



SAIL Assessment Report

Setting up Access for Independence and Learning



Curated learning pathways for independent living

Anand

Date of Birth

10/07/2014

Date of Reporting

13 Nov 2025



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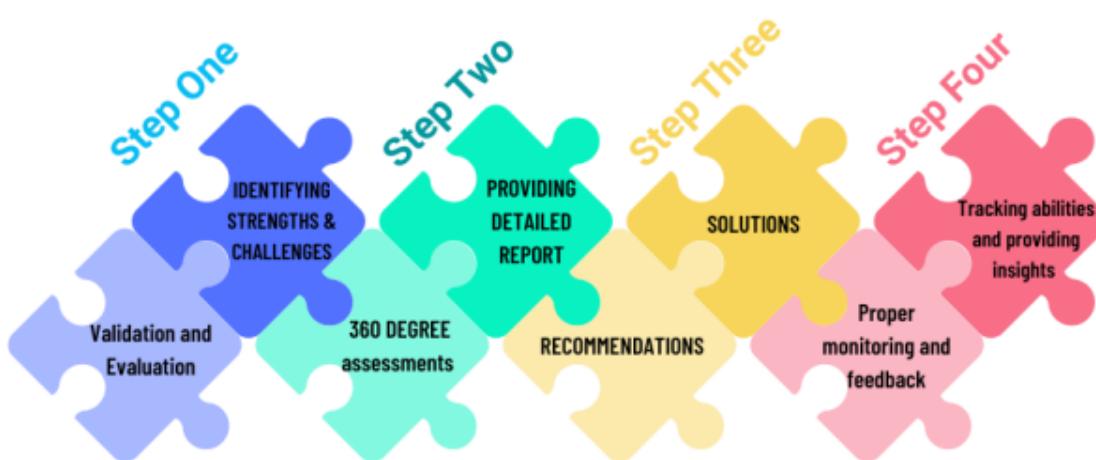


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FOREWORD

The overarching goal of this assessment is to determine the learner's current performance level in all areas of development. This is purely a functional assessment and has an eclectic approach that is non-diagnostic and non-measure based. At Elina, our assessment process is carried out on a strength-based approach, which enables us to see the best in a child – the value they bring by just being themselves and capitalizing on their strengths rather than focusing on their flaws. In a strength-based approach, the primary focus is not on problems or deficits, and the child is supported in recognizing the inherent resources they have at their disposal that can be used to effectively manage any condition and its associated challenges. At Elina, we place a lot of emphasis on observing the factors that help the child to realize his/her best potential, and hence details on Environmental, Emotional, Physiological, Psychological, and Social factors are recorded in detail to enable a clear picture of the intervention.

This assessment process assists in guiding the parents to the right set of resources and evolves with an intervention plan. This process also makes way for collaboration between the child, their family, the school community, and the professionals supporting them, allowing them to work together to determine an outcome that draws on the child's strengths and assets, as supported by our CoMPASS program.



INTRODUCTION:



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Rehaan is a 10-year-old child who likes to explore the environment and prefers to engage in fixed routines. He was assessed using Elina's assessment tool comprising video observations, parent questionnaires, parent interviews, and direct interaction, as components of observation and assessments.

Rehaan has been living with his parents in Chennai, with his maternal and paternal grandparents staying in close vicinity. A psychological assessment was conducted in May 2025 by Dr.Venkateshwaran and medication (Aripiprazole -2.5 mg) is being administered once daily. Rehaan attended OT, ABA, art and speech therapies till 6 years of age. He is presently continuing art therapy once a week, along with individual training sessions in gym twice a week and special education classes in Maths and reading twice a week. Rehaan is studying in Grade 3 in HLC International School for blended learning.

This document is our observation and assessment of Rehaan's functional skills, motor abilities, sensory processing, and cognitive skills. This report is based on our observation of Rehaan's response to the activities prescribed by us. It is also based on our interactions with him and his parents through online and direct meetings and their answers to the questionnaires sent by us. Given below is a summary of observations made with Rehaan. It is a brief report of his responses during the various modes of interaction as described above.

1. CURRENT PERFORMANCE LEVEL IN 8 AREAS:

Physical	Rehaan has age-appropriate height and a lean frame. He often eats independently and does not have specific food preferences. Rehaan falls asleep easily and has a good sleep routine. He could actively engage in physical activities at the gym and during direct observation. Body awareness is developing and practice of hygiene needs work. Rehaan could sustain attention in fixed preferred tasks and could be motivated to engage in a few non-preferred tasks.
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Gross Motor	<p>Rehaan demonstrates independence in basic locomotor skills such as sitting, standing, running, jumping, and climbing. He is able to navigate stairs with alternating feet and carry a bag while doing so. During obstacle negotiation, Rehaan displayed crawling and creeping movements, though crawling required modelling and his knees did not touch the ground. While running, he maintained a steady pace but tended to look down, indicating limited head and neck alignment. Hopping was observed with his dominant right leg, although he needed breaks between hops, suggesting that continuous motor sequences are still developing.</p> <p>His object control skills are developing. He was able to throw, catch, and kick a soft ball with prompts, but showed a preference to sit on the sofa during the activity. Rolling was not observed in the session.</p> <p>Rehaan maintains an appropriate posture while sitting and standing; however, he was unable to hold an upright posture during climbing tasks and often looked down while moving.</p> <p>Motor planning is still emerging. He can carry out known tasks independently, but unfamiliar tasks require support through modelling or prompts. His gait is appropriate during walking, with occasional toe walking noted. In terms of balance, he could stand on one leg briefly and showed appropriate balance while cycling. Continuous hopping and standing balance are still emerging. Agility was observed during transitions between different positions, indicating emerging dynamic control.</p>
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Gross Motor	Coordination across upper and lower limbs is developing. While eye-hand and eye-foot coordination were appropriate, stiffness in the lower body and difficulty in postures such as squatting were noted. Visual prompts were needed for imitation-based tasks. Midline crossing and lateral movement remain emerging, and Rehaan could not walk in a straight line with feet aligned. Though his muscle tone is generally good, tightness in some groups was observed, possibly restricting flexibility. Despite these challenges, Rehaan displayed appropriate endurance while climbing.
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Fine Motor	<p>Rehaan demonstrates emerging fine motor abilities across various domains. Finger isolation was observed during imitation exercises and in tasks like tearing and sticking, indicating foundational control. However, use of the index finger remains inconsistent, particularly in grasp-based activities, affecting his hand and finger coordination. His pincer grasp is emerging, with occasional use of alternate grips, and he often avoids using the index finger when holding small items. Grip strength and endurance are inconsistent—he sometimes strains his wrist or fingers while applying pressure, particularly in tasks like pasting or using tools.</p> <p>In-hand manipulation skills are emerging. Rehaan was able to perform simple rotation (e.g., opening and closing bottle lids), though he used his palm rather than fingertips for closure. Shifting and translation were not consistently observed. He could manipulate tools such as a knife, peg, ladle, and bottle for short durations, but consistent use across varied contexts remains a work in progress. Object manipulation and bilateral coordination are emerging. He applies excessive or inconsistent pressure and tends to use both hands without clear role differentiation unless prompted.</p>
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Fine Motor	In the area of handwriting and visual motor integration, Rehaan demonstrates developing pencil grip. He holds the pencil with three fingers at the tip or sometimes far from the point, occasionally omitting the use of his index finger. Pencil pressure is variable, depending on his grasp. His writing posture is still developing—he tends to rest his left hand on the chair and his right hand away from his body during writing tasks. Letter formation is inconsistent with incomplete strokes, and both letter size and word spacing remain emerging skills. Legibility and writing fluency are still developing, with Rehaan requiring repeated prompts to engage in writing and sustain focus. Speed of writing needs major support.
Sensory	Anand's visual perception is his major way of assimilation of information. Anand seeks tactile and movement activities and avoids socio-emotional stimuli. He is sensitive to auditory stimuli and has a low registration of attentional stimuli. He often is observed to perceive proprioceptive feedback appropriately. Intervention in tactile, oral, vestibular, and proprioceptive areas will help in self-regulation.

Cognitive	Anand visual perceptual skills and patterns are good; auditory perceptual skills need to be worked on. He could point to pictures, action words, and his body parts. He could sort basic shapes, colors, pictures, and words. Anand was able to read but was not audible. Anand could write the dictated words and needed prompts to answer in sentences. He is aware of basic mathematical operations and processes. Basic numeracy skills are observed. However, understanding mathematical concepts and its application needs a lot of exposure. Left/right awareness, vocabulary, and comprehension need to be worked on. Working memory, sustained attention, cause/effect, problem-solving, and critical thinking need to be worked on. Self-awareness as well as awareness of task initiation, sustenance, and completion need more exposure.
Speech and Communication	Receptive communication is present when he attends to the information/instruction. He speaks in a low tone; likes to hum/sing during tasks. Anand needs a lot of motivation to express himself. The intent for communication, initiation, sustenance, and closure of communication could not be observed. Comprehension of a few question words was observed. Clarity and articulation were observed when mike was used.
Social and Emotional	Anand could adapt to the new environment during face-to-face interaction. He had to be prompted for social etiquette. He was cooperative for most of the activities done by the assessors and was able to communicate his disinterest through his behaviors. He had limited eye contact, yet could respond appropriately to gestures like hi five, bye, etc. with prompts and modeling. He was aware of basic emotions and expressed them through facial expressions.

Play	Anand preferred to explore the environment when the opportunity is provided and engaged in solitary play. Pretend play could not be observed. Joint attention could be invoked in tasks of his interest. Social play is yet to develop
ADLs	Rehaan demonstrates developing independence in his daily living activities with notable strengths in basic self-care. He manages dressing and bathing independently and is able to feed himself, though the use of screens during meals and inconsistent hand use suggest the need for greater mindful engagement. While toileting and brushing are developing areas, he benefits from verbal prompts to follow steps accurately and maintain hygiene. His awareness of hygiene, such as washing hands and avoiding wiping on clothes, is emerging and needs adult guidance for consistency. Rehaan is aware of his belongings and can locate them when asked, though follow-through (like picking them up) requires prompting. His functional mobility within a familiar space is appropriate. Skills like handling digital tools and money could not be observed, though structured exposure to such responsibilities can further support his functional independence.

II. DAILY ROUTINE

According to his parents, Anand has a structured daily routine. He engages himself in karate and swimming classes in the evenings. Anand also has the habit of doing yoga before bedtime.

III. SWOT Analysis:

1) Strengths:

- Following one on one instructions

- Visual skills and patterns
- Cognitive skills
- Independence in activities of daily living
- Receptive communication
- Visual memory
- Ability to fall into a routine

2) Work on

- Sensory integration - Proprioceptive, tactile, vestibular, oral
- Social and emotional skills
- Muscle strength/posture
- Expressive communication - Tone, clarity
- Gross and fine motor skills
- Writing skills
- Self-awareness
- Managing stress and anxiety
- Sustained attention
- Comprehension

3) Opportunities

- Promoting independence in everyday life through exploration, observation, and modeling
- Exposure to a lot of situations will also encourage him to communicate and observe appropriate social skills
- Providing opportunities for making mistakes and self-correction
- Channelizing energy with goal-driven physical activities
- Right teaching strategy will help him connect his observations to his knowledge- OT, special education
- Co-regulation strategies to manage emotion

4) Threats

- Too many verbal prompts
- Outcome-oriented approach
- Managing academic stress

Disclaimer

- This is not a clinical evaluation.
- The assessment provided is not intended to replace or diagnose any medical advice given to the child by a qualified registered medical doctor.
- The findings are based on the child's performance during online and offline interactions. This report is solely based on the responses and results submitted during the assessment process and parental inputs.
- This report does not serve as the basis for exam concessions or exemptions.