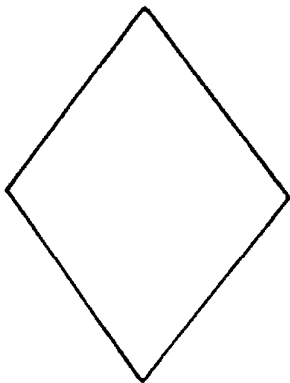
i 5114

x 5114



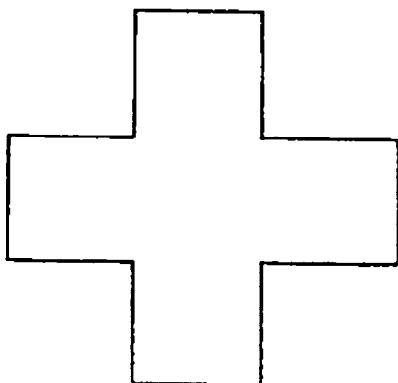
i 5115

x 5115



i 5116

x 5116



i 5117

x 5117



### 3. HUMAN FIGURE DRAWING (DRAW A MAN TEST)

#### INSTRUCTIONS

- 1 Please ask the child to "*make a picture of a man or lady*" on this page. Terms such as "daddy", "mummy", "boy", "girl", etc. may be used in place of "man" or "lady" if the child responds better to these.
- 2 Ask him/her to make the best picture he/she can and to draw a **whole person**, not just a face or head.
- 3 When the child stops drawing, ask if it is finished and allow him/her to make any additions he/she wants to. Be careful, however, not to suggest additions.
- 4 When the drawing is finished, ask the child what it is and note what he/she says at the bottom of the page.
- 5 If it is not clear, ask the child to say what the various parts of the drawings are and label them. Do this by asking "*What's this?*" and pointing, but do not ask questions such as "Where's his arm?, legs?, eyes?, etc."

**Do not give the child any more help than the instructions allow**

This is a picture of

i5118 Child's Description (male or female)



### **Coding for Human Figure Drawing (Draw-A-Man) Test**

Child's Description (male or female)	i5118
Head	i5119
Eyes	i5120
Pupils	i5121
Eyebrows	i5122
Nose	i5123
Human Hg.drwg.1 Nostrils	i5124
Mouth	i5125
Two Lips	i5126
Ear	i5127
Hair	i5128
Neck	i5129
Body	i5130
Arms	i5131
Arms in 2 Dimensions	i5132
Arms at Angle	i5133
Arms Attached	i5134
Elbow	i5135
Hands	i5136
Fingers	i5137
Corresponding No. Fingers	i5138
Legs	i5139
Legs in 2 Dimen	i5140
Knee	i5141
Feet	i5142
Feet.in 2 Dimensions=	i5143
Profile	i5144
Clothes 1 or 0	i5145
Clothes 2 or 3	i5146
Clothes 4	i5147
Good Proportion	i5148
Size of Figure	i5149



### Further Information

(i) Do you think the child can understand the following words?

		Tick appropriate box in each line		
		Yes	No	Not Sure
i5150	same	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5151	bigger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5152	as much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5153	smallest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5154	different	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5155	more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5156	smaller	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5157	as heavy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5158	biggest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(ii) Has the child ever been taught to do tasks similar to those in the Fundamental Concepts Test?

	Yes	No	Don't know
i5159	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If yes, give details

*i5160 - whether details given or not  
(text not coded)*

(iii) Which reading system(s) is being used to teach the child to read?

*i5161 - was reading system entered?  
(text not coded)*

(iv) Which writing system is being used to teach the child to write?

*i5162 - was writing system entered?  
(text not coded)*



This completes the tests for the **Special Test Booklet**.

It may be that, in spite of our efforts to collect performance measures in a standardised form, our tests may not have highlighted some difficulty the child may have

Would you please use this page to give, in your own words, a short review of the child's educational performance and his/her general development and behaviour

**Teacher's review of educational performance, general development and behaviour.**

*i5163 - was teacher's review completed or not?  
(text not coded)*

**Thank you very much for your help**

When you have completed this booklet please turn to **INSTRUCTIONS FOR ADMINISTERING SPECIAL TEST MATERIAL part 2**, in the **Instruction Booklet**.



#### 4 YOUNG'S MATHEMATICS TEST

A separate test sheet is provided (green) The instructions for the test are written below

##### **GENERAL INSTRUCTIONS\***

The first half of the test (on the front page) should be tried first Then a short break should be taken followed immediately by the second half (on the back page) Each half consists of two sections, one pictorial (oral) and one computational Abandon any section after four consecutive incorrect answers

If possible the child should be encouraged to write each answer in pencil on the dotted line provided If this is not possible, please record the child's answers yourself in the same place and indicate that the answer was not written by the child by initialling the response

##### **METHOD OF ADMINISTRATION**

###### **(a) First Pictorial Section (*Left hand side of front page*)**

Place the front page of the test sheet in front of the child and say

*"On your paper you will see that there are some pictures. Each picture is in a sort of box I am going to ask you a question about each picture and you are going to write your answer on the dotted line in the box "*

**APPLES** *"Point with your pencil to the apples on your paper Now point to the biggest apple. Below the apple there is a letter. Write the letter on the dotted line."* (At each of these steps check that the child understands and repeat the instructions as often as necessary)

**BOATS** *"Now point to the toy boats. Count the boats. Write on the dotted line the number of boats "* (Check the dotted lines are being used)

**CUPS** *"Look at the cups If two of the cups are broken, how many would be left? Write down how many would be left "*

**SERIES** *"Look at the numbers One number has been covered up Write down what you think that number is "*

**SWEETS** *"Count the sweets How many children could have two sweets each? Write down how many children could have two sweets each."*

**LOAVES** *"Count the loaves. How many would you have if you bought one more loaf? Write down how many you would have "*

**SHAPES** *"Look at the first shape. Find the shape which is exactly the same as the first one Write the letter of the shape that is exactly the same as the first one."*

**TARTS** *"Count the tarts How many tarts would be left if half of them were eaten? Write down how many would be left "*

*\*These instructions have been reproduced and adapted from the Group Mathematics Test by D Young, by kind permission of the publishers Hodder & Stoughton Ltd , Sevenoaks, Kent*



**RABBITS** *"Now count the rabbits. How many would there be if there were twice as many? Write down how many there would be."*

**TRIANGLES** *"Look at the shapes. If I had a square of paper and I cut off a piece like part A which shape would be left? Write the letter of the part that would be left."*

**NUMBERS** *"Look at the numbers. Which number has the most tens? Write down the number that has the most tens."*

**JARS** *"Look at the jars of water. Which jar is three-quarters full? Write the letter of the jar that is three-quarters full."*

**SERIES** *"Look at the numbers. One number has been covered up. Write down what you think the number is."*

**BASINS** *"Look at the basins. Which one is the middle-sized basin? Write down the letter of the middle-sized basin."*

**INTERSECTING CIRCLES** *"Look at the circles. Which letter is in only two circles? Write down the letter that is in only two circles."*

**(b) First Computation Section (Right-hand side of front page)**

This section, and the corresponding one on the reverse side, should be introduced by examples. This ensures that no confusion arises from the teacher's use of language.

Show the child some examples of this type of sum. Say *"Look at this piece of paper. What does this say?"* (Write  $1 + 1 =$  ) What is the answer? Good. (Write the answer and similarly use the example  $2 + 1 =$  )

If the child cannot answer these examples correctly, omit this computation section and move to the Second Pictorial Section. If the child can answer the examples correctly indicate the computation section on the front page and say, *"Now you have to do some more sums just like these. You have plenty of time. Work carefully."*

**(c) Second Pictorial Section (Left hand side of back page)**

**FISH** *"Point to the bowls of fish. Which bowl has the most fish in it? Write the letter of the bowl that has the most fish."*

**BIRDS** *"Look at the birds. Suppose one flew away. Write down how many would be left."*

**SQUARES AND CIRCLES** *"Look at the shapes. How many squares have crosses in them? Write down how many squares have crosses."*

**ENGINES** *"Look at the engine. There are some wheels on the other side which you cannot see. Write down how many wheels it has altogether."*

**CHOCOLATE** *"Look at the bars of chocolate. Suppose each bar was broken in half. Write down how many children could have half a bar each."*

**TREES** *"Now look at the trees. Which is the fifth tree from the telegraph pole? Write down which is the fifth tree from the telegraph pole."*

**KNIVES AND FORKS** *"Look at the knives and forks. How many people can have a knife and fork each? Write down how many people can have a knife and fork each."*

**BAGS OF BRICKS** *"Now look at the bags of bricks. There are ten bricks in each bag and there are also some loose ones. Write down how many bricks there are altogether."*



**CLOCK** *“Now find the clock at the top of the page. What time does it say? Write the time the clock says ”*

**SHAPES** *“Look at the first shape. Which shape is exactly the same as the first one? Write the letter of the shape which is the same as the first one ”*

**CIRCLES** *“Look at the circles. One circle is bigger than circle E and smaller than circle B Write down the letter of the circle that is bigger than circle E and smaller than circle B ”*

**MARBLES** *“Your paper tells you how many marbles Dick has. If Jim has twice as many marbles, how many do they have altogether? Write down how many they have altogether ”*

**BRICKS** *“Look at the bricks. How many bricks are there in the pile? Write down how many bricks there are in the pile.”*

**BOXES** *“The paper tells you how many boxes of tomatoes the greengrocer had. Then he sold three and a half boxes. Write down how many boxes he had left ”*

**NUMBERS** *“Look at the numbers Which number is different from the others? Write the number that is different from the others.”*

(d) **Second Computation Section** *(Right-hand of back page)*

Show the child some examples of this type of sum Say *“Look at this piece of paper What does this say?”* (Write  $1 - 1 =$  ) *“What is the answer? Good ”* (Write the answer and similarly use the example  $2 - 1 =$  )

If the child cannot answer these examples correctly, omit this computation section If the child can answer examples correctly, indicate the computation section on the green page and say, *“Now you have to do some more sums just like these You have plenty of time Work carefully.”*



FORM B

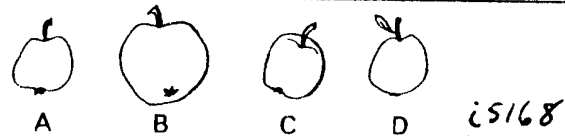
GROUP MATHEMATICS TEST

D. YOUNG

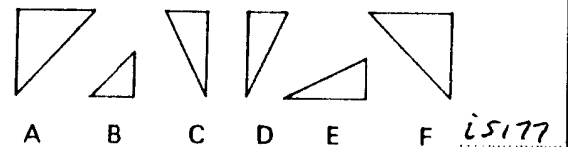
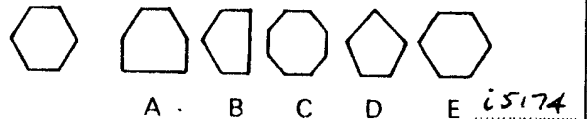
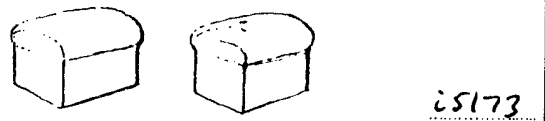
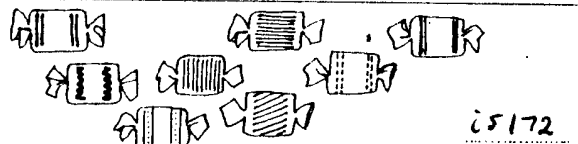
Name..... Date.....

School..... Class.....

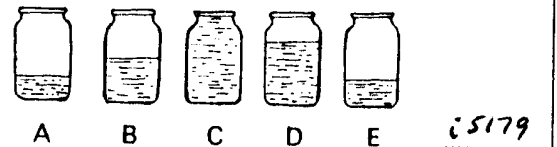
FORM B	ORAL	COMP.	TOTAL
Page 1			
Page 2			
TOTALS			



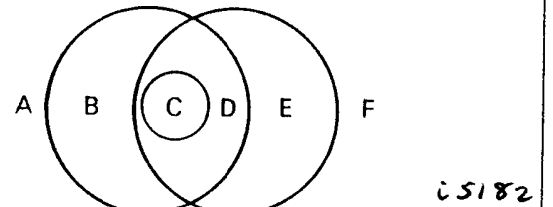
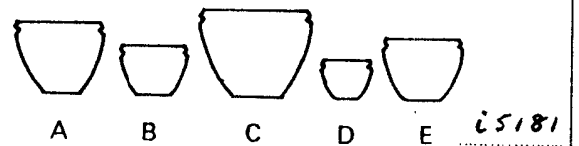
22, 23, 24,  26 15171



27 53 72 81 19 15178



8, 11, 14,  20 15180



$$3 + 1 = 15183$$

$$6 + 2 = 15184$$

$$9 + 4 = 15185$$

$$18 + 5 = 15186$$

$$7 + 8 = 15187$$

$$22 + 10 = 15188$$

$$8 + 32 = 15189$$

$$20 + 70 = 15190$$

$$43 + 25 = 15191$$

$$19 + 41 = 15192$$

$$10 + 81 = 15193$$

$$13 + 79 = 15194$$

$$16 + 68 = 15195$$

$$25 + 95 = 15196$$

$$154 + 117 = 15197$$

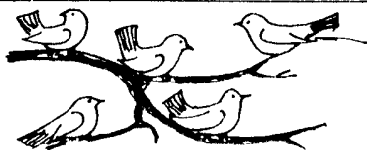
ORAL

COMPUTATION

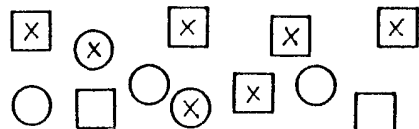




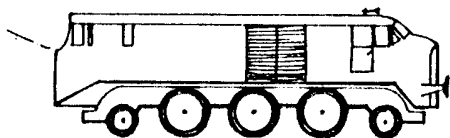
A B C D i5198



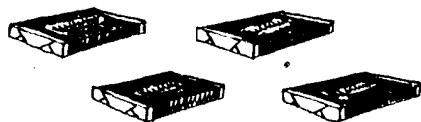
i5199



i5200



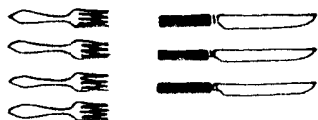
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i5202



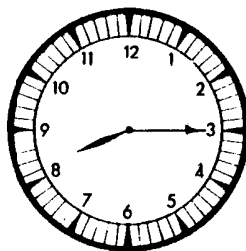
G F E D C B A i5203



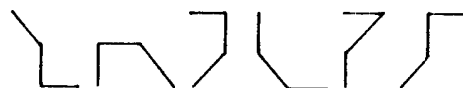
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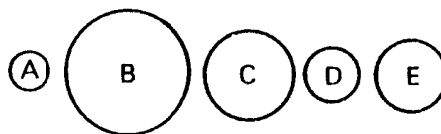
i5205



i5206



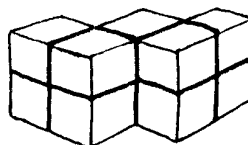
A B C D E i5207



i5208

Dick 4 marbles  
Jim 3 marbles

i5209



i5210

8 boxes

i5211

3 5 6  
11 13 7

i5212

$$3 - 1 = i5213$$

$$10 - 2 = i5214$$

$$7 - 3 = i5215$$

$$8 - 5 = i5216$$

$$12 - 3 = i5217$$

$$14 - 3 = i5218$$

$$74 - 4 = i5219$$

$$80 - 30 = i5220$$

$$29 - 5 = i5221$$

$$84 - 10 = i5222$$

$$20 - 11 = i5223$$

$$45 - 15 = i5224$$

$$26 - 19 = i5225$$

$$60 - 18 = i5226$$

$$97 - 21 = i5227$$

ORAL

COMPUTATION





## 5 THACKRAY READING READINESS PROFILES\*

Please turn to the Thackray Reading Readiness Profiles which are printed in their own booklet (blue and white)

Would you please administer Profile 2 Auditory Discrimination (page 7 of the booklet) and Profile 3 Visual Discrimination (page 11 of the booklet) in accordance with the instructions given below Please do not ask the child to complete Profiles 1 and 4 (Vocabulary Test and General Ability Test)

### **PROFILE 2. AUDITORY DISCRIMINATION (Page 7 of booklet)**

The ability to make auditory discriminations is of vital importance in learning to read successfully If a child is not aware that two sounds are the same or different, he cannot understand why words are spelled as they are Although at first he may acquire a small sight vocabulary, without this ability he will quickly become confused when words look alike, and will be slow to respond to phonic training involving the blending of sounds This Profile measures the child's ability to discriminate between words which do or do not begin with the same consonant The most common initial consonants are used and in addition the three digraphs – “sh”, “ch” and “th” as in (*three*) which stand for single sounds The objects illustrated are those familiar to children and drawn from current word lists There are 20 items of which three are practice items

#### **First Practice Item**

*“Look at the pictures in the blue box at the top of the page. (Point to it on the booklet) There is a cat, a letter, a cup and a spoon ” (Point to each picture as you name it )*

*“The cat is in a little blue box by itself I will draw a line under the cat like this (Draw a clear line under the cat in the booklet) You do that now Draw a long line under the cat (Check the child's line ) The name of one of the other pictures in the long blue box (point to it) begins like cat.”*

*“Listen to me saying the names of the other pictures (Pause) letter, cup, spoon Which one begins like cat? (Pause ) Yes, cup begins like cat. (Pause ) Listen (Pause) cup, cat I will draw a line under the cup to show that it begins like cat. (Draw a clear line under the cup on the booklet ) Now you do that. (Pause ) Draw a long line under the cup to show that it begins like cat ” (Check the child's line )*

#### **Second Practice Item**

*“Well done Now look at the pictures in the next blue box here (Point to it in the booklet ) There is a foot, a book, a pan and a fork. The foot is in a little blue box by itself I will draw a line under the foot like this. (Draw a clear line under the foot on the booklet) You do that now. Draw a long line under the foot. (Check the child's line ) The name of one of the other pictures in the long blue box (point to it) begins like foot. Listen to me saying the names of the other pictures (Pause) book, pan, fork (Pause ) Which one begins like foot? (Pause ) Yes, fork begins like foot (Pause ) Listen (Pause) fork, foot. I will draw a line under the fork to show it begins like foot. (Draw a clear line under the fork on the booklet ) Now you do that (Pause ) Draw a line under the fork to show it begins like foot ” (Check the child's line )*

*\*These instructions have been reproduced and adapted from the Thackray Reading Readiness Profiles by Derek and Lucy Thackray by kind permission of the publishers Hodder & Stoughton Ltd , Sevenoaks, Kent*



### Third Practice Item

*“Good Now look at the pictures in the next blue box in the middle of the page. (Point to it on your booklet ) There is a tap, a top, a stick and a bat. Draw a line under the tap in the little blue box. (Check the child's line.) Which of the pictures in the long blue box begins like tap? (Pause ) Yes, top begins like tap. (Pause ) Listen (pause) top, tap. Now draw a line under the top to show it begins like tap.” (Check the child's line )*

*“Now you know what to do I want you to play this game all by yourself Don't forget to listen carefully all the time. If you think you have made a mistake, cross out your line and draw another line under the right picture ”*

1 *“Look at the pictures in the next white box. There is a sock, a lamb, a sun and a bird Draw a line under the sock in the little white box. (Pause ) Now draw a line under the picture in the long white box which begins like sock ” (Give no further help from this point onwards )*

2 *“Look at the pictures in the blue box at the bottom of the page. There is a lemon, a flower, a star and a ladder. Draw a line under the lemon in the little blue box. (Pause ) Now draw a line under the picture in the long blue box which begins like lemon ”*

Turn over the page and fold it back

3 *“Look at the pictures in the blue box at the top of the page There is a house, a hen, a teapot and a bottle Draw a line under the house in the little blue box (Pause ) Now draw a line under the picture in the long blue box which begins like house ”*

4 *“Look at the pictures in the next white box. There is a chair, a crown, a chicken and a fly Draw a line under the chair in the little white box (Pause ) Now draw a line under the picture in the long white box which begins like chair ”*

5 *“Look at the pictures in the blue box in the middle of the page. There is a pig, a ball, a hammer and a pear Draw a line under the pig in the little blue box (Pause ) Now draw a line under the picture in the long blue box which begins like pig ”*

6 *“Look at the pictures in the next white box. There is a bell, a tortoise, a box and a cap Draw a line under the bell in the little white box. (Pause ) Now draw a line under the picture in the long white box which begins like bell.”*

7 *“Look at the pictures in the blue box at the bottom of the page. There is a window, a table, a lid and a wall Draw a line under the window in the little blue box (Pause ) Now draw a line under the picture in the long blue box which begins like window.”*

Turn the booklet over

8 *“Look at the pictures in the blue box at the top of the page There is a shoe, a sheep, a snowman and a hat. Draw a line under the shoe in the little blue box (Pause ) Now draw a line under the picture in the long blue box which begins like shoe ”*

9 *“Look at the pictures in the next white box. There is a thumb, a tree, a three and a bucket. Draw a line under the thumb in the little white box (Pause ) Now draw a line under the picture in the long white box which begins like thumb ”*

10 *“Look at the pictures in the blue box in the middle of the page. There is a comb, a hand, a plate and a candle. Draw a line under the comb in the little blue box (Pause ) Now draw a line under the picture in the long blue box which begins like comb.”*

11 *“Look at the pictures in the next white box. There is a doll, a jug, a dog and a watch. Draw a line under the doll in the little white box. (Pause ) Now draw a line under the picture in the long white box which begins like doll ”*



- 12 *"Look at the pictures in the blue box at the bottom of the page. There is a fire, a fish, a glass and a bed. Draw a line under the fire in the little blue box. (Pause ) Now draw a line under the picture in the long blue box which begins like fire."*

Turn over the page and fold it back.

- 13 *"Look at the pictures in the blue box at the top of the page. There is a girl, a tyre, a gate and a net. Draw a line under the girl in the little blue box. (Pause ) Now draw a line under the picture in the long blue box which begins like girl."*
- 14 *"Look at the pictures in the next white box. There is a moon, a lamp, a horse and a mouse. Draw a line under the moon in the little white box. (Pause ) Now draw a line under the picture in the long white box which begins like moon."*
- 15 *"Look at the pictures in the blue box in the middle of the page. There is a ring, a ruler, a worm and a spade. Draw a line under the ring in the little blue box (Pause ) Now draw a line under the picture in the long blue box which begins like ring "*
- 16 *"Look at the pictures in the next white box. There is a torch, a wand, a peg and a tent. Draw a line under the torch in the little white box. (Pause ) Now draw a line under the picture in the long white box which begins like torch."*
- 17 *"Look at the pictures in the blue box at the bottom of the page. There is a nose, a cross, a nest and a belt Draw a line under the nose in the little blue box. (Pause ) Now draw a line under the picture in the long blue box which begins like nose."*

### PROFILE 3 VISUAL DISCRIMINATION

#### First Practice Item

*"Look at the words in this blue box at the top of the page. (Point to it in the booklet Then point to the little box on the left and continue ) The first word is in a little blue box by itself I will draw a line under that word like this. (Draw a clear line in the booklet) Now you do that. Draw a long line under the word in the little blue box. (Check the child's line ) Now look carefully at all the words in the long blue box. (Point to the long blue box in the booklet ) One of the words in the long blue box is the same as the word in the little blue box. Which one is it? (Pause ) Yes, this is the word, the last word in the long blue box (Point out the word in the booklet ) Now I will draw a line under this word to show it is the same as the word in the little blue box. (Draw a clear line in the booklet) Now you do that. (Check child's line ) We drew a line under one word in the long blue box to show it was the same as the word in the little blue box."*

#### Second Practice Item

*"Look at the words in the next blue box. (Point to it in the booklet ) The first word is in a little blue box by itself. Draw a line under the word in the little blue box. (Check the child's line) Now look carefully at all the words in the long blue box. Which word in the long blue box is the same as the word in the little blue box? (Pause ) Yes, this is the word. (Point it out in the booklet ) Draw a line under it. (Check the child's line ) We drew a line under one word in the long blue box to show it was the same as the word in the little blue box "*

#### Third Practice Item

*"Look at the words in the next blue box. (Point to it in the booklet ) The first word is in a little blue box by itself. Draw a line under the word in the little blue box. (Check the child's line) Now look carefully at all the words in the long blue box. Which word in the long blue box is the same as the word in the little blue box? (Pause ) Yes, this is the word. (Point it out in the booklet ) Draw a line under it. (Check the child's line ) We drew a line under one word in the long blue box to show it was the same as the word in the little blue box."*



*“Now you know what to do, I want you to play this game all by yourself. Remember to look carefully at all the words in the long box to find the word which is the same as the one in the little box. If you think you have made a mistake, cross out your line and draw another line under the right word.”*

- 1    *“Look at the words in the next white box. (Pause ) Draw a line under the word in the little white box. (Pause ) Now draw a line under the word in the long white box that is the same as the word in the little white box.” (Give no further help from this point onwards )*
- 2    *“Look at the words in the next blue box. (Pause ) Draw a line under the word in the little blue box. (Pause ) Now draw a line under the word in the long blue box that is the same as the word in the little blue box.”*
- 3    *“Look at the words in the white box at the bottom of the page. (Pause ) Draw a line under the word in the little white box (Pause ) Now draw a line under the word in the long white box that is the same as the word in the little white box ”*

**Turn over the page and fold it back**

After item 3 say, *“Now I want you to do all the other boxes by yourself. Do all the boxes on the pages up to page 15 ”*

**This completes the Thackray Reading Readiness Profiles**



# Thackray

## Reading Readiness Profiles

Derek and Lucy Thackray

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NAME \_\_\_\_\_ DATE OF TESTING \_\_\_\_\_  
 SCHOOL \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
 SEX \_\_\_\_\_ CLASS \_\_\_\_\_ CHILD'S AGE \_\_\_\_\_ YRS \_\_\_\_\_ MTHS

### Reading Readiness Profile

	PROFILE 1 Vocabulary	PROFILE 2 Auditory discrimination	PROFILE 3 Visual discrimination	PROFILE 4 General ability
SCORE				
RATING				
A				
B				
C				
D				
E				

TEACHER'S REMARKS AND RECOMMENDATIONS

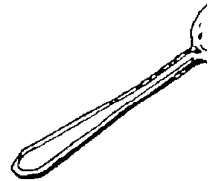
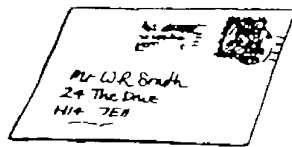
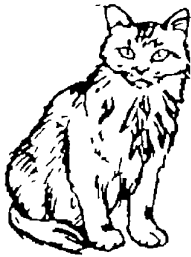


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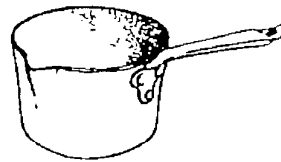


# **PROFILE 2** Auditory Discrimination

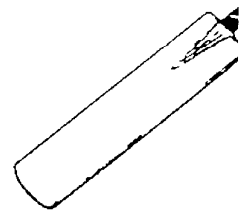
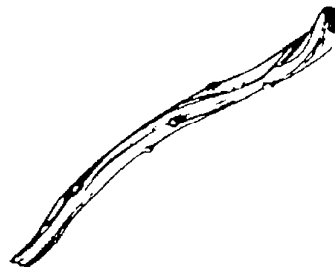
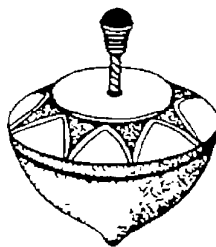
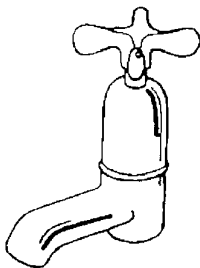
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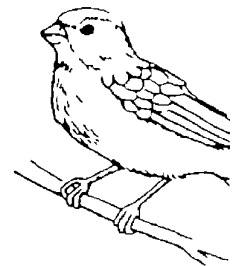
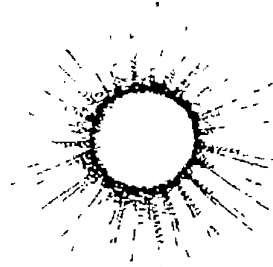
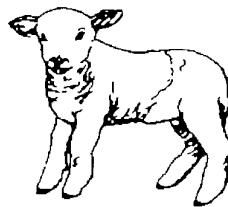
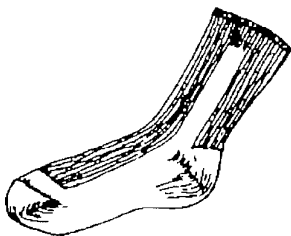
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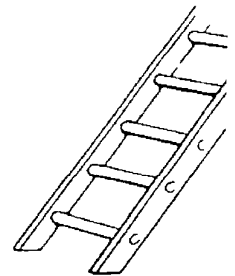
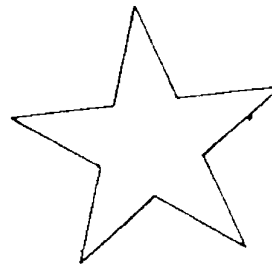
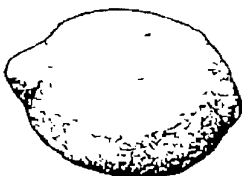


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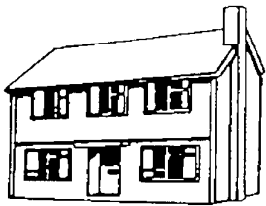


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# **PROFILE 2** Auditory Discrimination

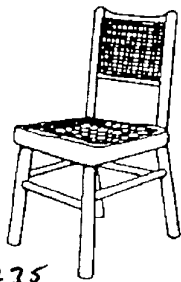
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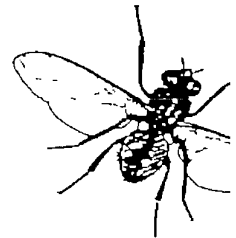
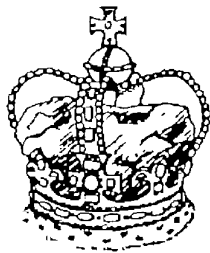
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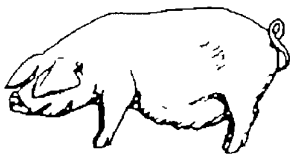
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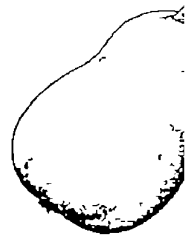
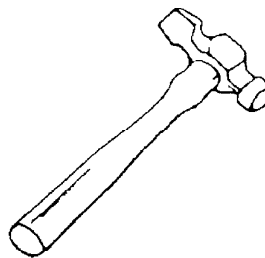
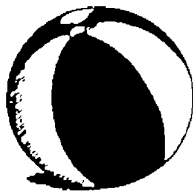
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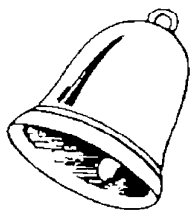
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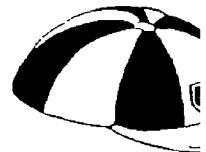
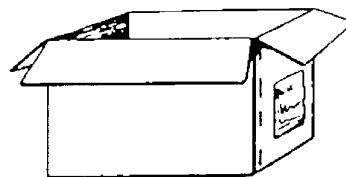
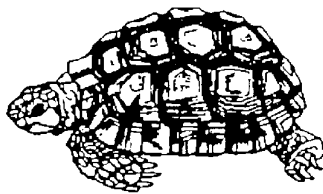
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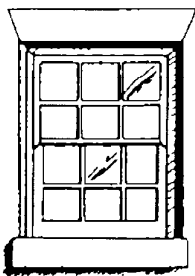
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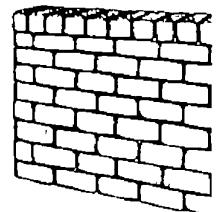
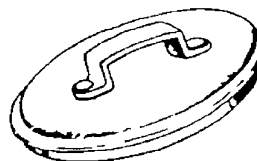
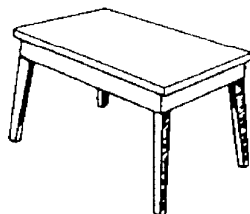
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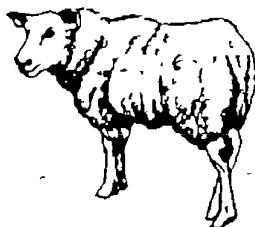


# **PROFILE 2 Auditory Discrimination**

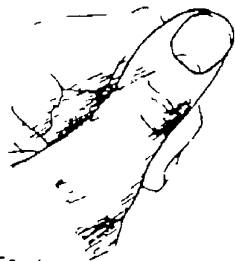
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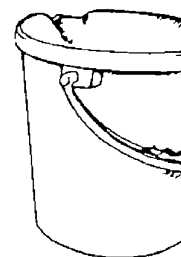
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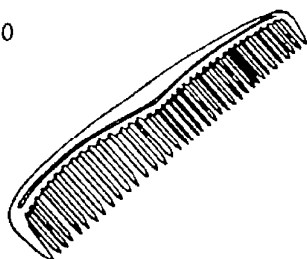
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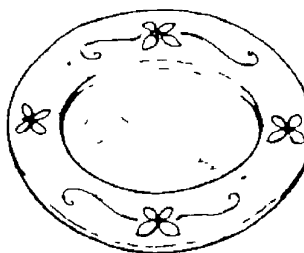
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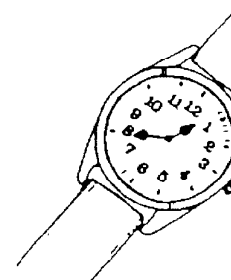
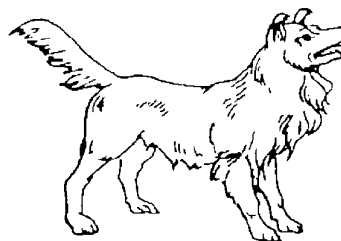
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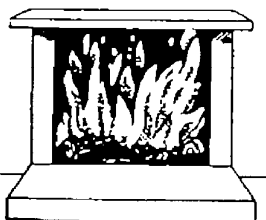
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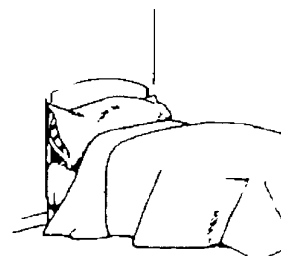
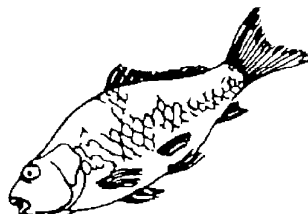
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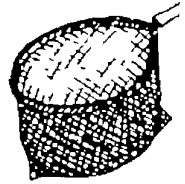
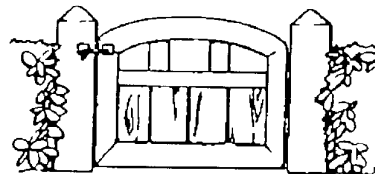
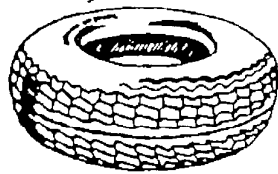


# **PROFILE 2 Auditory Discrimination**

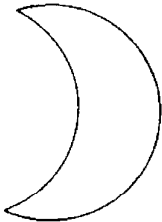
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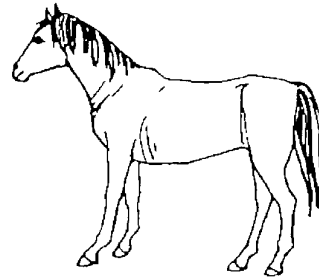
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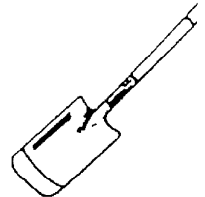
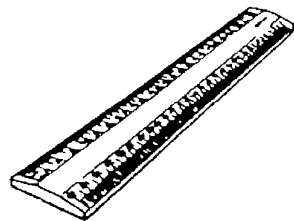
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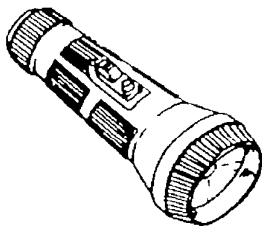
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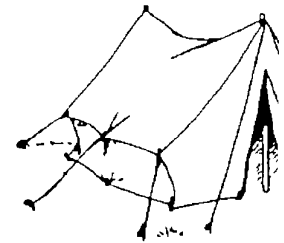
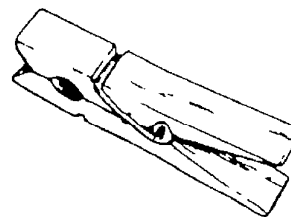
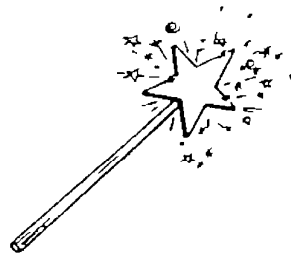
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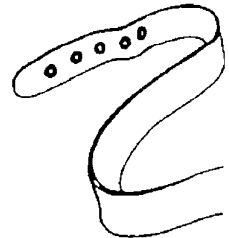
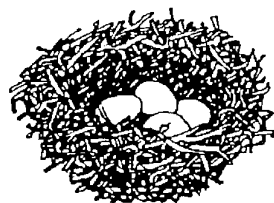
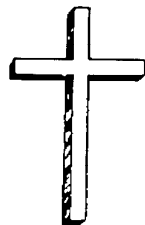
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17



i5248





# PROFILE 3 Visual Discrimination

☆ us  i5249	use	so	as	us
☆ go	to	go	do	dog
☆ is	it	in	is	us
1 on	no	an	so	on
2 saw  i5250	was	sow	saw	sew
3 tap  i5251	pat	tap	top	pat



**PROFILE 3** Visual Discrimination

4 bit i5252	hit	bite	tip	bit
5 you i5253	yon	you	nay	yew
6 boy i5254	bay	buy	boy	dog
7 walk i5255	talk	wake	walk	wall
8 will i5256	will	mill	with	wall
9 ship i5257	shop	skip	spit	ship



**PROFILE 3** Visual Discrimination

10 even i5258	ever	even	oven	never
11 seen i5259	soon	seep	seam	seen
12 make i5260	wake	mark	make	made
13 love i5261	lone	live	love	dove
14 came i5262	come	came	cane	name
15 goat i5263	gate	goal	goad	goat



**PROFILE 3** Visual Discrimination

16 other i5264	otter	other	there	alter
17 look i5265	look	lock	loot	book
18 some i5266	soon	come	some	same
19 spot i5267	tops	pots	stop	spot
20 goes i5268	does	goes	goose	shoes
21 clock i5269	cloak	cluck	flock	clock

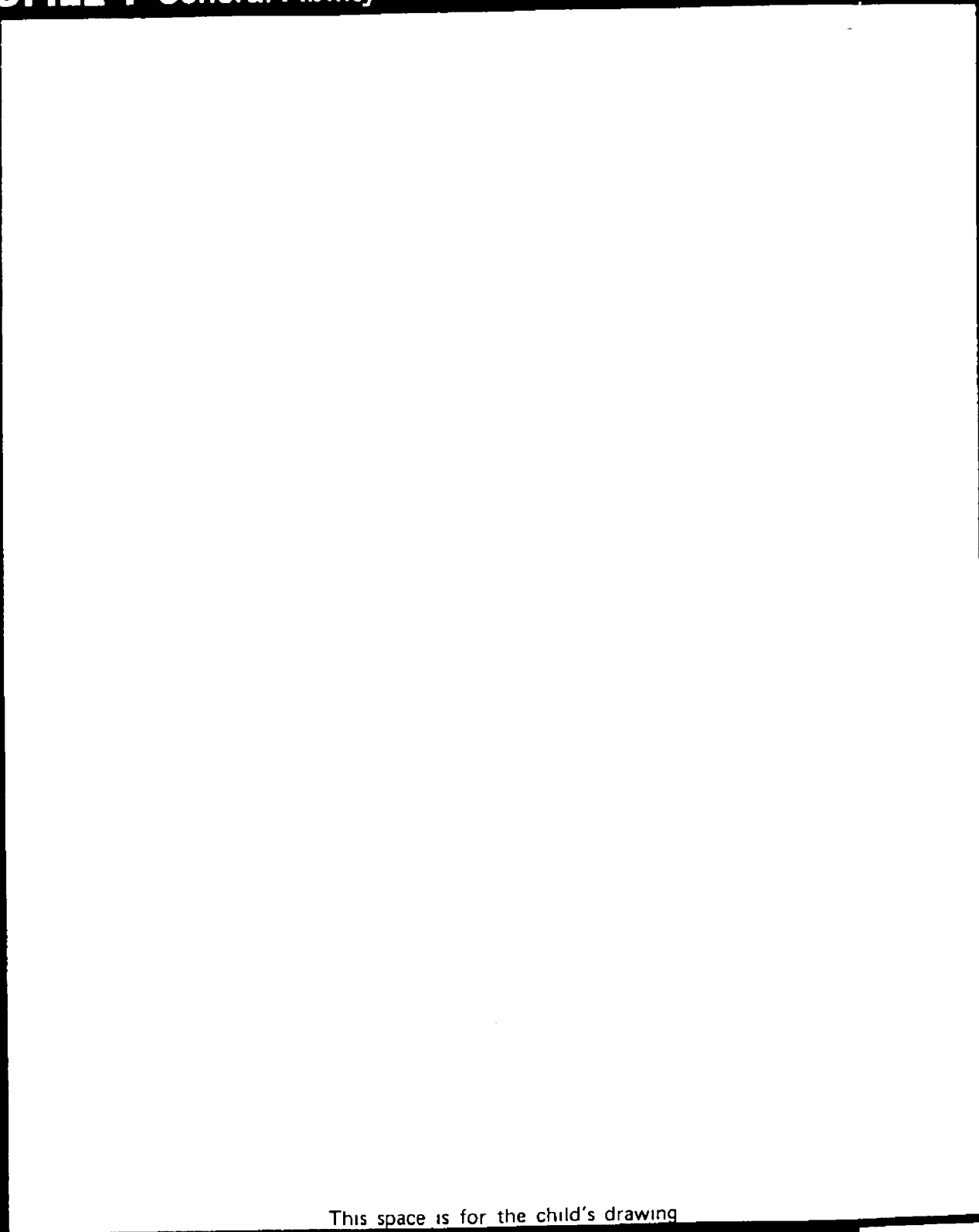


**PROFILE 3** Visual Discrimination

22 house i5270	horse	house	mouse	noose
23 these i5271	there	three	these	those
24 heard i5272	heart	beard	heard	hoard
25 better i5273	butter	batter	bitter	better
26 become i5274	because	become	became	beacon
27 farmer i5275	farther	farmer	father	firmer



## PROFILE 4 General Ability



This space is for the child's drawing

16

Rating



# CHILD HEALTH & EDUCATION STUDY

A national study in England, Wales and Scotland of all children born 5th — 11th April 1970



## SPECIAL TEACHER QUESTIONNAIRE

Director Neville R Butler  
M D , F R C P , F R C O G , D C H ,  
Department of Child Health Research Unit  
University of Bristol  
Bristol BS2 8DZ Tel (0272) 24920/279761

Under the auspices of the University of Bristol and the National Birthday Trust

PLEASE COMPLETE IN BLOCK CAPITALS

Child's Surname	
Forenames	
Sex    M <input type="checkbox"/> F <input type="checkbox"/>	<div style="display: flex; justify-content: space-between;"> <div> DAY MTH YR  <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px; text-align: center;">0</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px; text-align: center;">4</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px; text-align: center;">7</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">0</div> </div> </div> <div> Date of Birth </div> </div>
<div style="display: flex; justify-content: space-between;"> <div> DAY MTH YR  <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div> </div> <div> Today's Date </div> </div>	
School Name and Address	
For office use only <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> </div>	

PLEASE READ THE INSTRUCTION BOOKLET BEFORE  
WORKING THROUGH THIS SPECIAL TEACHER QUESTIONNAIRE



## INTRODUCTION

This questionnaire consists of two sections, we suggest that these are completed by the child's class teacher

### SECTION A THE CHILD'S BEHAVIOUR, HEALTH AND SKILLS

Section A contains a series of check lists which provide a standard way of reporting on aspects of the child's behaviour, vision, hearing, expressive language, comprehension, discrimination, dexterity and play activities. Please fill in this section using your knowledge of the child in school. There is no need to test the child on any of the items in this section.

### SECTION B. REMEDIAL AND SPECIAL EDUCATION

Section B asks details about any remedial or special education which the child may be receiving. If necessary, you may wish to consult your Head Teacher on certain questions in this section.

## SECTION A. CLASS TEACHER'S REPORT ON THE CHILD'S BEHAVIOUR, HEALTH AND SKILLS

This section consists of rating scales and check lists. This will enable us to obtain in a standardised manner details about the child's behaviour and skills.

### A 1 BEHAVIOUR SUMMARY

Please complete the scales shown on the next two pages so as to describe first an 'average' 11 year old child attending a mainstream school and then the study child. These scales consist of a number of items which cover some of the attributes and behaviour of 11 year old children.

#### Instructions for using these scales

If you feel that the word at one end of the scale describes your idea of an 'average' child **very closely**, place your check mark like this:

Tries hard   X   — — — — — Cannot be bothered  
or

Tries hard — — — — —   X   Cannot be bothered

If you feel that the word at one end of the scale describes your idea of an 'average' child **quite closely**, but not very closely. You should place your check mark as follows:

Tries hard   X   — — — — — Cannot be bothered  
or

Tries hard — — — — —   X   Cannot be bothered

If you feel that the word at one end of the scale describes your idea of an 'average' child **slightly better** than the word at the opposite end, then place your check mark as follows:

Tries hard — —   X   — — — — — Cannot be bothered  
or

Tries hard — — — — —   X   Cannot be bothered

If you feel that the words at both ends of the scale describe your idea of an 'average' child **equally well**, then you should place your check mark as follows:

Tries hard — — —   X   — — — Cannot be bothered

Please place your check marks in the middle of spaces, not on boundaries.

Please be sure you check every scale, do not omit any.

Please do not put more than one check mark on a single scale.



Two sets of scales or profiles are provided. Please complete the first profile in accordance with your own concept of an average 11 year old child attending an ordinary school and of the same sex as the study child.

Work at fairly high speed through these scales. Do not worry or puzzle over individual items. It is your first impressions, your immediate "feelings" about the items that we want. On the other hand, try not to be superficial, because we want your *true* impressions. We realise that it may be difficult to picture an 'average' child. However, it is *your* impressions that we are interested in. Please fill in the scales as best as you can.

### PROFILE OF AVERAGE CHILD OF 11 YEARS

sensitive to others	— <u>15288</u> —	insensitive to others
obstructive	— <u>15289</u> —	helpful
strain for family	— <u>15290</u> —	easy for family
wanting to join in	— <u>15291</u> —	preferring not to join in
physically unattractive	— <u>15292</u> —	physically attractive
socially skilled	— <u>15293</u> —	socially inept
easily distractable	— <u>15294</u> —	not easily distractable
badly dressed, unkempt	— <u>15295</u> —	well dressed, tidy
accident prone	— <u>15296</u> —	always careful
aggressive	— <u>15297</u> —	not aggressive
knowing right from wrong	— <u>15298</u> —	unaware of right and wrong
confused thinker	— <u>15299</u> —	clear thinker
high self-esteem	— <u>15300</u> —	low self-esteem
excitable	— <u>15301</u> —	calm
clean	— <u>15302</u> —	dirty
popular with peers	— <u>15303</u> —	unpopular with peers
sad	— <u>15304</u> —	happy
persevering	— <u>15305</u> —	unpersevering
good at expressing self	— <u>15306</u> —	bad at expressing self
very immature	— <u>15307</u> —	mature
predictable	— <u>15308</u> —	unpredictable
easy to relate to	— <u>15309</u> —	difficult to relate to
good at concentrating	— <u>15310</u> —	bad at concentrating
easily frustrated	— <u>15311</u> —	not easily frustrated
dependent	— <u>15312</u> —	independent
speech clear	— <u>15313</u> —	speech unclear or impeded
industrious	— <u>15314</u> —	lazy
healthy	— <u>15315</u> —	prone to illness
loving, friendly	— <u>15316</u> —	cold, unfriendly
secure	— <u>15317</u> —	insecure
uncommunicative	— <u>15318</u> —	communicative
poorly co-ordinated	— <u>15319</u> —	graceful, agile
co-operative	— <u>15320</u> —	unco-operative
anxious	— <u>15321</u> —	unworried

Tick one box

What was the sex of the child you have just described?

Male ☐ Female ☐

15322



Please complete the second profile in the manner described for the previous profile, so as to describe the study child

### PROFILE OF THE STUDY CHILD

sensitive to others	— <u>15323</u> —	insensitive to others
obstructive	— <u>15324</u> —	helpful
strain for family	— <u>15325</u> —	easy for family
wanting to join in	— <u>15326</u> —	preferring not to join in
physically unattractive	— <u>15327</u> —	physically attractive
socially skilled	— <u>15328</u> —	socially inept
easily distractable	— <u>15329</u> —	not easily distractable
badly dressed, unkempt	— <u>15330</u> —	well dressed, tidy
accident prone	— <u>15331</u> —	always careful
aggressive	— <u>15332</u> —	not aggressive
knowing right from wrong	— <u>15333</u> —	unaware of right and wrong
confused thinker	— <u>15334</u> —	clear thinker
high self-esteem	— <u>15335</u> —	low self-esteem
excitable	— <u>15336</u> —	calm
clean	— <u>15337</u> —	dirty
popular with peers	— <u>15338</u> —	unpopular with peers
sad	— <u>15339</u> —	happy
persevering	— <u>15340</u> —	unpersevering
good at expressing self	— <u>15341</u> —	bad at expressing self
very immature	— <u>15342</u> —	mature
predictable	— <u>15343</u> —	unpredictable
easy to relate to	— <u>15344</u> —	difficult to relate to
good at concentrating	— <u>15345</u> —	bad at concentrating
easily frustrated	— <u>15346</u> —	not easily frustrated
dependent	— <u>15347</u> —	independent
speech clear	— <u>15348</u> —	speech unclear or impeded
industrious	— <u>15349</u> —	lazy
healthy	— <u>15350</u> —	prone to illness
loving, friendly	— <u>15351</u> —	cold, unfriendly
secure	— <u>15352</u> —	insecure
uncommunicative	— <u>15353</u> —	communicative
poorly co-ordinated	— <u>15354</u> —	graceful, agile
co-operative	— <u>15355</u> —	unco-operative
anxious	— <u>15356</u> —	unworried



## A2 VISION

- (a) Please tick the appropriate box in each row to indicate which of the following statements apply to this child's vision (If the child wears glasses, each statement should refer to the child's vision when wearing his/her glasses )

*Tick one box in each row*

		Applies	Doesn't apply	Don't know
i5357	(i) Vision is normal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If statement (i) applies, please go on to Question A3. If it does not apply please respond to the statements below				
i5358	(ii) Has difficulty in seeing small objects or pictures at a distance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5359	(iii) Has difficulty in recognising a person more than a few feet away	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5360	(iv) Frequently collides with furniture as a consequence of poor vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5361	(v) Has little or no usable vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- (b) Please tick the box opposite the statement which best summarises this child's ability to see to read (If child wears glasses, each statement should apply to child's ability to see wearing his/her glasses )

*Tick one box*

i5362	{	Can see print of normal size	<input type="checkbox"/>
		Can see to read books with large print	<input type="checkbox"/>
		Uses special aids to see large print. Please specify type of aid(s) used	<input type="checkbox"/>
		Uses touch to read (e.g. Braille)	<input type="checkbox"/>
		Impossible to ascertain child's ability to see print or to read Braille on account of his/her poor intellectual capacity	<input type="checkbox"/>

*Tick one box*

	Yes	No	Not sure
i5363 (c) If the child has a vision problem, are any special visual aids used in school to help him/her with his/her school work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please describe type of help



i5364 (d) Does the child have glasses?

<i>Tick one box</i>		
Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

i5365 If Yes, does the child wear his/her glasses at school?

	<i>Tick one box</i>
Always or usually	<input type="checkbox"/>
Sometimes	<input type="checkbox"/>
Seldom or never	<input type="checkbox"/>

i5366 Do you think the child's visual difficulty is adequately corrected by wearing glasses

Yes	No	Not sure	No glasses
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### A3 HEARING

- (a) Please tick the box opposite the statement which best indicates the level of hearing which applies to the child. If the child wears a hearing aid, consider the applicability of each statement to the child when the aid is used

i5367

{	Hearing is normal	<i>Tick one box</i>
	Speech must be much louder than normal for adequate comprehension	<input type="checkbox"/>
	Hears very loud sounds, but has little perception of speech	<input type="checkbox"/>
	Can only understand speech by lip-reading	<input type="checkbox"/>
	Profoundly deaf — little or no usable hearing	<input type="checkbox"/>

*If hearing is normal, please go on to Question A4. If hearing is not normal, please answer (b) and (c) below*

i5368 (b) If the child has a hearing problem, are any special hearing aids or apparatus used in school to help him/her with his/her school work?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please describe type of help

i5369 (c) Does the child have a hearing aid?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

i5370 If Yes, does the child wear the hearing aid at school?

	<i>Tick one box</i>
Always or usually	<input type="checkbox"/>
Sometimes	<input type="checkbox"/>
Seldom or never	<input type="checkbox"/>



#### A4 EXPRESSIVE LANGUAGE

Please indicate which statements describe the child's expressive language, by ticking one box in each row

*Tick one box in each row*

		Applies	Does not apply	Don't know
15371	(i) Can use compound sentences (e.g. two sentences joined by "and" or "but")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If statement (i) applies, please go on to Question A5. If it does not apply, please respond to the statements below.			
15372	(ii) Unable to produce any sound	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15373	(iii) Unable to produce double-syllable babble (e.g. da-da, ma-ma, ba-ba, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15374	(iv) Unable to use gestures to indicate wishes (e.g. pointing to desired object, turning head to indicate refusal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15375	(v) Unable to produce ten single words	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15376	(vi) Unable to produce two-word combinations (e.g. "more milk")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15377	(vii) Unable to produce sentences of four or more words	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15378	(viii) Unable to use the question form correctly (e.g. "have you got?")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### A5 COMPREHENSION

Please indicate which statements describe the child's comprehension, by ticking one box in each row

*Tick one box in each row*

		Applies	Does not apply	Don't know
15379	(i) Can understand complicated sequential instructions (e.g. "Go next door, look in the cupboard and get a rubber")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If statement (i) applies, please go on to Question A6. If it does not apply, please respond to the statements below.			
15380	(ii) Unable to understand any sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15381	(iii) Unable to respond to own name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15382	(iv) Unable to carry out simple commands which require understanding of the words not just the situation (e.g. "fetch your shoes", "bring a book")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15383	(v) Unable to carry out instructions containing terms such as "in", "on", "behind", "in front of", etc. (e.g. "Put the ball under the chair")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## A6 DISCRIMINATION

Please indicate which statements describe the child's ability to discriminate, by ticking one box in each row

*Tick one box in each row*

		Applies	Does not apply	Don't know
i5384	(i) Can tell the time and associate the time on the clock with various events (e.g. mealtimes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If statement (i) applies, please go on to Question A7. If it does not apply, please respond to the statements below				
i5385	(ii) Unable to differentiate "big" and "little" (i.e. cannot tell which of two objects is bigger)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5386	(iii) Unable to name four different colours correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5387	(iv) Unable to differentiate "short and long", "large and small" or "thick and thin"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5388	(v) Unable to tell "left" and "right" on himself/herself (e.g. left foot, right ear)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5389	(vi) Unable to name the days of the week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5390	(vii) Unable to explain the difference between "day" and "week" or "minute" and "hour"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5391	(viii) Unable to tell the time to a quarter of an hour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## A7 DEXTERITY

Please indicate which statements describe the child's dexterity, by ticking one box in each row

*Tick one box in each row*

		Applies	Does not apply	Don't know
i5392	(i) Can normally pour water from one cup to another without spilling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If statement (i) applies, please go on to question A8. If it does not apply, please respond to the statements below				
i5393	(ii) Unable to grasp objects voluntarily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5394	(iii) Unable to grasp objects in both hands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5395	(iv) Unable to transfer objects from one hand to the other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5396	(v) Unable to pick up small objects between the finger and thumb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5397	(vi) Unable to build a tower of bricks by placing one on top of another	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5398	(vii) Unable to build elaborate structures with bricks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## DEXTERITY (Cont.)

*Tick one box in each row*

		Applies	Does not apply	Don't know
i5399	(viii) Unable to cut paper with scissors .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5400	(ix) Unable to cut out shapes accurately with scissors .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5401	(x) Unable to unscrew lids (with a twisting movement) or turn door-knobs .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## A8. AGILITY

Please indicate which statements describe the child's agility, by ticking one box in each row.

*Tick one box in each row*

		Applies	Does not apply	Don't know
i5402	(i) Can use playground apparatus in a safe and assured manner (e.g. swings, ropes, climbing frame) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If statement (i) applies, please go on to Question A9. If it does not apply, please respond to the statements below:			
i5403	(ii) Can kick a ball without falling .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5404	(iii) Can jump up and down .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5405	(iv) Can run without falling over .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## A9. PLAY ACTIVITIES

Please indicate which statements describe the child's play activities, by ticking one box in each row.

*Tick one box in each row*

		Applies	Does not apply	Don't know
i5406	(i) Organises his/her own play with other children .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If statement (i) applies, please go on to Section B. If it does not apply, please respond to the statements below:			
i5407	(ii) Does not play spontaneously .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5408	(iii) Plays by himself/herself but not when other children are present .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5409	(iv) Plays by himself/herself in the presence of other children ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5410	(v) Plays with other children and shows co-operation .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i5411	(vi) Plays structured games with others, (i.e. follows the rules in structured play, such as snakes and ladders, shops) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## SECTION B. REMEDIAL OR SPECIAL EDUCATION

Tick one box

i5412 B1. (a) Is the child ascertained at present time as being in need of Special Educational Treatment (SET)?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If Yes, please give date of ascertainment ..... i5413 / m9 / y9 /  
Category (or categories) of ascertainment:

..... i5414 .....

Tick one box

i5417 (b) Is the child awaiting ascertainment as being in need of SET?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

i5418 If Yes, please give probable category of ascertainment:

.....  
.....

Tick one box

i5419 (c) Does child in your opinion require ascertainment for SET?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

i5420 If Yes, please give probable category in which you expect the child to fall:

.....  
.....

B2. Please indicate which of the following the child is attending:-

Tick one box

- i5421
- An ordinary school and not receiving special educational treatment
  - A special class, set up by an ordinary school
  - A designated special class or unit (e.g. recognised as such by LEA or Regional Council) in an ordinary school
  - A residential special school
  - A day special school
  - Not attending school (Please give reason.....)
  - Other arrangement (Please specify.....)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>



**B3.** Please indicate which of the following arrangements currently apply to this child by ticking the appropriate box:-

5422

*Tick one box*

Full time education in an ordinary class in an ordinary school. ....

☐

Full time education in an ordinary class with some additional help and support .....  
(Describe any arrangements made for remedial education

☐

.....)

Education in an ordinary class but with periods of withdrawal to a special class/unit (teacher or support based). ....  
(Describe any arrangements made for remedial education

☐

.....)

Education in a special class/unit with periods of attendance at an ordinary class .....  
(Describe any arrangements made for remedial education

☐

.....)

Full-time education in a special class or unit with social contact with main school .....

☐

Education in a special school (day or residential) with some school lessons with a neighbouring ordinary school .....

☐

Full-time education in a special school (day or residential) with social contact with a neighbouring ordinary school .....

☐

Full-time education in a special school (day or residential) without social contact with ordinary schools .....

☐

Long-term education in a hospital school or unit .....

☐

Home tuition .....

☐

Other situation .....

☐

(Please specify .....



**B4. Do any peripatetic teachers work with this child?**

*Tick all that apply*

- i5423 No ..... ☐  
 i5424 Yes (Teacher of the deaf) ..... ☐  
 i5426 Yes (Teacher of the blind) ..... ☐  
 i5429 Yes (Other type of peripatetic teacher) ..... ☐

Please specify .....

.....

i5425 (if deaf)  
 i5427 (if blind)  
 i5430 (other) *Tick one box*

If Yes, does this take place at school ..... ☐

At home or elsewhere ..... ☐

At both ..... ☐

Don't know ..... ☐

Please give approximate number of

visits per month ..... i5431

**B5.(i) Has the child been seen in the past year by:-**

*Tick one box in each row*

- |                                   | Yes                      | No                       | Don't know               |
|-----------------------------------|--------------------------|--------------------------|--------------------------|
| i5432 Speech Therapist .....      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i5434 Physiotherapist .....       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i5436 Play Therapist .....        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i5438 Child Guidance Clinic ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If Yes, visits per month ..... i5433

If Yes, visits per month ..... i5435

If Yes, visits per month ..... i5437

If Yes, visits per month ..... i5439

**(ii) Has the child been seen in the past year by:-**

*Tick one box in each row*

- |  | Yes, once only           | Yes, more than once      | Yes, but number not known | No                       | Don't know               |
|--|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|
| i5440 Psychiatrist .....                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| i5441 Clinical or Educational Psychologist ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| i5442 School Medical Officer .....               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Specialist(s)                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| Specify .....                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| Specify .....                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| Specify .....                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |

If Yes, please give reason

..... i5443

..... i5444

..... i5445

..... i5446



*Tick one box*

**i5447 B6.** Has the child's class teacher ever received any formal training for work with children with special educational needs?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**i5448** If Yes, please describe .....

.....

**B7.** Does the child board at school or at a nearby hostel?

*Tick one box*

<b>i5449</b> {	No .....	<input type="checkbox"/>	} <b>If Yes, is the child a</b>	
	Yes, at school .....	<input type="checkbox"/>		5 day boarder .....
	Yes, at nearby hostel ..	<input type="checkbox"/>		7 day boarder .....
				Other arrangement .....
			(Please describe .....	
			.....)	

**i5450**  
*Tick one box*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

**B8.** Do you know approximately how far away the child's school is situated from the home address?

*Tick one box*

Yes .....
No .....
Don't know .....

**If Yes, what is the approximate distance from the school? .....** **i5451** **miles**

*Tick one box*

**i5452 B9.** Is travelling to school difficult for this child?  
(Include weekend travel for 5-day boarders.)

Yes	No	Don't know	Doesn't Apply
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If Yes, please describe** .....

.....

*Tick one box*

**i5453 B10.** Is special transport provided by the Education Authority or similar body for the child to attend school? .....

Yes	No	Don't know	Does not apply
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**i5454** If Yes, please describe .....

.....



**B11.(a)** Each week day, how long does the child spend travelling to school and back?

Tick one box

- i5455 {
  - Doesn't need to travel .....
  - Less than ½ hr .....
  - ½ hr. — less than 2 hrs .....
  - 2 hrs or more .....
  - Not known .....

☐  
☐  
☐  
☐  
☐

i5456 (b) What is the length of the child's school day (count time from leaving home to returning) to the nearest hour? ..... hrs

If the child does not currently attend a special school, special class or special unit, please move on to Question B16

i5457 B12. How was the decision about the child's present placement taken, and who was involved in the discussions leading up to the decision?

.....  
 .....  
 .....

B13. Did any discussion about the child's placement take place with any member of the staff of the school before the decision was taken? .....

i5458

Tick one box

Yes No Don't know

☐
☐
☐

Tick all that apply

- If Yes, was this with:
  - Child's present class teacher? .....
  - Other teacher(s) in this school? .....
  - This school's head teacher? .....

i5459

i5460

i5461

☐  
☐  
☐

B14. Were the parents keen for the child to attend his/her present placement? .....

i5462

Tick one box

- Yes, keen .....  
 Showed no special keenness, but didn't resist placement .....  
 Resisted placement at first .....  
 Other reaction .....  
 Attitude not known .....  
 No parents .....

☐  
☐  
☐  
☐  
☐  
☐



**B15.**How do the parents feel about the present placement?

*Tick one box*

- i5463 Satisfied .....
- Have expressed no feeling on the matter .....
- Dissatisfied .....
- Feelings not known .....
- No parents .....

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

i5464 **B16.**Is there any information about the child's education, development or behaviour which might further describe any problems he/she may have at school? .....

No	Yes
<input type="checkbox"/>	<input type="checkbox"/>

**If Yes, please make further comments in the space below:-**

i5465

Name of person completing this form ..... (BLOCK CAPITALS PLEASE)

Address .....

Head Teacher/Class Teacher/Remedial Teacher/Other, please specify .....

Delete if not applicable

Please tick here ☐ if you would like to receive a synopsis of the report on this part of the CHES Study when it is analysed.

**THANK YOU VERY MUCH FOR YOUR HELP**