# **Holistic Assessment Report**

**1.1: Assessment information**

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| **Assessment date** | July 2021 |
| **Assessment venue** | Remote via Zoom |
| **Assessor** | Meghan Reed and Trainee Needs Assessor |
| **Assessment attended by:** |
| **Individual Assessee Only:**  | **Yes** |
| **Individual and Supporter:**  | **No** |

**1.2: Assessee details**

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| **Name** | Adam Hyland |
| **Preferred pronouns** | He/Him |
| **Home address** | Address, UK |
| **Date of birth** | Date of birth  |
| **Mobile** | 01234 567 890 |
| **Email** | Email@email.co.uk |

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| **Student / Employee / Other**  | Student |
| **Education Provider / Organisation / Other Details** | The University of Inclusion |

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| **VIDEO 2 TASK – what does Adam do at University? If Student: Current educational level and daily routine****If employee: Current role and job description (including working patterns, hours of work and location)****If other: Daily activities** |
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**1.3: Current Technology**

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| **Current access to Information Technology and Assistive Technology** | Adam has access to a Windows Computer, Dell XPS 13 running Windows 10. Adam has a printer that he can use at university.Adam has an iPhone 8 which is quite new.  |
| **Any additional supporting information**  |
| Adam does not have access to Wi-Fi at home but can access Wi-Fi at university and at a nearby café.  |

**2.1: Identified challenges**

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| **Challenge experienced (current health conditions or ‘disability’)** | Adam experiences Dyslexia and he describes this as primarily impacting his reading and focus.  |
| **Disability-related impacts on the ability to complete daily tasks** |
| **VIDEO 3 Task: What challenges does Adam face?**Identify any areas of challenge for the individual each day  |
| **Further background and context** |
| **VIDEO 2 TASK – What are Adam’s strengths?**  |

**3: Recommendations**

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| **VIDEO 3 Task A: Recommendation**  |
| **Name of recommendation** |
| Justification - barrier and assistive solution |
| Why is this tool recommended and how does it support in overcoming one of the specific barriers you’ve identified above  |

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| **VIDEO 3 Task B: Recommendation** |
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| Justification - barrier and assistive solution |
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| **VIDEO 3 Task C: Recommendation** |
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| Justification - barrier and assistive solution |
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