Formal Standardized Assessments

Assessment	Purpose
Cognitive	Assess functional cognition and identify performance-based cognitive impairments
MoCA (Montreal Cognitive Assessment) (Nasreddine, 1995)	30-item test screening instrument for mild cognitive dysfunction in domains of: attention and concentration, executive functions, memory, language, visuoconstructional skills, conceptual thinking, calculations, and orientation.
Executive Functioning Scale (Frazier & Uljarevic, n.d.)	Ranked questions related to executive functioning
Allen's Cognitive Screen (Allen et al., 2007)	Quick measure of a person's global cognitive processing capacities, learning potential, and performance and problem-solving abilities.
Double OT	Executive functioning; dynamic assessment used to measure occupational performance skills
WCPA (Weekly Calendar Planning Activity) (Toglia, 2015)	Assess executive functioning
Mini MoCA (Montreal Cognitive Assessment 5-minute protocol) (Nasreddine, 2005)	Four subtests examining five cognitive domains, including attention, verbal learning and memory, executive functions/language, and orientation.
Regulation	Sensory, coping, emotional regulation
Sensory Profile-2 (Dunn, 2014)	Evaluate sensory processing patterns
PROMIS measure: self- efficacy for managing chronic conditions- manage emotions (Gruber-Baldini et al., 2017)	Confidence to manage/control symptoms of anxiety, depression, helplessness, discouragement, frustration, disappointment and anger.
Mental Health & Wellness	Emotional, psychological and social well-being
PROMIS measure: emotional distress anxiety (Pilkonis et al., 2011)	Fear (fearfulness, panic), anxious misery (worry, dread), hyperarousal (tension, nervousness, restlessness), and somatic symptoms related to arousal (racing heart,dizziness).

PROMIS measure: emotional distress depression (Pilkonis et al., 2011)	Negative mood (sadness, guilt), views of self (self-criticism,worthlessness), and social cognition (loneliness, interpersonal alienation), as well as decreased positive affect and engagement (loss of interest, meaning, and purpose).
PROMIS measure: self- efficacy general (NIH, 2004)	Confidence in ability to deal effectively with a variety of stressful situations.
Quality of life scale (Flanagan, 1978)	Material and physical wellbeing, relationships with other people, social/community/civic activities, personal development and fulfillment, recreation
GAD-7 (Generalized Anxiety Disorder) (Spitzer et al., 2006)	Degree of anxiety severity
PCL-5 (Posttraumatic Stress Disorder Checklist)	Symptoms of PTSD
PHQ-9 (Patient Health Questionnaire) (Spitzer et al., 1999)	Degree of depression severity
C-SSRS (Columbia Suicide Severity Rating Scale) (Posner et al., 2007)	Identify and assess individuals at risk for suicide
Trauma	Feelings related to experiences that may have been stressful, frightening or distressing
Adverse Childhood Experiences (Felitti et al., 1998)	Exposure to trauma
TRS (Trauma Resilience Scale) (Madsen & Abel, 2010)	Exposure to trauma and how those events affect them today
IADLs	Functional living skills for independence
KELS (Kohlman Evaluation of Living Skills) (Kohlman, 1992)	Evaluate function in basic living by testing skills in areas of self-care, safety and health, money management, community mobility and telephone, and employment and leisure participation
	Holistic snapshot (person, task & environment) on clients ability to live independently and safely in the community by assessing performance on ADLs and IADLs
Sleep	Evaluation sleep quality and sleep hygiene

PROMIS measure: sleep disturbance (Hanish, et al., 2017)	Perceptions of sleep quality, sleep depth, and restoration associated with sleep
PROMIS measure: sleep-related impairment (Hanish, et al., 2017)	Perceptions of alertness, sleepiness, and tiredness during usual waking hours, and the perceived functional impairments during wakefulness associated with sleep problems or impaired alertness.
Occupation based	An overt focus on understanding the client's most relevant occupations and how satisfied the client is with how they are performed.
OSA (Occupational Self- Assessment) (Baron et al., 2006)	Based on the Model of Human Occupation, assessment measures self-perceptions of occupational competence and the degree to which the individual valued occupation. It is designed to encourage client involvement in goal setting and to capture self-perceptions of how illness and disability affect occupational competence
OCAIRS (Forsyth et al., 2005)	Focused on participation and engagement in everyday activities, including past, present and future roles; habits, values; and goals
COPM (Law et al., 1991)	The COPM is a client-centred outcome measure for individuals to identify and prioritize everyday issues that restrict their participation in everyday living. This measure focuses on occupational performance in all areas of life, including self-care, leisure and productivity.
Physical Function	Body functions and structures
Timed Up and Go (Podsiadlo & Richardson, 1991)	Assess mobility, balance, walking ability and fall risk
Borg Balance Scale (Berg, 1989)	Assess static balance and fall risk
ROM/strength	Goniometer measurements, MMT
Pain	Visual or numeral scale
Environmental	Clients' dwelling, community, and natural environments
Home FAST Risk Assessment	Identify hazards within home environment
Transtheoretical Model of Change Assessment (URICA)	Measures stage of change (precontemplation, contemplation, action, and maintenance) related to substance abuse.

Non-Standardized Assessments

Assessment	Purpose
Screenings	To determine if issue exists that needs a full assessment
Reading level	Screen to support education intervention
Trauma	Screen to avoid re-traumatizing
Cognition	Screen due to prominence of intellectual disability
Demographics survey	Number of times incarcerated, gender, race, DOB, and occurrence of TBI
Full occupational profile	In-depth into all areas of occupation, including leisure, play & sleep, along with values, goals & self-perception
History/record review	
Substance use history	
Probation or parole guidelines	Determine whether clients understand guidelines
	Work (difficulties in previous jobs & specific work goals) and health management (primary care provider, chronic conditions or mental illness, coping strategies for negative emotions). Yes/no with follow ups for other occupation area
	Level of assistance, functional observations, types of prompts and cues necessary