



Written by the Inclusive Developmental and Therapy Center therapy team · **medically reviewed by Dr Muhammad Suffyan**, MB BS (GMC 8023727), a GMC-registered doctor at Sheffield Children's NHS Foundation Trust.



Inclusive Developmental and Therapy Center

Child Developmental Assessment Form

Assessment date

Confidential clinical document



1 Child & referral details

Child's name

Father's name

Date of birth

Age

Gender

Class / grade

Birth order of child

Phone

Address

Completed by

Assessed by (professional)

Relationship to child: ☐ Parent ☐ Teacher ☐ Child-care provider ☐ Medical provider

☐ School psychologist ☐ Therapist ☐ Other



2 Presenting concerns

Statement of parents / referrer — what are you concerned about?

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Onset of problem — when did it begin, and what was noticed first?

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3 Family history

Father's education Mother's education

Cousin marriage: ☐ Yes ☐ No Family history of disability / similar difficulty: ☐ Yes ☐ No

Details / attachment & relationships



4 Medical & birth history

Previous treatment / diagnoses

Birth history — any complications: ☐ Pre-natal ☐ Peri-natal (birth) ☐ Post-natal

☐ None reported

Notes on general health, medication, sleep, feeding & behaviour

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.....



5 Developmental history

Mark each milestone, and note the approximate age it was reached.

Milestone	Normal	Delayed	Approx. age reached
Smiling & eye contact	☐	☐	
Sitting	☐	☐	
Walking	☐	☐	
First words	☐	☐	
Two-word phrases	☐	☐	
Toilet training	☐	☐	
Feeding self	☐	☐	
Dressing self	☐	☐	



6 Speech, language & communication

Receptive language (understanding)

Expressive language: ☐ Verbal ☐ Non-verbal ☐ Emerging

Notes on expressive language

Speech milestones

Oral cavity / oro-motor Articulation

Voice Resonance

Fluency Prosody / intelligibility



7 Vision & hearing screening

Vision — concerns / result Hearing — concerns / result

■ If the child does not respond to sound or voice, arrange a formal hearing test before concluding a language delay — do not wait.



8 Attention & activity screen ADHD · DSM-based

Rate how often each behaviour is seen, compared with children of the same age. Adapted from the DSM criteria for ADHD — a screening aid, not a diagnosis.

Behaviour	Never	Sometimes	Often	Very Often
Inattention — Six or more marked “Often / Very Often” is clinically significant				
Does not give close attention to details, or makes careless mistakes in schoolwork or activities	☐	☐	☐	☐
Has trouble sustaining attention in tasks or play activities	☐	☐	☐	☐
Does not seem to listen when spoken to directly	☐	☐	☐	☐
Does not follow through on instructions; fails to finish schoolwork, chores or duties	☐	☐	☐	☐
Has trouble organising tasks and activities	☐	☐	☐	☐
Avoids, dislikes or is reluctant to do tasks needing sustained mental effort (e.g. homework)	☐	☐	☐	☐
Loses things needed for tasks (toys, pencils, books, tools, assignments)	☐	☐	☐	☐
Is easily distracted by external stimuli	☐	☐	☐	☐
Is forgetful in daily activities	☐	☐	☐	☐
Hyperactivity — Part of the hyperactive-impulsive count (six or more combined)				
Fidgets with hands or feet, or squirms in seat	☐	☐	☐	☐
Leaves seat when remaining seated is expected	☐	☐	☐	☐
Runs about or climbs when and where it is inappropriate	☐	☐	☐	☐
Has trouble playing or enjoying leisure activities quietly	☐	☐	☐	☐
Is 'on the go' or acts as if 'driven by a motor'	☐	☐	☐	☐
Talks excessively	☐	☐	☐	☐

Behaviour	Never	Sometimes	Often	Very Often
Impulsivity — Counts with hyperactivity toward the same total				
Blurts out answers before questions have been completed	☐	☐	☐	☐
Has trouble waiting his or her turn	☐	☐	☐	☐
Interrupts or intrudes on others (e.g. butts into conversations or games)	☐	☐	☐	☐

How to read it: six or more items marked “Often” or “Very Often” in **Inattention**, and/or six or more across **Hyperactivity + Impulsivity**, that have lasted 6+ months, appear before age 12, and show in more than one setting (home *and* school), point toward ADHD and warrant a full clinical assessment. Fewer items, or a single setting, usually do not.



9 Autism observation checklist

Tick every sign observed, across all four domains. Add comments with concrete examples. This structures observation — it does not diagnose.



Communication

Delay in, or lack of, spoken language

- | | |
|--|---|
| ☐ Delay in speaking first words | ☐ Delay in combining words |
| ☐ Delay in current language ability (quantity or quality) | |

Difficulty holding a conversation

- | | |
|---|--|
| ☐ Does not make small talk (just to be friendly) | ☐ Rarely / never initiates conversation |
| ☐ Difficulty sustaining conversation | ☐ Difficulty discussing topics chosen by another person |
| ☐ Says inappropriate things | ☐ Does not understand sarcasm or humour |

Unusual or repetitive language

- | | |
|--|--|
| ☐ Repeats what others say (echolalia — e.g. movies, people) | ☐ Uses incorrect pronouns (e.g. "she" instead of "I") |
| ☐ Speaks in an overly formal way | ☐ Unusual volume, rate or pitch |

Play that is not developmentally appropriate

- | | |
|--|--|
| ☐ Does not imitate (e.g. vacuuming, phone) | ☐ No / limited pretend play (e.g. with a doll or action figure) |
| ☐ No imaginary play (e.g. pretending one object is another) | |

Comments / examples



Restricted, Repetitive & Stereotyped Behaviours

Interests that are narrow, intense or unusual

- ☐ Nonfunctional play with toys (e.g. lining up toys)
- ☐ So focused on one thing that others are excluded
- ☐ Repeatedly watching individual scenes in movies

Unreasonable insistence on sameness / routines

- ☐ Rituals or routines that must be done in a particular way or order
- ☐ Upset if objects are rearranged
- ☐ Difficulty with minor changes in routine
- ☐ Difficulty with transitions

Repetitive motor mannerisms

- ☐ Hand flapping or wringing
- ☐ Head banging or other repeated movements
- ☐ Toe walking

Preoccupation with parts of objects

- ☐ Plays with parts of toys (e.g. doors, wheels, strings)

Comments / examples



Social Interaction

Lack of social or emotional reciprocity

- ☐ Does not respond to his / her name
- ☐ Limited empathy towards others' feelings
- ☐ Does not enjoy or seek out social games (e.g. peek-a-boo)

Difficulty using nonverbal behaviours in interaction

- ☐ Inconsistent eye contact (unusual quality or coordination)
- ☐ Does not direct facial expressions towards others
- ☐ Does not go to others to be comforted when hurt
- ☐ Does not nod for "yes" or shake head for "no"
- ☐ Does not read others' facial expressions (e.g. feelings)
- ☐ Does not recognise personal space

Little sharing of pleasure, achievements or interests

- ☐ Does not point to indicate wants (e.g. bottle, toys)
- ☐ Does not share things with others
- ☐ Does not point to indicate interests (e.g. plane, dog)
- ☐ Is not interested in praise or compliments

Difficulty with age-appropriate peer relationships

- ☐ Limited / unusual response to peers approaching
- ☐ Prefers to be alone
- ☐ Limited / unusual initiation with peers
- ☐ Gets along only with much older or younger children

Comments / examples



Sensory & Associated Concerns

Unusual sensory interests

- ☐ Strong sensory preferences (e.g. food textures)
- ☐ Sensory-seeking behaviour (e.g. excessive smelling or touching)
- ☐ Sensory interests direct activity more than toys or games

Unusual responses to sensory input

- ☐ Indifference to pain, heat or cold
- ☐ Sensitivity to lights or sounds
- ☐ Irritated by clothing or tactile input

Delayed motor skills

- ☐ Delayed gross motor (e.g. odd gait, poor balance)
- ☐ Delayed fine motor (e.g. handwriting, buttoning clothes)

Comments / examples



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Clinical summary & observations

Behaviour during assessment, strengths, and overall clinical impression

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11

Impression, recommendation & referral

Clinical impression / provisional diagnosis

Recommendation

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Refer to



12 Therapy goals

Long-term goals

Short-term goals

Professional's name & qualification Signature Date

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Confidential clinical document. A screening & observation aid based on standard, research-based practice — not a diagnosis.
Store securely and share only with those directly involved in the child's care.