

## Systematic Interview/Observation for OHD

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ School: \_\_\_\_\_

Medical Diagnosis: \_\_\_\_\_ Physician: \_\_\_\_\_ Date of Diagnosis \_\_\_\_\_

Interview Date _____	Observation Date(s) _____
Person(s) Interviewed _____	Observation Setting _____
Completed by _____	Completed by _____
Title _____	Title _____

Information must be gathered from both interview (I) and observation (O). For each item place the appropriate number in the box: 1) adequate 2) adequate with accommodations 3) area of concern. Documentation should be determined to be significantly discrepant from peers. This documentation should include descriptive narrative examples of the education concern, and list any current accommodations.

**Physical Strength** (Document significant discrepancies from peers)

**I**      **O**  
  Limited physical strength resulting in decreased capacity to perform school activities:

Limited endurance resulting in decreased stamina and decreased ability to maintain performance:

**Alertness** (Document significant discrepancies from peers)

Heightened or diminished alertness resulting in impaired abilities:

**I**      **O**  
  Prioritizing environmental stimuli:

Maintaining focus/sustaining effort:

Accuracy of completed task:

**Organization Skills** (Document significant discrepancies from peers and if this is an area of concern complete Organization and Independent Work Skills Observation Interview Worksheet for Elementary, Secondary or Preschool)

**I**      **O**  
  Materials: (Has materials when needed, physical organization of space and materials)

Written Work: (Organized on page in sequential manner, i.e., name at top, items in logical order, capitalization, paragraphs, etc.)

Thoughts: (Tells thoughts or stories sequentially-beginning, middle, and end, stays on topic)

**Work Completion Within Routine Timelines** (Document significant discrepancies from peers)

- I**      **O**  
    Self-Initiates: (Ability to independently begin a task)
- Displays On-Task Behavior: (Ability to continue working on a task)
- Follows Direction: (Can follow directions given to the entire class without individual assistance)
- Homework: (Independently keeps track of assignments, completes them and hands them in on time)
- Participates in Group Activities:
- Number of Assignments Given \_\_\_\_\_ Assignments Turned In \_\_\_\_\_ Assignments Late \_\_\_\_\_
- Work Completion: (Unassisted, adult assisted, peer assisted)

**Independence** (Document significant discrepancies from peers)

- I**      **O**  
    Movement Through School Environment: (Gets to destination without support needed due to strength, endurance, behavior, or attention)
- Clothing/Bathroom/Lunchroom: (Can manage these self care activities without assistance)
- Motoric Management of Materials: (Uses computer, books, notes, pencil, scissors, desk, locker)
- Level of Self-Advocacy: (Requests help, can tell others about disability and needed accommodations and modifications)

**Functional Level of Academic Performance** (Daily classroom performance in relation to peers)

- I**      **O**  
    Reading:  
    Comprehension  
    Fluency  
    Decoding
- Math:  
    Computation  
    Reasoning

Written Language:  
Math  
Language

Other:

**Peer Interaction** (Document significant discrepancies from peers)

**I**   **O**

Student with Peers: (Does the student initiate and interact appropriately?)

Peers with Student: (Do others include student and interact appropriately?)

**Interfering Behaviors** (Document significant discrepancies from peers)

**I**   **O**

Distracting to Self or Others:

Impulsive Behavior:

**Main Strengths**

**I**

Parents:

General Education Teacher/Other Staff:

**Main Concerns**

**I**

Parents:

General Education Teacher/Other Staff: