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Learn how to choose and apply the right occupational therapy assessments, from ADLs to cognition. Improve outcomes, guide care plans, and elevate your clinical practice. Reliable occupational therapy assessments are essential tools in our clinical toolkit. They clarify how a condition or environment impacts a patient, and guide our decisions to ensure patient care stays focused and flexible. Choosing the appropriate assessment for what we want to measure is how we define our patients overall outcomes. Reliable assessments also help foster interdisciplinary communication and keep a client-centered approach front and center in practice.OT assessments arent one-size-fits-all. Some examine how broader skills translate to daily independence, while others examine specific muscle and neurological performances. Lets examine what these assessments do for us as clinicians, their different categories, and how we can best use each to help our patients reach their goals. Understanding Occupational Therapy AssessmentsBut what exactly qualifies as an OT assessment and how do we know which type to use? Before diving into specific assessment categories, its helpful to step back and understand both standardized and non-standardized assessments. Broadly speaking, occupational therapy assessments help us evaluate our patients ability to engage in meaningful occupations. More specifically, assessments can isolate and measure specific skills or facets of ones occupational profile. Non-standardized assessments can be observation or interview-based, but dont have the same vigor as standardized assessments might. However, they can often be released for professional use more quickly than standardized assessments. Standardized assessments have a strict administration standard, clear instructions, scoring rubrics, and pre-defined criteria for evaluating a patients performance. The standardization process typically takes years but consistently results in a reliable data collection across therapists and settings. Categories of Occupational Therapy AssessmentsOccupational therapy practice centers around the Occupational Therapy Practice Framework (OTPF) that organizes human occupation into key domains, such as activities of daily living (ADLs), instrumental activities of daily living (IADLs), rest and sleep, education, work, and play. Each of these areas rely on a range of skills, like motor function, cognition, and sensory processing, that can either support or inhibit participation. The goal of occupational therapy assessments is to identify which of these skills are helping or holding a patient back. Lets take a look at the major categories of occupational therapy assessments: Clinical observationActivities of daily living (ADLs) Motor skillsInstrumental activities of daily living (IADLs)CognitionSensory integrationMental healthClinical observation is the most common way occupational therapists evaluate patients initially, where we can see how muscle strength, coordination, neurological skills, fine motor skills, gross motor skills, and cognition all merge to complete a task. These observations help guide OTs toward more specific assessments that isolate certain skills. Activities of Daily Living (ADLs) Activities of daily living (ADLs) are frequently assessed in adults by observing the real-time act of bathing and dressing, or simulating bathing and dressing tasks with dry washcloths or an extra shirt. Advanced rehabilitation equipment like the Simulator II and PrimusRS allow occupational therapists to simulate hundreds of ADLs, job tasks, and sports in the clinic. Simulate job tasks like sawing with the Simulator II Motor Skills Motor skills are constantly assessed throughout all clinical observations, and motor skill deficiencies can significantly limit ones performance. Generally, I look at how different motor skills are working within an intervention or task and then relate that to a patients holistic performance in my session notes. There are, however a few more formal motor skill assessments that can be helpful: The AMPS (Assessment of Motor and Process Skills) looks at motor skill items in an IADL setting. The Motor Assessment Scale (MAS) looks at how motor skills affect ADL related tasks after a stroke. The Peabody Developmental Motor Scales (PDMS-2) and Bruininks-Oseretsky Test of Motor Proficiency (BOT-2) are diagnostic tools for children to look at any developmental delays. In my setting (inpatient rehab), we only do the AMPS once in a while because it takes about an hour from start to finish and has to be done with a certified practitioner. The MAS is helpful when evaluating someone recovering from a stroke, but it isnt standardized for populations beyond CVAs. I find that 80% of the time, Im evaluating motor skills in a more informal style through observations. Instrumental Activities of Daily Living (IADLs) IADLs consist of taking care of others, maintaining a dwelling, driving, grocery shopping, etc. These are important life tasks that are also necessary for holistic safety, health, and wellness. These tasks are generally more arduous than ADLs and demand a higher level of endurance. Speed tests are helpful in assessing functional capacity to accomplish IADLs safely. Cognition Cognition assessments are typically a tricky to administer, depending on the language skills of the patient (especially post-neurological injury). Cognition assessments can also fall into categories focusing on memory versus safety, judgment, and executive function. For example, the Brief Interview for Mental Status (BIMS) is a 5-minute assessment we use in the hospital frequently to test a patients memory an orientation. However, in my experience, its doesnt necessarily translate to accurately representing the memory skills needed to handle bills, medications, or sequencing through a task. Other more formal cognitive assessments OTs can use include the MoCA, the SLUMS, the Clock Drawing Test, the MMSE, the Allen Cognitive Level Screen, and a few others. Sensory Integration Sensory integration is a skill thats necessary for effective self-regulation and helps us to interact with the world successfully. These assessments are typically seen in children who have neurodiverse needs, but not always. The Sensory Profile is a report-based assessment thats commonly used in pediatric practices and looks at what sort of sensations a child might be avoiding, seeking, and how they choose to regulate themselves when theyre stressed. The sensory processing measure (SPM-2) is an assessment that spans infant age to older adults and looks at how someone processes and responds to sensory input across multiple contexts. Mental Health Mental health assessments look at how symptoms of mental health diagnoses or conditions affect ones ability to function. Most of the time, symptoms that negatively impact someone show up as not participating in ADL or IADL tasks. Most assessments that OTs use for mental health populations are self-reflective inventories, like the Beck Depression Inventory or Barratt Impulsiveness Scale, and are then clinically correlated to functional performance by the OT. Commonly Used Occupational Therapy Evaluations Occupational therapy assessments or evaluations can cover an incredibly broad range of skills and domains. Some have a more rigorous implementation and scoring process, while others are considered an inventory-type assessment, focusing on the perception of a disability. The following are some of the most commonly used occupational therapy evaluation tools: Pediatric Evaluation of Disability Inventory (PEDI) The PEDI is a standardized assessment that assess a child's scale responses to a checklist of functional activities. 2. The questionnaire-style assessment is typically administered to the child's caregiver or parent, and consists of 100 items that assess self-care, mobility, and social functioning. The original PEDI is appropriate for children ages 3 months up to seven and a half years old, while the PEDI-CAT is most appropriate for newborns up to 21-year-olds with existing developmental disorders. 3. Test of Grocery Shopping Skills The Test of Grocery Shopping Skills is a non-standardized assessment typically reserved for those with serious mental illness or cognitive deficits such as TBI, stroke, dementia, and schizophrenia. 4. It focuses on the abilities of someone to access, navigate, organize, and complete shopping tasks in a medium-sized grocery store. 5. The administration protocol consists of the therapist timing the patient during each stage of shopping and marking certain task accuracy. In my inpatient rehab department, we have a very small, simulated grocery store with a few shelves, empty product boxes, fake fruit, and a cash register. I use this with patients to get an idea of how they would do it in the community, but have to keep in mind that in the real world, the space would be larger, there would be more stimulation with noise and aisle traffic and choices, and a higher cognitive demand overall. School Function Assessment (SFA) The SFA is a non-standardized assessment designed for primary school children with disabilities, ages 4 to 12 years old. 6. This lengthy, subjective question assessment helps provide an initial baseline functional measure within the school setting. 7. The SFA is completed by professionals who know the student and have seen the student in a school setting, most often a special education teacher. 9-hole Peg Test The 9-hole Peg Test is a standardized assessment focusing on fine motor skills by timing a patient to see how quickly they can remove and replace pegs with their dominant and non-dominant hand. This assessment uses age-normative data for males and females to objectively demonstrate fine motor dexterity in the setting of neurological or physical injury or disability. Ive used this assessment in my practice often with neurological injuries. The 9-hole peg test evaluates fine motor dexterity during an occupational therapy session. Sensory Profile (SP) The SP is a standardized assessment that measures a child's sensory processing abilities. It is typically completed by a professional in a clinical setting. The resulting data greatly benefits outcome tracking in physical therapy and supports clinical decision-making and documentation. Learn About Occupational Therapy Assessment Tools. Kawa Model Kawa is the Japanese word for river. The Kawa Model can be used by both adolescent and adult clients and uses the natural metaphor of a river to depict ones life journey. Occupational therapists try to enable, assist, restore, and maximize their clients life flows. The Kawa Model can be used as a conceptual model of practice, frame of reference, as well as serve as an assessment tool and modality. The Canadian Occupational Performance Measure (COPM) The COPM helps OTs identify issues of personal importance to a client and detects changes in a clients self-perception of occupational performance over time. The COPM is popular with Occupational Therapists as it enables personalized health care, and is currently used by OTs in more than 40 countries. Katz Index of Independence in Activities of Daily Living (Katz ADL) The Katz ADL is used with clients to assess their functional status. It also provides a measurement of a clients ability to perform independent activities that are part of their daily routine. Occupational therapists typically use the Katz ADL to detect problems in everyday activities, so they can plan more specific care. Stroke Impact Scale The Stroke Impact Scale was developed at the University of Kansas Medical Center, and is used with adult occupational therapy clients after theyve had a stroke. This scale measures the aspects of stroke recovery found to be important to patients and caregivers. This can include: Strength Hand function Mobility Everyday activities Emotion Memory Communication Social participation. Executive Function Performance Test (EFPT) The EFPT can be used with both adolescence and adult occupational therapy clients to assess how a client completes four basic tasks. These tasks are essential for self-maintenance specifically cooking, telephone use, medication management, and bill payment. How to comply with copyright and intellectual property Most occupational therapy assessments are copyrighted and protected by intellectual property laws. This means you have to purchase the assessment in order to use it, and you cant copy or use it anywhere else. However, its typically acceptable to make references to an individual assessment in your notes and documentation, as long as youre not copying parts of the assessment. Example: Beery VMI was administered to client on 3/1/2022. Upon scoring of the Beery VMI, client was noted to have a raw score of 100 and a standard score of 50. Therapist interpretation of the Beery VMI results is that client is noted to demonstrate decreased visual motor integration. The example shows a reference to the Beery VMI, but doesnt replicate any actual parts of the assessment. Remember, if youre not sure whats acceptable or have any outstanding questions, its best practice to check directly with the assessment publisher, or in some cases, a lawyer who specializes in copyright and IP. How to use an OT assessment with your EMR Once youve completed your occupational therapy assessment, you can make references and record your findings in the documentation section of your EMR. Most top-rated EMRs have a fully integrated notes and documentation section, so its easy to keep track of client progress. If youve been considering switching to a fully integrated, HIPAA-compliant practice management software, try SimplePractice for free 30 days. In addition to streamlined note-taking, you can find hundreds of built-in templates that are fully customizable and easy to use. Plus, SimplePractice is consistently rated as one of the best software for occupational therapists and lets you conduct telehealth appointments, submit insurance claims, and process online payments. Choosing the right occupational therapy assessments during your evaluation sets the stage for evidence-based OT practice. But, finding the right combination of assessments can take a little digging, as there are more OT assessment tools out there than you may realize. Many are disease- or condition-specific, and many approach the assessment process from different angles (top-down, bottom-up, questionnaire style, etc.). Therapists should also consider if a self-report measure might be a helpful way to establish your client as a partner in care. Luckily, many of these assessments are FREE. We are so passionate about helping OTs find the right assessment to kick-start their care. In this post, youll learn about our OT Assessment Search, and get to see a long list of the assessments found in it! At OT Potential, we want to make it easy for you to deliver the best care possible. And, so weve gathered a list of standardized assessments that we found in influential OT-related research studies and recommended from experts on our OT Potential Courses. You will find these assessments listed below. Some of them will be familiar, but I suspect youll also discover some new ones youll be eager to integrate into your practice. For members of the OT Potential Club, we took things one step further, compiling everything into a comprehensive OT Assessment Search. Youll be able to quickly find the perfect assessment to kick off your treatments. For each assessment, youll be able to quickly see: A direct link to assessment forms, when available Primary patient population What it assesses How much it costs How long it takes to administer If you need special training beyond your OT degree Try our OT Assessment Search Tool FREE for 5 days! Quickly search over 260 OT assessments. These assessments were either found in the in the research we reviewed in the OT Potential Club, or were suggested by Club members and guest experts! Our assessment search grows more comprehensive by the day, so this is not an exhaustive list of assessments found in the search. Click the button above to see the full list! In our guides to specific OT practice areas, we list common assessments in each setting. These guides are another great starting point for your search to find the right assessment. See how assessments are used for holistic evaluation of common clinical conditions in our Occupational Therapy Treatment Guides. In light of COVID-19 and the shift toward offering virtual services, we have also gathered information on OT assessments for telehealth care delivery. Choosing the right assessment during your evaluation sets you up to provide great care but finding the right one for your needs can be a challenge. At OT Potential, we seek to collect the scattered and hard-to-decipher information on various offerings and make it simple for you to find what you need in just a few clicks. Please comment below with features you would like to see in The OT Potential Club Assessment Search, as well as your favorite assessments you think we should add to our list. To get instant access to this growing database of OT-specific assessments, join the OT Potential Club! Or try the OT Assessment Search Tool today! Occupational therapists are client-centered problem solvers. With an OTs help, clients can increase their ability to take care of themselves, be productive, and enjoy what their homes and communities have to offer. Occupational therapy begins with a thorough assessment to identify a clients current abilities and how to maximize their functioning with a specific focus. Hospital Discharge Planning assesses the need for adaptive equipment, physical, cognitive, and emotional abilities and explore any assistive devices, social supports and environmental setups they have or need. If a person shows a decrease in daily function, an OT assessment can determine if occupational therapy is right for them. The Canadian Association of Occupational Therapists (CAOT) suggest an assessment may be helpful if a person has had an accident or change in health status and shows any of these signs: They have not returned to work, school, volunteering or other pre-accident roles. They struggle to care for themselves, their family or their home. 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