**200.50 Necessary Components of Each Required Assessment**

1. **Inventory For Client and Agency Planning (ICAP)**

The Inventory for Client and Agency Planning (ICAP) must be administered by a Qualified Intellectual Disability Professional (QIDP), six months prior to the date on the DDPAS-2, Part II. The ICAP is not a substitute for the adaptive functioning assessment required in a psychological evaluation.

1. **Psychological Evaluation**

**Psychological evaluations must be completed by a licensed clinical psychologist, or a certified school psychologist with credentials from the National Association of School Psychologist (NASP).**

When individuals with intellectual disabilities receive the initial screening for enrollment in services, the following psychological assessment(s) will be acceptable:

**Suspected mild range prior to age 18**

A psychological evaluation must be completed within five years prior to the date recorded on the DDPAS-2, Part II.

**Documented moderate range** **prior to age 18**

A psychological evaluation completed within five years prior to the date recorded on the DDPAS-2, Part II; or two psychological evaluations completed within the individual’s lifespan before the age of 18.

**Documented severe or profound range** **prior to age 18**

A psychological assessment on record i.e. it is not necessary to obtain a new assessment.

Psychological evaluations must include:

* 1. Assessment of adaptive functioning: ~~Licensed psychologists~~ qualified assessors (licensed clinical psychologist, or a certified school psychologist with credentials from NASP) have the latitude to determine which tool should be used. **(Please note that** the ICAP is not an adequate assessment of adaptive functioning.**)**  ~~Suggested instruments are:~~

**Nationally standardized instruments for assessment of adaptive functioning are to be utilized by a** qualified assessor **~~licensed psychologist~~. Examples of such standardized instruments include but are but not limited to:**

* + 1. **American Association of Mental Retardation (AAMR) Adaptive Behavior Scales—2nd Ed.**
    2. **Vineland Adaptive Behavior Scale--II**
    3. **Adaptive Behavior Inventory (ABI) (English and Spanish)**
    4. **Scales of Independent Behavior-R**

**NOTE: questions regarding the acceptability of testing instruments shall be directed to the Department of Human Services Bureau of Clinical Services – (217) 782-9449.**

* 1. Assessment of intellectual functioning.

**Nationally standardized instruments for assessment of intellectual functioning are to be utilized by a** qualified assessor **~~licensed psychologist~~. Examples of such standardized instruments include but are but not limited to:**

* + 1. **Stanford-Binet 5th Ed.**
    2. **Wechsler Adult Intelligence Scale-IV**
    3. **Wechsler Intelligence Scale for Children-IV**

**NOTE: questions regarding the acceptability of testing instruments shall be directed to the Department of Human Services Bureau of Clinical Services – (217) 782-9449.**

* + 1. ~~American Association of Mental Retardation (AAMR) Adaptive Behavior Scales~~
    2. ~~Vineland Adaptive Behavior Scale~~
    3. ~~Adaptive Behavior Inventory for Children (ABIC) (English and Spanish)~~
    4. ~~Scales of Independent Behavior~~
  1. ~~Assessment of intellectual functioning - suggested instruments are:~~ 
     1. ~~Children~~ 
        1. ~~Stanford-Binet LM or 4th Edition~~
        2. ~~Wechsler Pre-School Primary Scale of Intelligence (WPPSI)~~
        3. ~~Wechsler Intelligence Scale for Children-Revised (WISC-R) or the WISC-III~~
        4. ~~McCarthy Scales of Children's Abilities (MCSCA)~~
        5. ~~Kaufman Assessment Battery for Children (K-ABC)~~
        6. ~~Woodcock-Johnson Psycho-Educational Battery Part 1-Tests of Cognitive Ability (W-J, Part 1)~~
        7. ~~The original Slossen~~
     2. ~~Adults~~ 
        1. ~~Stanford-Binet LM or 4th Edition~~
        2. ~~Wechsler Adult Intelligence Scale-Revised (WAIS-R) or the WAIS-III~~
        3. ~~Woodcock-Johnson Psycho-Educational Battery Part 1-Test of Cognitive Ability~~
        4. ~~Slossen~~
     3. ~~Spanish-Speaking~~ 
        1. ~~Spanish Edition Wechsler Intelligence Scale for Children (WISC)~~
        2. ~~Spanish Edition Wechsler Intelligence Scale for Children-Revised (WISC-R)~~
        3. ~~Spanish Edition Wechsler Adult Intelligence Scale (WAIS)~~
        4. ~~Woodcock Spanish Psycho-Educational Battery~~
     4. ~~Non-Verbal, Impaired Verbal Skills/or Deaf, Impaired Hearing~~ 
        1. ~~Wechsler Intelligence Scale for Children-Performance Scale~~
        2. ~~Leiter International Performance Scales (Children and Adults)~~
        3. ~~Wechsler Adult International Scales-Revised - Performance Scale~~
        4. ~~Slossen~~
     5. ~~Blind/Visually Impaired (Children or Adults)~~ 
        1. ~~Wechsler Intelligence Scale for Children-Verbal Scale~~
        2. ~~Wechsler Adult Intelligence Scale-Revised, Verbal Scales~~
        3. ~~Haptic Intelligence Scale for Adult Blind~~
  2. The psychological evaluation must provide a clear and concise summary of the information derived from a **nationally accepted** functional assessment **instrument** and **nationally accepted** standardized intellectual functioning instrument. **Please note that the full assessments must be completed – abbreviated versions of instruments are not acceptable**. This evaluation must, **at a minimum**, include the following elements:
     1. Cognitive/intellectual functioning that includes the scores from the standardized intellectual functioning instrument and an interpretation of these data.
     2. Developmental history that clearly addresses the age of onset of the developmental disability. (Refer to [500.20.G](http://www.dhs.state.il.us/page.aspx?item=53024)).
     3. Educational background
     4. Adaptive skill level
     5. Comprehensive diagnosis list that includes a primary diagnosis
     6. Recommendations for future service delivery (e.g., school services, day program, vocational, employment, senior citizens services).

~~In addition, if indicated for persons with mental illness, the following information will be included:  Personality functioning and psychodynamics utilizing instruments suited to the functioning levels of persons receiving the evaluation, including but not limited to the Reiss Scales and Screen, the Psychological Inventory for Mentally Retarded Adults (PIMRA), the Diagnostic Assessment for the Severely Handicapped (DASH-II), or the Assessment of Dual Diagnosis (ADD).~~

* 1. If substantial differences in test results (e.g., 10 - 15 points) are noted within the current battery of tests or between the current testing and that reported in years previous, the psychologist should attempt to identify and document the cause of the different test results and should refer the individual for additional assessments of various kinds, as appropriate. This may include confirmative retesting or assessments, such as:
     1. IQ
     2. Neurological Consultation
     3. Neuropsychological Assessment
     4. Medical Consultation
  2. Any additional testing must be documented in the individual's record with the results coupled with a clear and concise clinical synthesis.
  3. When a psychologist selects a different test other than the test administered previously, he/she should provide, in the analysis of findings, the rationale for selecting a different test.
  4. Even though it is required that the psychological evaluation be current within five years, the clinical judgment and the service needs of the individual should dictate greater frequency and content of the psychological evaluation.
  5. ~~Where functioning is stable and no additional concerns are raised by licensed professionals, repeated IQ testing may not be considered an essential component of the evaluation.~~