

# The **ART** of Assessment

The **A**pproach, **R**esponsibility, and **T**echnology of Clinical Assessments

Standardized clinical assessments are extremely useful scientific instruments that *inform—but do not replace—professional judgment*. They are created for use and interpretation by highly trained professionals who also take into account the client's history and other test scores.



Have you ever been in a situation in which two people have asked a very similar question of the same person, but were given different responses? Perhaps the two people were asking essentially the same question in slightly different ways or contexts. The exact wording of a question or the order in which questions are asked can influence the response. That's where standardized assessments come in.

Using standardized assessment instruments allows the clinician to ensure examinees are asked questions in an identical manner and in a specific order, ensuring consistency in the assessment process. There are several more reasons why standardized assessments can improve your practice.



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# 7 reasons why standardized tests are an important part of clinical assessment practices

1. Help you gather and interpret data in a standard way
2. Confirm your clinical judgment
3. Support requests for services or reimbursement
4. Identify patterns of strengths and weaknesses to help guide the development of an appropriate intervention and treatment plan
5. Measure treatment outcomes
6. Provide a consistent means to document patient progress
7. Gather a body of evidence that can be disseminated as a set of best practice recommendations

## Ethics of technology & clinician responsibility

Clinicians have an important role as tech becomes a bigger part of testing.<sup>1</sup>

Rapid advances in technology have prompted many clinicians to ask the question, "Will technology soon take the place of the clinician in assessment?"

Although recent technological advances now improve adherence to standard administration procedures, improve accuracy in scoring, and allow clinicians to conduct nearly seamless digital assessments, there are essential activities or components of the act of assessment, not just testing, that can't be performed by technology alone.



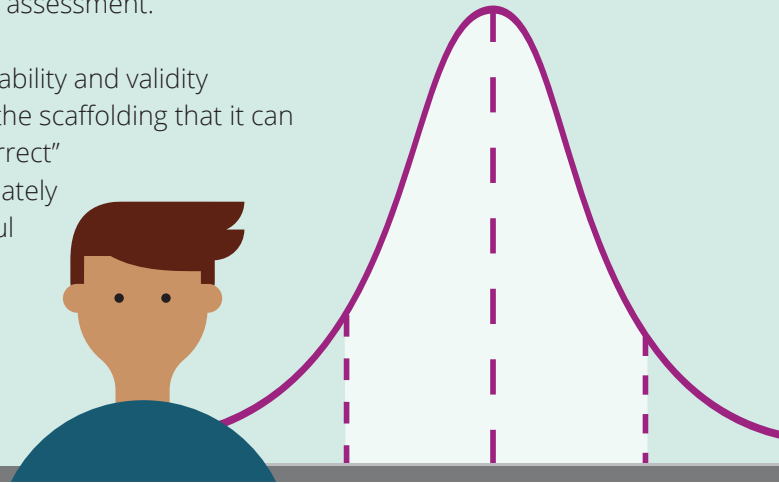
Current evidence and ethical guidelines suggest that clinical assessment will continue to require the skills and knowledge of a trained clinician. Specifically, *assessment*, rather than simple administration of test items, involves activities that require the application of knowledge, skills, and experience that can only be achieved with a trained clinician.

Several key clinician responsibilities must remain part of the assessment process for the *uniqueness of each client* to be recognized and described. Specific clinician responsibilities include, but are not limited to:

- Making informed decisions regarding test selection based on the unique characteristics of the individual being assessed and the questions to be answered
- Using clinical observation skills during the assessment to better understand how the client solves problems
- Using clinical knowledge and judgment to address behavioral difficulties, questions, and unusual responses during testing
- Making informed decisions about the need for accommodations or adaptation during testing

To obtain accurate results from testing, clinicians have a professional responsibility to apply their clinical skills in establishing a rapport so clients are motivated and encouraged to perform to their best ability, and be candid about concerns and/or demonstrate typical behaviors—appropriate to the needs of the evaluations. Clinicians must observe the processes and behaviors of the client throughout the session to understand scores. They must also be able to describe how any modifications to standard testing procedures may impact the reliability and validity of the assessment.

Application of normative comparisons requires that reliability and validity be preserved. Technology can assist in this because of the scaffolding that it can provide in proper test administration. However, the “correct” administration of a test that was not designed to adequately assess a particular element can result in non-meaningful data inappropriate to the referral question and could potentially result in adverse outcomes for the client.



Our ethical guidelines and, in most cases, legal requirements require that we be responsible advocates for the health and well-being of our clients. Consequently, the process of assessment rests on more than just basic test administration.

All of these particular clinical skills must be applied within the context of formalized training related to testing, measurement standards, and knowledge of general and test-specific administration guidelines, as well as familiarity with the test materials—including any technology being used in the assessment session.

*Assessment should not be confused with “testing” and thought of as just a single point in time.*



Assessment should not be confused with “testing” and thought of as just a single point in time. Following the actual testing session (which likely will be time-limited), the process of assessment continues as the clinician interprets the data using his or her knowledge of test interpretive guidance often provided in manuals coupled with client background, experiences, and conditions.

Skilled clinicians possess an understanding of **a)** how and what each test measures, **b)** test construction, **c)** how to apply principles of measurement, **d)** knowledge of what the objective results of an assessment session mean, and **e)** how to use the results to inform intervention and treatment planning.

These are all essential components of the process of assessment and cannot be provided by the technology itself. Rather, the clinician must translate the scores and findings and derive true meaning from the numbers using educational and/or psychological theory and their understanding of the individual being assessed to develop meaningful recommendations. This task often requires the integration of the current results with those of other evaluations, observations, history, and clinical and collateral interviews. *Most importantly, all results must be interpreted within context, taking into account the individual differences and experiences of the client.*



Technological applications as they pertain to assessment should be considered part of the toolkit that clinicians have available. *Technology, however, should not be considered a replacement for the judgment and knowledge of a trained clinician.* It is the active participation of the clinician that allows the use of what we know about individual differences, behavior, and brain functioning that would be lost when relying solely on technology.

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<sup>1</sup>Adapted from [National Psychologist](#), Anne-Marie Kimbell, PhD; Amy Dilworth Gabel, PhD

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