



## Pandemic Anxiety Screener for Students™-12

# Parent Form Score Report

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Generated by



**Client name:** Sample Client  
**Client ID:** SC\_PASS-12  
**Age:** 8  
**Date of birth:** 10/31/2011  
**Gender:** Male  
**Grade:** 3rd  
**Test form:** Parent  
**Rater's name:** Mrs Portman  
**Rater's relationship to client:** Mother  
**Test date:** 10/14/2020

*This report is intended for use by qualified professionals only and is not to be shared with the examinee or any other unqualified persons.*

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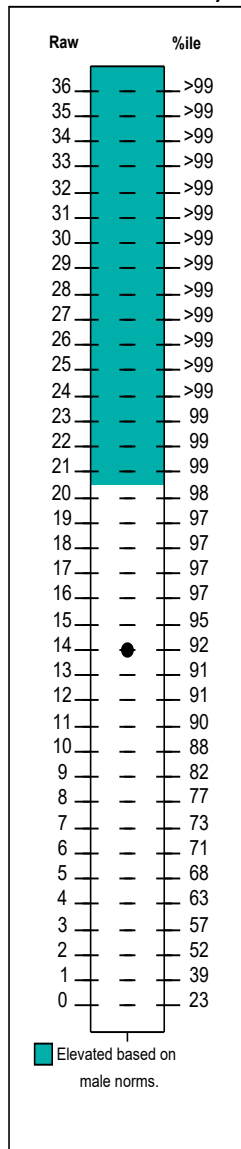
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## PASS-12: Parent Form Validity

Before examining the Pandemic Anxiety Screener for Students–12 (PASS-12): Parent Form results, it is essential to carefully consider the validity of the data provided. Because informant rating scales require users to rely on a third party for ratings of an individual’s behavior, their inherent nature carries potential for score bias.

## PASS-12: Parent Form Score Summary and Interpretation

### Parent Form Score Summary



Total raw score	Percentile	Classification
14	92 <sup>nd</sup>	Within Normal Limits

Mrs Portman, the Mother of an 8-year-old named Sample, completed the parent form of the PASS-12 on 10/14/2020. The parent form of the PASS-12 is a 12-item scale completed by caregivers of children ages 4 to 18 years to measure stress and anxiety related to pandemic fears and concerns. Sample’s PASS-12 total raw score of 14 (92<sup>nd</sup> percentile) is **Within Normal Limits**, suggesting Sample is experiencing minimal stress and anxiety symptoms that are unlikely to be negatively affecting Sample’s current functioning. Monitor symptoms and follow up as indicated.

The PASS-12 should not be used in isolation as a diagnostic tool. Instead, it should be used in conjunction with other sources of information about the examinee, including detailed history, other behavior ratings, clinical interviews, and, when possible, direct observation in the natural setting. By examining converging evidence, you can confidently arrive at a valid diagnosis and an effective treatment plan. Appropriate training and clinical supervision is necessary to ensure competent use of the PASS-12.

The PASS-12 provides percentiles to enable you to interpret the child’s level of stress and anxiety as impacted by a pandemic and reported by caregivers.

### Total Raw Score Interpretive Ranges for the PASS-12: Parent Form

Percentile range	Classification
<=98	Within Normal Limits
>=99	Elevated

Note. Female n = 123; Male n = 131. Percentiles represent the percentage of children in the standardization sample who fall below a given raw score for their specified gender.

Reviewing individual item responses can yield useful information for understanding the specific nature of the child’s score. Placing too much interpretive significance on individual items, however, is not recommended because of lower reliability of individual items relative to the scale.

## Items and Responses

This questionnaire contains statements that describe how students may think, act, or feel. Read each item, and, to the best of your knowledge, select how often the following statements have happened to your child **in the past 2 weeks**.

PASS-12: Parent Form Items and Responses	
Item	Response (score)
1. Worries about others ...	Rarely (1)
2. Tries to avoid ...	Often (2)

*Redacted for Sample Report*

## PASS-12 Interventions

The following recommendations and classroom accommodations are offered to assist Sample in feeling safe, comfortable, and secure in an educational setting and to assist their caregiver(s) in providing more specialized care during a pandemic. These recommendations are intended to serve as suggestions or general ideas tailored to suit Sample’s current educational needs. It should be noted that a screening measure is not a substitute for a more comprehensive assessment inclusive of administering rating scales, making behavioral observations, and using clinical judgment in order to more definitively ascertain Sample’s overall social–emotional and behavioral profile.

### **What can caregivers do?**

These recommendations can be provided directly to those providing care to children who are impacted by a pandemic.

**1. Show empathy and patience.** Emotional and behavioral changes are to be expected during and after a pandemic. There is no one signature emotional reaction that children display when under stress; rather, their reactions are unique and varied. For instance, some children may be irritable or clingy, and some may regress, demand extra attention, or have difficulty with self-care, sleeping, and eating. You can help by showing empathy and patience and by calmly setting limits when needed.

*Redacted for Sample Report*

### **What can children do?**

These recommendations can be provided directly to those providing care to children who are impacted by a pandemic.

**1. Practice healthy hygiene habits.** Wash your hands multiple times a day for 20 seconds. Singing “Twinkle, Twinkle, Little Star” or “Happy Birthday” twice takes about 20 seconds. When you need to sneeze or cough, use a tissue or do it into the bend of your elbow. Throw away used tissues immediately after sneezing or coughing. Build your immune system to fight off illness by eating a balanced diet, getting enough sleep, and exercising regularly.

*Redacted for Sample Report*

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**End of Report**

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