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## Exploring the Role and Scope of Clinical Assessment in Occupational Therapy

Ann M. Chapleau  
*Western Michigan University - USA, ann.chapleau@wmich.edu*

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## Exploring the Role and Scope of Clinical Assessment in Occupational Therapy

### Keywords

Assessment, Clinical Practice, Occupational Therapy Process, Evaluation, Goal Attainment Scaling

### Credentials Display

Ann Chapleau, D.H.S., OTR/L

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Welcome to the first special issue of *The Open Journal of Occupational Therapy* (OJOT). It is an honor to serve as the guest editor of this issue dedicated to the topic of assessment in occupational therapy (OT). The goals of this issue are: to disseminate knowledge related to the clinical use of assessments, to highlight the importance of specific assessments as well as more comprehensive evaluation processes in guiding intervention, and, ultimately, to stimulate dialogue about the role of assessment in the OT process.

### **Assessment in Occupational Therapy**

In today's continually evolving health care arena, OT practitioners play a key role in assessing function and providing targeted interventions that improve health and decrease costs. With the increased demand for greater accountability in our practice, and our expanding scope of practice that includes self-management, health promotion, and prevention (American Occupational Therapy Association [AOTA], 2014), the need has never been greater to develop and use effective assessment tools and outcome measures. While our scope of practice is expanding, our health care world is becoming smaller and more integrated as we improve communication and collaboration with practitioners from all parts of the world. We have unlimited opportunities to engage in a global dialogue about the role and scope of assessments in practice.

### **Assessment in the Context of the OT Process**

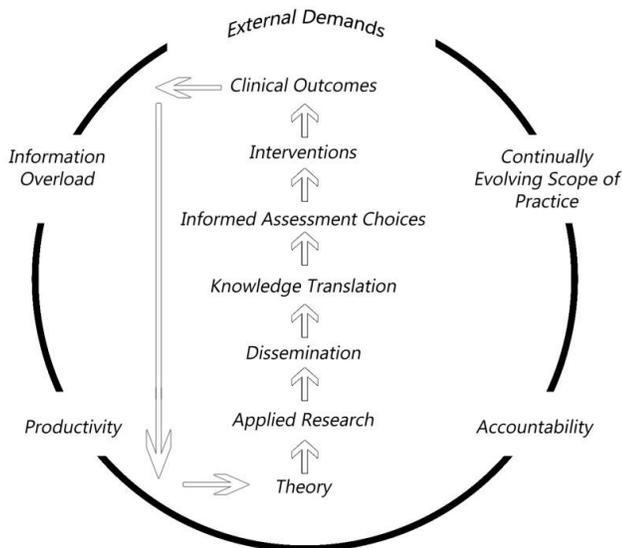
Assessment choices should be guided by our theory base and findings from applied research. Dissemination of assessment research and

knowledge translation of that data are key elements of the OT process, facilitating more informed assessment choices and resulting interventions. Knowledge translation is the process of organizing, exchanging, and applying research findings through interventions that improve quality of life (National Center for the Dissemination of Disability Research, 2005; World Health Organization [WHO], 2006). Clinical outcomes provide needed information to inform our theory base, enabling an ongoing feedback loop.

The OT process, however, is affected by a number of external demands. High productivity expectations are a reality in most clinical settings. The need for greater accountability for reimbursement and quality improvement purposes continues to increase. Occupational therapists are generating more data than ever before, as the number of publications related to the development of OT instruments increases (Crepeau & Wilson, 2013; Hilton, Goloff, Altaras, & Josman, 2013). More data, however, is not the only answer. As occupational therapists strive to keep abreast of research findings and medical advances, information overload can limit access to meaningful data. Goodman (2013) highlights the challenges of information overload and the need for knowledge translation to help clinicians and students sift through myriad data to select the most relevant and effective interventions.

Lastly, our continually evolving scope of practice, which requires ongoing development, testing, and implementation of new practice guidelines, presents another external demand. Occupational therapists

who are already challenged to keep current in their own practice area can find themselves needing to develop additional competencies. See Figure 1 for a diagram illustrating the role and scope of assessment in the OT process, as they are influenced by these external demands.



*Figure 1.* The role and scope of assessment in the OT Process

### Assessment Choices

What and how occupational therapists evaluate has been a subject of much debate over the past several decades, as we strive to keep up with rapid medical and technological advances. While we have a well-grounded philosophical and theoretical base that supports our holistic, function-based approach to assessment, we have shifted our focus to impairment-level assessments consistent with the medical model. Gillen (2013) warns of the dangers of this “adopted approach” to assessment, in which we are more likely to utilize non-functional assessment tools developed by other

professions. High productivity expectations are cited as one reason for this trend.

With this increasing pressure to demonstrate accountability through immediate and measurable treatment outcomes, we need to ensure that we maintain an individualized approach to measuring occupational performance as well. While it is tempting for the occupational therapist to adopt one standardized measure for all, in order to provide quantifiable outcome data, we must not sacrifice the individuality of the client. Fortunately, there are options that allow us to meet these external demands while remaining true to our core values.

Goal attainment scaling (GAS; Kiresuk & Sherman, 1968) is one example of an individualized assessment tool that can function as an outcome measure using a standardized scoring process to measure the level of goal attainment. GAS has been successfully used in settings such as adult rehabilitation (Bouwens, van Heugten, & Verhey, 2009), pediatrics (Mailloux et al., 2007; Ruble, McGrew, & Toland, 2012), and community mental health (Chapleau, Seroczynski, Meyers, Lamb, & Buchino, 2012).

The GAS process begins with the use of individually selected assessment tools and/or a client-centered interview to determine meaningful and feasible goals. The therapist and client can then envision a full range of potential outcomes for each goal area, using a five-point scale of +2 to -2, or “most favorable” to “least favorable” outcome. The level of goal attainment can then be re-evaluated at established intervals. See Table 1 for an example of a scaled clinical goal. This conversion of goal

descriptions to a structured, numerical framework allows for a comparison of scores among multiple subjects with different goals, making it useful for

program evaluation as well (Chapleau et al., 2012; Jones et al., 2006; Ottenbacher & Cusick, 1989; Schlosser, 2004).

**Table 1**

*Goal Attainment Scale Example*

<b>Continuum of Goal Attainment Levels</b>		<b>Record one specific goal behavior that matches each level in the spaces below</b>
Most unfavorable outcome thought likely	(-2)	Completes one load of laundry by sorting, machine washing, and drying with minimum physical assistance and maximum verbal cuing for each step <i>(baseline)</i>
Less than expected outcome	(-1)	Is able to sort, machine wash, and dry with moderate verbal cuing for each step
Expected outcome	(0)	Completes one load of laundry by sorting, machine washing, and drying with minimum verbal cuing for each step
More than expected outcome	(+1)	Can complete one load of laundry by sorting, machine washing, and drying with one initial verbal cue
Best anticipated outcome	(+2)	Is independent in completing one load of laundry

**Special Issue on Assessment in Occupational Therapy**

This special issue includes 10 articles accepted under the categories of applied research, guidelines for practice, and opinions in the profession. Together, these articles examine the role of assessment in the OT process in order to encourage a discourse about the significance of specific assessments and the role of assessments in guiding intervention. In response to the need for greater knowledge translation, I am pleased to present a “He said-He said” dialogue by Drs. Glen Gillen and Jim Hinojosa, both prominent scholars in the OT profession, who share their own

perspectives. This more accessible format is designed to encourage readers to explore various viewpoints and critically analyze their own methods of assessment.

I hope the content from this issue indeed sparks dialogue among clinicians, academicians, students, and researchers about the role and scope of clinical assessment in our evolving practice. The demands and challenges we face are also opportunities to develop new strategies and expand our body of knowledge. Thank you to our authors for contributing to this work. Now, it is up to you, the reader, to take the next step.

## References

- American Occupational Therapy Association. (2014). Occupational therapy practice framework: Domain and process (3rd ed.). *American Journal of Occupational Therapy*, 68, S1-S48. [doi:10.5014/ajot.2014.682006](https://doi.org/10.5014/ajot.2014.682006)
- Bouwens, S. F., van Heugten, C. M., & Verhey, F. R. (2009). The practical use of goal attainment scaling for people with acquired brain injury who receive cognitive rehabilitation. *Clinical Rehabilitation*, 23(4), 310-320. <http://dx.doi.org/10.1177/0269215508101744>
- Chapleau, A., Seroczynski, A. D., Meyers, S., Lamb, K., & Buchino, S. (2012). The Effectiveness of a consultation model in community mental health. *Occupational Therapy in Mental Health*, 28(4), 379-395. <http://dx.doi.org/10.1080/0164212x.2012.708609>
- Crepeau, E. B., & Wilson, L. H. (2013). Emergence of scholarship in the *American Journal of Occupational Therapy*. *American Journal of Occupational Therapy*, 67, e66-e76. <http://dx.doi.org/10.5014/ajot.2013.006882>
- Gillen, G. (2013). A fork in the road: An occupational hazard? (Eleanor Clarke Slagle Lecture). *American Journal of Occupational Therapy*, 67, 641-652. <http://dx.doi.org/10.5014/ajot.2013.676002>
- Goodman, G. (2013). Guest Editorial--Information overload: Strategies to maintain competence in a changing world. *Occupational Therapy Journal of Research: Occupation, Participation, and Health*, 33(2), 67. <http://dx.doi.org/10.3928/15394492-20130211-01>
- Hilton, C. L., Goloff, S. E., Altaras, O., & Josman, N. (2013). Centennial Vision—Review of instrument development and testing studies for children and youth. *American Journal of Occupational Therapy*, 67, e30-e54. <http://dx.doi.org/10.5014/ajot.2013.007831>
- Jones, M. C., Walley, R. M., Leech, A., Paterson, M., Common, S., & Metcalfe, C. (2006). Using goal attainment scaling to evaluate a needs-led exercise programme for people with severe and profound intellectual disabilities. *Journal of Intellectual Disabilities*, 10(4), 317-335. <http://dx.doi.org/10.1177/1744629506070051>
- Kiresuk, T. J., & Sherman, R. E. (1968). Goal attainment scaling: A general method for evaluating community mental health programs. *Community Mental Health Journal*, 4(6), 443-453. <http://dx.doi.org/10.1007/bf01530764>

- Mailloux, Z., May-Benson, T. A., Summer, C. A., Miller, L. J., Brett-Green, B., Burke, J., . . . Schoen, S. A. (2007). The Issue Is--Goal attainment scaling as a measure of meaningful outcomes for children with sensory integration disorders. *American Journal of Occupational Therapy*, *61*, 254-259. <http://dx.doi.org/10.5014/ajot.61.2.254>
- National Center for the Dissemination of Disability Research (2005). What is knowledge translation. Technical Brief, number 10. Retrieved May 7, 2015 from: [www.ncddr.org/knowledge\\_trans\\_over.html](http://www.ncddr.org/knowledge_trans_over.html)
- Ottenbacher, K. J., & Cusick, A. (1989). Goal attainment scaling as a method of clinical service evaluation. *American Journal of Occupational Therapy*, *44*(6), 519-525. <http://dx.doi.org/10.5014/ajot.44.6.519>
- Ruble, L., McGrew, J. H., & Toland, M. D. (2012). Goal attainment scaling as an outcome measure in randomized controlled trials of psychosocial interventions in autism. *Journal of Autism and Developmental Disorders*, *42*(9), 1974-1983. <http://dx.doi.org/10.1007/s10803-012-1446-7>
- Schlosser, R. W. (2004). Goal attainment scaling as a clinical measurement technique in communication disorders: A critical review. *Journal of Communication Disorders*, *37*(3), 217-239. <http://dx.doi.org/10.1016/j.jcomdis.2003.09.003>
- World Health Organization. (2006). *Bridging the "Know-Do" gap: Meeting on knowledge translation in global health*. Retrieved May 5, 2015, from [http://www.who.int/kms/WHO\\_EIP\\_KMS\\_2006\\_2.pdf](http://www.who.int/kms/WHO_EIP_KMS_2006_2.pdf)