Compendium of Resources for Positive Behaviour Support

A guide for behaviour support practitioners

March 2019

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# Glossary of Psychometric Terms

**Reliability**

Appraises the extent to which an assessment tool produces consistent and stable results.

**Internal consistency reliability**

Evaluates the consistency of each item within an assessment tool with all other items in the tool. Evaluated by calculating Cronbach’s α. FADOSor a test to have high internal consistency, αshould be > .80 although αas low as .70 is acceptable.

**Test-retest reliability**

Assesses the extent to which scores on an assessment tool remain consistent across time. Correlation coefficients such as Pearson’s *r*, kappa, and intraclass [ICC] are used to evaluate test-retest reliability, with *r* > .80, kappa ≥ .75 and ICC ≥ .75 commonly considered as acceptable.

**Inter-rater reliability**

Estimates test score consistency across multiple administrators of an assessment tool. Like test-retest reliability, correlation coefficients such as Pearson’s *r*, kappa, and intraclass [ICC] are used to evaluate inter-rater reliability, with *r* > .80, kappa ≥ .75 and ICC ≥ .75 commonly considered as acceptable.

**Validity**

Appraises the extent to which an assessment tool measures what it claims to measure.

**Face validity**

On face value, an assessment tool appears to be measuring its intended construct.

**Content validity**

Evaluates the extent to which items embedded within an assessment tool represent the construct being measured. This form of validity is usually established by verifying the link between theory and previous research by having experts assess the inclusiveness of the items, their accuracy, readability and appropriateness.

**Construct validity**

Construct validityis a judgement about whether the inferences drawn from an assessment tool are appropriate in terms of the construct being measured by the tool. Some strategies specifically linked to construct validity are factor analysis (to assess the underlying structure of the tool to check if the structure is theoretically expected), and evaluating test scores differences across naturally occurring groups (e.g., gender) and ensuring that the differences noted are theoretically expected.

**Predictive validity**

Compares test scores from an assessment tool with scores from another tool taken some time after the initial administration. Predictive validity can be assessed by evaluating the percentage of variance explained by the test scores for the predictor variable of interest, or the accuracy with which test scores correctly classify people into relevant groups.

**Concurrent (convergent) validity**

Compares test scores from an assessment tool with scores derived from another tool that assesses the same construct. This form of validity is typically assessed via Pearson’s *r* correction, with *r* values > .30 considered acceptable.

**Discriminant (divergent) validity**

Compares test scores from an assessment tool with scores derived from another tool that does not assess the same construct. This form of validity is typically assessed via Pearson’s *r* correction, with low, non-significant *r* values taken as evidence of discriminant validity.

**Sensitivity**

The extent to which an assessment tool correctly identifies that a person belongs to a certain group or relevant classification. For example, for a group of people with a known diagnosis of diabetes, a new assessment tool for diagnosing diabetes should maximise the number of people it accurately identifies as having diabetes.

**Specificity**

The extent to which an assessment tool correctly identifies that a person does not belongs to a certain group or classification. For example, for a group of people without a known diagnosis of diabetes, a new assessment tool for diagnosing diabetes should maximise the number of people it accurately identifies as not having diabetes.

# Introduction

**Part 1** of this resource aims to provide behaviour support practitioners with a comprehensive list of positive behaviour support assessment tools that can be used for the purposes of behaviour support assessment, planning, intervention, monitoring and review. This resource is intended as a guide only. It is not a requirement to use the assessments tools listed, other than to assist providers and practitioners to use validated instruments and tools to complete a functional behaviour assessment and to measure outcomes. The use of validated measurement instruments and tools is one way to demonstrate contemporary best practice standards.

The tools collated in this resource include (but are not limited to) observations tools, checklists, semi-structured interviews protocols, person-centred tools, and more formalised assessments. This list has been complied based on currently available literature and website content. The resource will be updated to reflect developments in contemporary best practice. Whilst these tools are identified as useful, it should also be noted that there may be reference to historical terminology named in some tools. The reference to historical terminology is not endorsed by the NDIS Commission.

These tools can be used by practitioners to support the development of comprehensive and quality behaviour support plans, and outcome measurement to assess the effectiveness of the positive behaviour support intervention.

The tools included in this resource were identified by:

* Reviewing existing practice guideline documents regarding positive behaviour support, and known tools related to positive behaviour support.
  + Australian Psychological Society. (2018). Alternatives to restrictive practices in intellectual and developmental disability: Practice guide. Melbourne, Australia: Author.
  + British Psychological Society. (2016). Dementia and people with intellectual disabilities. Guidance on the assessment, diagnosis, interventions and support of people with intellectual disabilities who develop dementia. Leicester, United Kingdom: Author.
  + Johnson, H., Hagiliassis, N., Solarsh, B., Iacono, T., Di Marco, M., & Quilliam, C. (2011). *Building the foundations for effective communication for Victorians with behaviours of concern subject to restrictive practices.* Melbourne, Australia: Scope (Vic) Ltd.
  + Health and Human Services. (2018). *Positive practice framework: A guide for positive behaviour support practitioners.* Melbourne, Australia: Author.
  + Office of the Senior Practitioner. (2010). Clinical assessment resource. Melbourne, Australia: Department of Health.
  + Whitehouse, A., Evans, K., Eapen, V., & Wray, J. (2018). *A national guideline for the assessment and diagnosis of autism spectrum disorder.* Brisbane, Australia: Cooperative Research Centre for Living with Autism.
  + The Australian Centre on Quality of Life website - <http://www.acqol.com.au/instruments>
* Conducting comprehensive literature searches to identify additional tools via the EBSCO Database.

In addition to the comprehensive listing of tools, **Part 2** of this resource contains a list of relevant internet resources related to positive behaviour support. This list is not comprehensive in anyway, however these resources have been utilised by behaviour support practitioners in the past to support their practice.

# Part 1 - Positive Behaviour Support Measures and Tools

Table 1 contains a list of all the tools summarised in this resource. Tools are listed according to their known acronym, and categorised by **age group** (children, adolescents, adults), and measurement **purpose** (e.g., to measure behaviours of concern, carer quality of life, etc.). In addition, the tools are identified as either **baseline** (B), **intermediate** (I) or **outcome** tools (O):

* *Baseline tools*: Initial one-off tools that are often used to identify and define problem behaviours and/or needs, and assist in the development of behaviour support plans.
* *Intermediate tools*: Pre- and post-intervention tools that measure change or progress regarding identified behaviours within behaviour support plans.
* *Outcome tools*: Higher order tools that determine whether the goals of the behaviour support plan have been met (e.g., decreased behaviours of concern, increased quality of life, etc.).

**Table 1**

*Assessment Tools Categorised by Age Group, Purpose and Measurement Type*

| Category | Children | Adolescents | Adults |
| --- | --- | --- | --- |
| Acquired Brain Injury |  | WHIM BI | WHIM BI |
| Adaptive Behaviour | ABAS-3 BIO  BFRS-R B  ICAP BIO  SIB-R BIO  VINELAND-III BIO | ABAS-3 BIO  BFRS-RB B  ICAP BIO  SIB-R BIO  VINELAND-III BIO | ABAS-3 BIO  ILS BIO  ICAP BIO  SIB-R BIO  VINELAND-III BIO |
| Autism Spectrum Disorder | ADI-R B  ADOS-2 B  CARS2 B  ASIEP-3 B  ASD-C B  RBS-R BI | ADI-R B  ADOS-2 B  ASD-C B  CARS2 B  RBS-R BI | ADI-R B  ADOS-2 B  ASD-A B  CARS2 B  RBS-R BI |

*Note.* B = Baseline, I = Intermediate, O = Outcome.

**Table 1 (cont.)**

| Category | Children | Adolescents | Adults |
| --- | --- | --- | --- |
| Behaviours of Concern | ABC-2 BI  BAG BIO  BPI-01 BIO  CAS BIO  C-SHARP BIO  DBC BIO  FACT B  FAI B  FAST B  GFS O  ICAP BIO  MAS B  NCBRF BIO  QABF BIO  RBS-R BI  SDQ BIO | ABC-2 BI  BAG BIO  BPI-01 BIO  CAS BIO  C-SHARP BIO  DBC BIO  EPS BIO  FACT B  FAI B  FAST B  GFS O  ICAP BIO  MAS B  NCBRF BIO  QABF BIO  RBS-R BI  SDQ BIO | ABC-2 BI  A-SHARP BI  ABCL/ASR BI  BAG BIO  BPI-01 BIO  CAS BIO  DASH-II BIO  EPS BIO  FACT B  FAI B  FAST B  GFS O  ICAP BIO  MAS B  OBS BI  QABF BIO  RBS-R BI  SBS BIO |
| Behaviour Support Plan Quality | BSP-QEII O  GFS O  SIS BIO | BSP-QEII O  GFS O  SIS BIO | BSP-QEII O  GFS O  O&IS-R O  SIS BIO |

*Note.* B = Baseline, I = Intermediate, O = Outcome.

**Table 1 (cont.)**

| Category | Children | Adolescents | Adults |
| --- | --- | --- | --- |
| Carer Quality of Life | ERCBS BIO  FQLS BIO  FQLS-2006 BIO | ERCBS BIO  FQLS BIO  FQLS-2006 BIO | ERCBS BIO  FQLS BIO  FQLS-2006 BIO |
| Communication | ACA BI  CELF-5 B  CM B  FCP-R BI  NRDLS- 4 BI  PPEC-C BI  Triple C BIO | CELF-5 B  Triple C BIO | APAR B  CELF-5 B  DisDAT BIO  FCP-R BI |
| Dementia |  |  | CMAI BI  DisDAT BIO  G-DSDS B |

*Note.* B = Baseline, I = Intermediate, O = Outcome.

**Table 1 (cont.)**

| Category | Children | Adolescents | Adults |
| --- | --- | --- | --- |
| Dual Diagnosis | ADAMS B  ChA PAS B  CDI 2 BIO  TSCC BIO  TSCYC BIO | ADAMS B  BAI BI  BDI-II BIO  ChA PAS B  CDI 2 BIO  EPS BIO  Reiss Screen B  TSCC BIO | ADAMS B  ADD B  BAI BI  BDI-II BIO  DASH-II BIO  EPS BIO  FSAMR BIO  GAS-ID BIO  GDS-LD BIO  HADS BIO  MASS BIO  MIPQ BIO  MPAS BIO  PIMRA BI  Reiss Screen BI |
| Forensic Assessment |  |  | ARMIDILO- S BI  DRAMS BI  HCR-20V3 BIO  M-ABCS BI  RASSOR B  Static-99 B |

*Note.* B = Baseline, I = Intermediate, O = Outcome.

**Table 1 (cont.)**

| Category | Children | Adolescents | Adults |
| --- | --- | --- | --- |
| Pain | PPP BIO | PPP BIO | APS BIO |
| Quality of Life | DISABKIDS BIO  KINDL BIO | DISABKID BIO  KINDL BIO | CANDID BIO  CQ BIO  DisDAT BIO  LSS-1 BIO  LSS-2 BIO  PWI-ID BIO |
| Sexual Knowledge |  | SSKAT-R BI | GSNQ BI  SSKAT-R BI |

*Note.* B = Baseline, I = Intermediate, O = Outcome.

All tools identified in Table 1 will now be listed in alphabetical order. Where available, the following information is provided:

* *Acronym, full name, reference and website information*
* *Categorisation* (from Table 1)
* *Purpose* – what does the tool assess?
* *Description* – general description of the tool (e.g., items, subscales, etc.)
* *Participant group* – age range, diagnostic group, etc.
* *Access* – information on how the tool can be accessed.
* *Administration qualifications* – qualification and/or training requirements in order to administer the tool.
* *Cost* – any costs related to purchasing the tool.
* *Administration time*
* *Psychometric properties* – brief information regarding the tool’s reliability and validity, and relevant references. A glossary of psychometric terms (see p. 8) has been included in this resource to assist with interpreting this information.
  + Please note. Some of the tools listed in this resource have no evidence of psychometric evaluation. For these measures, caution is recommended regarding the use of the tool.
* *Applications* – categorisation of the tools as either baseline, intermediate or outcome tools.

# A

## ABC-2: Aberrant Behaviour Checklist

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Aman M. G. & Singh N. N. (1986). *Aberrant behaviour checklist: Manual*. Wood Dale, IL: Stoelting. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | General behaviour assessment tool regarding problem behaviours. |
| **Description** | An informant-based rating scale that captures a wide range of behaviour problems:   * Irritability, agitation, crying; * Lethargy, social withdrawal; * Stereotypic behaviour; * Hyperactivity, non-compliance; and * Inappropriate speech.   Assesses problematic behaviour at home, in educational and work settings, and in residential and community-based facilities.  Based on a large data set of residents in developmental centres and group homes. |
| **Participant group** | Children, adolescents and adults (5 years to adulthood) with intellectual or developmental disabilities. |
| **Access** | <https://www.stoeltingco.com/aberrant-behavior-checklist-second-ed-abc-2.html> |
| **Administration qualification** | Can be completed by parents, special educators, psychologists, direct caregivers, nurses, and others with good knowledge of the person being assessed. |
| **Cost (2019)** | * Complete Kit - 163 USD (AUD 228) * Community Kit - 131 USD (AUD 183)   Residential Kit - 131 USD (AUD 183) |
| **Administration time** | * 10 to 15 minutes |
| **Psychometric properties** | Test manual contains psychometric information.  For independent evidence of internal consistency reliability, concurrent and discriminant validity, and construct validity, see:  Rojahn, J., Rowe, E. W., Kasdan, S., Moore, L., & van Ingen, D.J. (2011). Psychometric properties of the Aberrant Behaviour Checklist, the Anxiety, Depression and Mood Scale, the Assessment of Dual Diagnosis, and the Social Performance Survey Schedule in adults with intellectual disabilities. *Research in Developmental Disabilities, 32*, 2309-2320. doi: 10.1016/j.ridd.2011.07.035 |
| **Applications** | * Baseline, intermediate |

## APS: Abbey Pain Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Abbey, J., Piller, N., Bellis, A., et al. (2004). The Abbey Pain Scale: A 1-minute numerical indicator for people with end-stage dementia. *International Journal of Palliative Nursing, 10*, 1-3. doi: 10.12968/ijpn.2004.10.1.12013 |
| **Categorisation** | PAIN |
| **Purpose** | To assess pain |
| **Description** | An observational movement-based assessment to determine the effectiveness of pain relieving interventions. The assessment measures:   * Vocalisation * Facial expression * Change in body language * Behavioural change * Physiological change * Physical change   Provides a pain category, and total pain score. |
| **Participant group** | Adults with dementia or who cannot verbalise or clearly articulate their needs |
| **Access** | <https://apsoc.org.au/PDF/Publications/Abbey_Pain_Scale.pdf> |
| **Administration qualification** | Nil |
| **Cost (2019)** | Free |
| **Administration time** | 1 minute |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and face, content and concurrent validity.  For independent evidence of internal consistency, test-retest and inter-rater reliability; construct and concurrent validity see:   * Neville, C & Ostini, R. (2014). A psychometric evaluation of three pain rating scales for people with moderate to severe dementia. *Pain Management Nursing, 15*, 798-806. doi: 10.1016/j.pmn.2013.08.001 |
| **Applications** | Baseline, intermediate |

## ABAS-3: Adaptive Behaviour Assessment System

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Harrison, P. L., & Oakland, T. (2015). *Adaptive behaviour assessment system (3rd ed.)*. Minneapolis, MN: Pearson Assessment. |
| **Categorisation** | ADAPTIVE BEHAVIOUR |
| **Purpose** | To assess adaptive skills across the life span |
| **Description** | An adaptive behaviour assessment tool which covers the lifespan with age-specific versions. Assesses the following domains of adaptive behaviour:   * Communication * Community use * Functional academics * School loving * Health and safety * Leisure * Self-care * Self-direction * Social * Work |
| **Participant group** | Children, adolescents and adults with developmental delays, autism spectrum disorder, intellectual disability, learning disabilities, neuropsychological disorders, sensory impairments, or physical impairments. Norms based on a large sample representative of the United States population. |
| **Access** | <https://www.pearsonclinical.com.au/products/view/564> |
| **Administration qualification** | B User Level Qualification - Allied Health or Special Education Professional. This applies to, but is not limited to professionals with an undergraduate and/or Master’s degrees in speech pathology, occupational therapy, and physiotherapy, and may include special education, medical and behavioural science |
| **Cost (2019)** | * Comprehensive Kit (0 - 89 years) - 570 AUD * Infant and Preschool Kit (0 to 5 years) - 700 AUD * School Kit (5 to 21 years) - 700 AUD * Adult Kit (16 to 89 years) - 570 AUD * Comprehensive Software Kit - 874 AUD * Adult Software Kit - 840 AUD * Infant and Preschool Software Kit - 915.00 AUD |
| **Administration time** | 15-20 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

## ABCL/ASR: Adult Behaviour Checklist

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Achenbach, T. M., & Rescorla, L. A. (2003). *Manual for the ASEBA Adult Forms & Profiles*. Burlington, VT: University of Vermont Research Centre for Children, Youth, and Families. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess behavioural problems in general population participants |
| **Description** | Respondent-informed (Adult Behaviour Checklist) and self-report (Adult Self Report) assessment tool on diverse aspects of adaptive functioning and behavioural problems. Contains normed scales for:   * Adaptive functioning * Empirically based syndromes * Substance use * Internalizing * Externalizing * Total Problems |
| **Participant group** | Adults (18-59 years), including people with mild intellectual disability and behaviours of concern. |
| **Access** | <https://shop.acer.edu.au/adult-behaviour-checklist-abcl-asr-manual> |
| **Administration qualification** | Psychologists with a Master’s degree in psychology or an undergraduate degree in psychology with evidence of training in assessment |
| **Cost (2019)** | 97.95 AUD |
| **Administration time** | Not specified |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate |

## A-SHARP: Adult Scale of Hostility and Aggression: Reactive/Proactive

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matlock S. T., & Aman M. G. (2011). Development of the Adult Scale of Hostility and Aggression: Reactive/Proactive (A-SHARP). *American Journal on Intellectual and Developmental Disability, 116,* 130-141. doi: 10.1352/1944-7558-116.2.130 |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess aggressive and hostile behaviour |
| **Description** | Measures the severity and frequency of aggressive and hostile behaviours, and the degree to which the behaviours are thought to be proactive or reactive. The measures assesses the following domains of aggressive and hostile behaviour:   * Verbal Aggression * Physical Aggression * Hostile Affect * Covert Aggression * Bullying |
| **Participant group** | Adults with intellectual or developmental disabilities |
| **Access** | <https://psychmed.osu.edu/index.php/instrument-resources/a-sharp/>  Must complete a User Agreement in order to use the A-SHARP for clinical and/or research purposes |
| **Administration qualification** | **Professionals working in the mental health field - physicians, licensed psychologists, social workers, and counsellors, and individuals working under the direct supervision of such professionals** |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | For evidence of inter-rater reliability, concurrent validity, and constuct validity, see:   * Matlock S. T., & Aman M. G. (2014). Psychometric characteristics of the Adult Scale of Hostility and Aggression: Reactive/Proactive (A-SHARP) and relation to psychiatric features of adults with developmental disabilities. *Research in Developmental Disabilities*, *35*, 3199-3207. doi: 10.1016/j.ridd.2014.07.029 |
| **Applications** | Baseline, intermediate |

## ACA: Affective Communication Assessment

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Coupe-O’Kane, J., & Goldbart, J. (1998). The affective communication assessment. In J. Coupe-O’Kane & J, Goldbart (Eds.), *Communication before speech: Development and assessment* (2nd ed.) (pp. 10-26). London, United Kingdom: David Fulton Publishers. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess a person’s preferences |
| **Description** | A systematic way to interpret pre-intentional behaviours to identify clusters of behaviours that indicate ‘likes’ and ‘dislikes’. The assessment considers:   * Tastes * Sounds * Aromas * Reactions to touch |
| **Participant group** | Children with severe and profound intellectual disability. Likely to be suitable for adults with severe and profound intellectual disability and adults with acquired brain injury who do not show intentional communication. |
| **Access** | ACA Manual:  <http://drmarkbarber.co.uk/ACAOWNERSMANUAL.pdf>  ACA Observation Sheet:  <http://complexneeds.org.uk/modules/Module-2.4-Assessment-monitoring-and-evaluation/All/downloads/m08p020b/aca_observation_sheet.pdf>  ACA Identification Sheet:  <http://complexneeds.org.uk/modules/Module-2.4-Assessment-monitoring-and-evaluation/All/downloads/m08p020b/aca_identification_sheet.pdf> |
| **Administration qualification** | Training material for teachers - including a case example and video.  <http://complexneeds.org.uk/modules/Module-2.4-Assessment-monitoring-and-evaluation/All/m08p020b.html> |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | None available in the test manual |
| **Applications** | Baseline, intermediate |

## ADAMS: Anxiety, Depression and Mood Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Esbensen, A., Rojahn, J., Aman, M. G. & Ruedrich, S. (2003). Reliability and validity of an assessment instrument for anxiety, depression, and mood among individuals with mental retardation. *Journal of Autism and Developmental Disorders, 33*, 617-629. doi: 10.1023/B:JADD.0000005999.27178.55 |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To screen for behaviour-based affective symptoms |
| **Description** | Informant-report assessment tool that assesses affective symptoms over a past six months:   * Manic/hyperactive behaviour * Depressed mood * Social avoidance * General anxiety * Obsessive/compulsive behaviour |
| **Participant group** | Children, adolescents and adults (10 years+) with a mild to borderline intellectual disability, who use comprehensible speech and can oversee the timeframe of at least one week. |
| **Access** | Author to be directly contacted for access to the assessment tool |
| **Administration qualification** | Mental health professionals |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency, test-retest and inter-rater reliability, and construct validity.  For independent evidence of internal consistency, test-retest and inter-rater reliability, and concurrent and discriminant validity, see:   * Hermans. H., van der Pas, F. H., & Evenhuis, H. M. (2011). Instruments assessing anxiety in adults with intellectual disabilities: A systematic review. *Research in Developmental Disabilities, 32,* 861-870. doi: 10.1016/j.ridd.2011.01.034 * Rojahn, J., Rowe, E. W., Kasdan, S., Moore, L., & van Ingen, D.J. (2011). Psychometric properties of the Aberrant Behaviour Checklist, the Anxiety, Depression and Mood Scale, the Assessment of Dual Diagnosis, and the Social Performance Survey Schedule in adults with intellectual disabilities. *Research in Developmental Disabilities, 32*, 2309-2320. doi: 10.1016/j.ridd.2011.07.035 |
| **Applications** | Baseline |

## ADD: Assessment of Dual Diagnosis

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson, J.L. (1997). *The assessment for dual diagnosis* (ADD). Baton Rouge, LA: Disability Consultants, LLC. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To screen for psychopathology in adults with an intellectual disability |
| **Description** | Informant-report assessment tool based on symptom frequency/duration/intensity over a one month period. The ADD screens for:   * Mania * Depression * Anxiety * Post-Traumatic Stress Disorder * Non-compliance * Substance abuse * Somatoform disorder * Dementia * Conduct disorder * Pervasive developmental disorder * Schizophrenia * Personality disorders; * Eating disorders * Sexual disorders |
| **Participant group** | Adults with mild to moderate intellectual disability, originally designed for those living in residential facilities. |
| **Access** | <http://www.disabilityconsultants.org/ADD.php> |
| **Administration qualification** | Mental health professionals interview an informant who has known the person with intellectual disability for at least a year |
| **Cost (2019)** | Complete Kit - 300 USD (420 AUD) |
| **Administration time** | 20 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency, test-retest and inter-rater reliability.  For independent evidence of test-retest and inter-rater reliability, and concurrent validity, see:   * Hermans, H., & Evenhuis, H. M. (2010). Characteristics of instruments screening for depression in adults with intellectual disabilities: Systematic review. *Research in Developmental Disabilities, 31,* 1109-1120. doi: 10.1016/j.ridd.2010.04.023 * Hermans. H., van der Pas, F. H., & Evenhuis, H. M. (2011). Instruments assessing anxiety in adults with intellectual disabilities: A systematic review. *Research in Developmental Disabilities, 32,* 861-870. doi: 10.1016/j.ridd.2011.01.034 |
| **Applications** | Baseline |

## ARMIDILO-S: Assessment of Risk and Manageability of Individuals with Developmental and Intellectual Limitations Who Offend - Sexually

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Boer, D. P., Haaven, J. L., Lambrick, F., Lindsay, W. R., McVilly, K. R., Sakdalan, J., & Frize, M. (2013). *Assessment of risk and manageability of individuals with developmental and intellectual limitations who offend – sexually (ARMIDILO-S) manual*. Retrieved from <http://www.armidilo.net/files/Web-Version-1-1-2013-Intro-Manual.pdf> |
| **Categorisation** | FORENSIC ASSESSMENT |
| **Purpose** | To assess risk of offending and its manageability in offender with intellectual and developmental disability. |
| **Description** | 30-item structured professional judgement risk assessment tool divided between:   * Stable dynamic items (staff and environment) * Acute dynamic items (staff and environment) * Stable dynamic factors (offenders) * Acute dynamic factors (offenders)   First tool to view the offender with an intellectual disability within their environmental context. |
| **Participant group** | * Adults with cognitive impairment (functional intellectual disability, IQ 70-79 and IQ <70 with adaptive behaviour deficits). * Offenders, whether convicted or not. |
| **Access** | <http://www.armidilo.net/>  Website contains the manual, scoring guidelines and sheets, and example reports. |
| **Administration qualification** | * Have a basic understanding of risk factors related to sexual offense recidivism and principles of psychological assessment; * Have specific training related to the use of the particular actuarial test that will be implemented as part of this assessment process; * Complete identified training including at least the completion of five ARMIDILO-S assessments. |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | For independent evidence of predictive validity, see:   * Lofthouse, R. E., Lindsay, W. R., Totsika, V., Hastings, R. P., Boer, D.P., & Haaven, J. L. (2013). Prospective dynamic assessment of risk of sexual reoffending in individuals with an intellectual disability and a history of sexual offending behaviour. *Journal of Applied Research in Intellectual Disabilities, 26,* 394-403. doi: 10.1111/jar.12029 * Blacker, J., Beech, A. R., Wilcox, D. T., & Boer, D. (2011). The assessment of dynamic risk and recidivism in a sample of special needs sexual offenders. *Psychology, Crime, & Law, 17*, 75-92. doi: 10.1080/10683160903392376 |
| **Applications** | Baseline, intermediate |

## APAR: Assessment of Phonological Awareness and Reading

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Iacono, T., & Cupples, L. (2004). Assessment of phonemic awareness and word reading skills of people with complex communication needs. *Journal of Speech, Language, and Hearing Research, 47,* 437-449. doi: 10.1044/1092-4388(2004/035) |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess phonological awareness and literacy |
| **Description** | Designed to assess phonological awareness and reading skills in adults with disabilities (i.e., text reading at the word, sentence and paragraph level). Contains three specific tests:  Reading test   * Reading real words * Reading non-words * Comprehension of written words * Comprehension of written sentences * Comprehension of written texts   Phonological awareness test   * Blending real words * Blending non-words * Phoneme counting- adults * Phoneme counting- children * Phoneme analysis   Listening comprehension test   * Sentence plausibility * Grammaticality judgements * Comprehension of text |
| **Participant group** | Adults with physical and/or intellectual disabilities - primarily cerebral palsy, and including non-verbal participants. |
| **Access** | <https://www.elr.com.au/apar/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of construct and concurrent validity |
| **Applications** | Baseline, intermediate |

## ADI-R: Autism Diagnostic Interview - Revised

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Lord, C., Rutter, M., & Le Couteur, A. (1994). Autism Diagnostic Interview-Revised: A revised version of a diagnostic interview for caregivers of individuals with possible pervasive developmental disorders. *Journal of Autism and Developmental Disorders*, *24*, 659-685. doi: 10.1007/BF02172145 |
| **Categorisation** | AUTISM SPECTRUM DISORDER |
| **Purpose** | To diagnose autism spectrum disorder, and support intervention planning |
| **Description** | 93-item structured respondent-informed interview, assessing the following functional domains:   * Language/Communication * Reciprocal Social Interactions * Restricted, Repetitive, and Stereotyped Behaviours and Interests   Collects specific information regarding:   * Background including family, education, previous diagnoses, and medications * Behaviour * Early development and developmental milestones * Language acquisition and loss of language or other skills * Current functioning in regard to language and communication * Social development and play * Interests and behaviours * Clinically relevant behaviours, such as aggression, self-injury, and possible epileptic features |
| **Participant group** | Children, adolescents and adults with a mental age above 2 years. |
| **Access** | <https://www.pearsonclinical.com.au/products/view/290> |
| **Administration qualification** | A four-year psychology qualification plus postgraduate training in psychological tests. All users must complete the ADI-R Training, however registered psychologists are exempt. |
| **Cost (2019)** | Complete Kit – 449.00 AUD |
| **Administration time** | 60 - 90 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline |

## ADOS-2: Autism Diagnostic Observation Schedule

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Lord, C., Rutter, M., DiLavore, P. C., Risi, S., Gotham, K., & Bishop, S. L. (2012). *Autism diagnostic observation schedule (2nd ed.)*. Torrance, CA: Western Psychological Services. |
| **Categorisation** | AUTISM SPECTRUM DISORDER |
| **Purpose** | To assess autism and other developmental disorders |
| **Description** | A standardised semi-structured diagnostic assessment of participants who may have autism spectrum disorders. Assesses the following domains of functional behaviour:   * Communication * Social interaction * Play; * Restricted and repetitive behaviours   The assessment presents various activities that elicit behaviours directly related to a diagnosis of autism spectrum disorder. |
| **Participant group** | Children, adolescents and adults (12 months and older) |
| **Access** | <https://www.pearsonclinical.com.au/products/view/502> |
| **Administration qualification** | Behavioural specialist or educational psychologist |
| **Cost (2019)** | Complete Kit - 2856.00 AUD  DVD Training Package - 1431 AUD |
| **Administration time** | 40 - 60 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline |

## ASIEP-3: Autism Screening Instrument for Education Planning

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Krug, D. A., Arick, J. R., & Almond, P. J. (2008). *Autism screening instrument for educational planning* *(3rd ed.)*. Austin, TX: Pro-Ed. |
| **Categorisation** | AUTISM SPECTRUM DISORDER |
| **Purpose** | To screen for autism spectrum disorder |
| **Description** | To identify individuals with autism spectrum disorder, assist in planning appropriate educational programs, monitor performance and progress and research autism spectrum disorder.  Standardised components of the assessment:   * Autism Behaviour Checklist - 47-item checklist of typical behaviours for the initial screening process * Sample of Vocal Behaviour - Measures four characteristics of the spontaneous speech of children (i.e., repetitiveness, non- communication, intelligibility, and babbling) * Interaction Assessment - Measures a child's spontaneous social responses and reactions to requests * Educational Assessment - Measures a child's functioning levels in five areas (i.e., stay in seat, receptive language, expressive language, body concept, and speech imitation) * Prognosis of Learning Rate - Examines a child's learning acquisition rate, using a discrete trial-direct instruction format |
| **Participant group** | Children (2-13 years) |
| **Access** | <https://www.proedinc.com/Products/12740/asiep3-autism-screening-instrument-for-educational-planning--third-edition.aspx> |
| **Administration qualification** | Level B - Undergraduate degree in psychology, school counselling, occupational therapy, speech–language pathology, social work, education, special education, or related field |
| **Cost (2019)** | Complete Kit – 297 USD (416 AUD) |
| **Administration time** | Varies depending on which component of the assessment is being completed |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline |

## ASD-A: Autism Spectrum Disorders - Adult Version

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson, J.L., Terlonge, C., & González, M.L. (2006). *Autism spectrum disorders – Behaviour problems – Adult version.* Baton Rouge, LA: Disability Consultants, LLC.  Matson, J.L., Terlonge, C., & González, M.L. (2006). *Autism spectrum disorders – Comorbidity – Adult version.* Baton Rouge, LA: Disability Consultants, LLC.   Matson, J.L., Terlonge, C., & González, M.L. (2006). *Autism spectrum disorders – Diagnosis – Adult version.* Baton Rouge, LA: Disability Consultants, LLC. |
| **Categorisation** | AUTISM SPECTRUM DISORDER |
| **Purpose** | To assess autism spectrum disorder through an assessment battery |
| **Description** | Autism Spectrum Disorders - Diagnosis for Adults (ASD-DA)  31-item respondent-informed scale that assess the diagnostic criteria of autism spectrum disorder (e.g., limited number of interests, responds to other's distress, verbal communication, eye contact, isolates self)  Autism Spectrum Disorders - Comorbidity for Adults (ASD-CA)  37-item respondent-informed scale measuring the following domains:   * Anxiety/Repetitive Behaviours * Conduct Problems * Depressive Symptoms * Irritability/Behavioural Excesses * Attention/Hyperactivity/Impulsivity |
| **Description (cont.)** | Autism Spectrum Disorders - Behaviour Problem for Adults (ASD-BPA)  19-items respondent-informed scale measuring the following domains:   * Aggression/Destruction * Stereotypy * Self-Injurious Behaviour * Disruptive Behaviour |
| **Participant group** | Adults (16-88 years) with autism spectrum disorder and pervasive developmental disability |
| **Access** | <http://www.disabilityconsultants.org/ASD-Adult.php> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Complete Kit - 350 USD (490 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | **For evidence of internal consistency, inter-rater and test-retest reliability, concurrent and discriminant validity, and construct validity, see:**   * **Matson**, J, L., Wilkins, J., Boisjoli, J. A., & Smith, K. R. (2008). The validity of the autism spectrum disorders - diagnosis for intellectually disabled adults (ASD-DA). *Research in Developmental Disabilities, 29*, 537-546. doi: 10.1016/j.ridd.2007.09.006 * **Matson**, J. L., & Boisjoli, J. A, (2008). Autism spectrum disorders in adults with intellectual disability a comorbid psychopathology: Scale development and reliability of the ASD-CA. *Research in Autism Spectrum Disorders, 2*, 276-287. doi: 10.1016/j.rasd.2007.07.002 * **Matson**, J. L., & Rivet, T. T. (2007). A validity study of the Autism Spectrum Disorders - Behaviour Problem for Adults (ASD-BPA). *Journal of Developmental and Physical Disabilities, 19*, 557-564. doi: 10.1007/s10882-007-9069-1 |
| **Applications** | Baseline |

## ASD-C: Autism Spectrum Disorders - Children Version

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson, J.L., & González, M.L. (2006). *Autism spectrum disorders – Behaviour problems – Child version.* Baton Rouge, LA: Disability Consultants, LLC.  Matson, J.L., & González, M.L. (2006). *Autism spectrum disorders – Comorbidity – Child version.* Baton Rouge, LA: Disability Consultants, LLC.   Matson, J.L., & González, M.L. (2006). *Autism spectrum disorders – Diagnosis – Child version.* Baton Rouge, LA: Disability Consultants, LLC. |
| **Categorisation** | AUTISM SPECTRUM DISORDER |
| **Purpose** | To assess autism spectrum disorder through an assessment battery |
| **Description** | Autism Spectrum Disorders - Diagnosis for Children (ASD-DC)  40-item respondent-informed scale that assess the diagnostic criteria of autism spectrum disorder (e.g., limited number of interests, responds to other's distress, verbal communication, eye contact, isolates self)  Autism Spectrum Disorders- Comorbidity for Children (ASD-CC)  49-item respondent-informed scale measuring the following domains:   * Depression * Conduct Disorder * ADHD * Tic Disorder * Obsessive Compulsive Disorder * Specific Phobia * Eating difficulties |
| **Description (cont.)** | Autism Spectrum Disorders- Behaviour Problem for Children (ASD-BPC)  18-items respondent-informed scale that assesses behaviour problems such as kicking objects, playing with saliva, unusual play with objects, harming self by hitting, pinching, and scratching. |
| **Participant group** | Children and adolescents (2-17 years) with autism spectrum disorder, pervasive developmental disorder, and Asperger’s disorder |
| **Access** | <http://www.disabilityconsultants.org/ASD-Child.php> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Complete Kit - 350 USD (490 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | **For evidence of internal consistency, inter-rater and test-retest reliability, and specificity and sensitivity, see:**   * Matson, J. L., González, M., & Wilkins, J. (2009). Validity study of the Autism Spectrum Disorders- Diagnosis for Children (ASD-DC). *Research in Autism Spectrum Disorders, 3*, 196-206. doi: 10.1016/j.rasd.2008.05.005 * Matson, J. L., González, M. L., Wilkins, J., & Rivet. T. T. (2008). Reliability of the Autism Spectrum Disorder-Diagnostic for Children (ASD-DC). *Research in Autism Spectrum Disorders, 2,* 533-545. doi: 10.1016/j.rasd.2007.11.001 * Matson, J. L., & Wilkins, J. (2008). Reliability of the Autism Spectrum Disorders-Comorbidity for Children (ASD-CC). *Journal of Developmental and Physical Disabilities, 20,* 155–165. doi: 10.1007/s10882-008-9100-1 * Matson, J., LoVullo, S. T., Rivet, T. T, & Boisjoli, J. A. (2009). Validity of the Autism Spectrum Disorder- Comorbid for Children (ASD-CC). *Research in Autism Spectrum Disorder, 3*, 345-357. doi: 10.1016/j.rasd.2008.08.002 * **Matson,** J. L.; Gonzalez, M. L., & Rivet, T. T. (2008). Reliability of the Autism Spectrum Disorders- Behaviour Problem for Children (ASD-skypoeBPC). *Research in Autism Spectrum Disorder, 2*, 696-706. doi: 10.1016/j.rasd.2008.02.003 |
| **Applications** | Baseline |

# B

## BAI: Beck Anxiety Inventory

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Beck, A.T., & Steer, R.A. (1991). *Beck anxiety inventory manual.* San Antonio, TX: Psychological Corporation. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To screen for the severity of anxiety in the general population |
| **Description** | 21-item self-report scale descriptive of subjective, somatic, or panic-related symptoms of anxiety. Can be delivered verbally by a trained assessor for individuals with reading difficulties or problems with concentration. |
| **Participant group** | Adults (18-80 years) and possibly adolescents (17 years), including people with mild to moderate intellectual disability |
| **Access** | <https://www.pearsonclinical.com.au/products/view/41> |
| **Administration qualification** | * C Level - Registered psychologist * M Level - Medical practitioner |
| **Cost (2019)** | Complete Kit – 255 AUD |
| **Administration time** | 5 - 10 minutes |
| **Psychometric properties** | Test manual contains psychometric information.  Adapted version for people with mild intellectual disability has evidence of test-retest reliability and construct validity. For more information on this measure, see:   * Lindsay, W. R. & Lees, M. S. (2003). A comparison of anxiety and depression in sex offenders with intellectual disability and a control group with intellectual disability. *Sexual Abuse, 15*, 339-345. doi: 10.1177/107906320301500409 |
| **Applications** | Baseline, intermediate |

## BDI-II: Beck Depression Inventory-II

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Beck, A. (1996). *Beck depression inventory-II (BDI-II)*. San Antonio, TX: The Psychological Corporation. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To screen for the severity of depression in the general population |
| **Description** | 21-item self-report screen to depressive symptoms over the preceding two weeks. Can be delivered verbally by a trained assessor for individuals with reading difficulties or problems with concentration. |
| **Participant group** | Adolescents and adults (13- 80 years), including people with mild to moderate intellectual disability. Item wording is simple enough for participants with a mild or moderate intellectual disability to understand (McGillivray & McCabe, 2007).   * McGillivray, J. A., & McCabe, M. P. (2007). Early detection of depression and associated risk factors in adults with mild/moderate intellectual disability. *Research in Developmental Disabilities, 28*, 59-70. doi: 10.1016/j.ridd.2005.11.001 |
| **Access** | <https://www.pearsonclinical.com.au/products/view/39> |
| **Administration qualification** | * C Level - Registered psychologist * M Level - Medical practitioner |
| **Cost (2019)** | Complete Kit – 250 AUD |
| **Administration time** | 5 – 10 minutes |
| **Psychometric properties** | Test manual contains psychometric information.  Independent psychometric studies indicate that the BDI-II has been insufficiently studied for the intellectual disability population, and has mixed findings in relation to internal consistency reliability and concurrent validity. For a review, see:   * Hermans, H., & Evenhuis, H. M. (2010). Characteristics of instruments screening for depression in adults with intellectual disabilities: Systematic review. *Research in Developmental Disabilities, 31,* 1109-1120. doi: 10.1016/j.ridd.2010.04.023 |
| **Applications** | Baseline, intermediate, outcome |

## BFRS-R: Behaviour Flexibility Rating Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Peters-Scheffer N., Didden R., Green V. A., Sigafoos J., Korzilius H., Pituch K., …, Lancioni, G. (2008). The Behaviour Flexibility Rating Scale-Revised (BFRS-R): Factor analysis, internal consistency, inter-rater and intra-rater reliability, and convergent validity. *Research in Developmental Disabilities, 29*, 398-407. doi: 10.1016/j.ridd.2007.07.004 |
| **Categorisation** | ADAPTIVE BEHAVIOUR |
| **Purpose** | To assess sameness or resistance to change |
| **Description** | 16-item respondent-informed rating scale that measures three domains:   * Flexibility towards objects * Flexibility towards the environment * Flexibility towards persons |
| **Participant group** | Children (2-17 years) with autism spectrum disorder and related developmental disabilities |
| **Access** | Contained within Appendix A of the original reference listed above |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency, test-retest and inter-rater reliability, and construct and concurrent validity |
| **Applications** | Baseline |

## BAG: Behaviour Assessment Guide

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Willis. T. J., LaVigna, G. W., & Donnellan, A. M. (2011). *Behaviour assessment guide*. Los Angeles, CA: Institute of Applied Behaviour Analysis. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess behavioural problems, and support the development a behaviour support plan |
| **Description** | A comprehensive set of data gathering and record forms to conduct an assessment and functional analysis regarding behaviour problems, and generate non-aversive behavioural intervention plans |
| **Participant group** | Children, adolescents and adults who exhibit behaviours of concern |
| **Access** | <http://www.iaba.com/iabaresc.htm> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | 24.95 USD (35 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | Not relevant – the forms contained in BAG are used for the purposes of data gathering |
| **Applications** | Baseline, intermediate, outcome |

## BPI-01: Behaviour Problems Inventory

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | *Long form:* Rojahn, J., Matson, J. L., Lott, D., Esbensen, A. J., & Smalls, Y. (2001). The Behaviour Problems Inventory: An instrument for the assessment of self-injury, stereotyped behaviour and aggression/destruction in individuals with developmental disabilities. *Journal of Autism and Developmental Disorders, 31*, 577-588. doi: 10.1023/A:1013299028321  *Short form:* Rojahn, J., Rowe, E. W., Sharber, A. C., et al. (2012). The Behaviour Problems Inventory-Short Form (BPI-S) for individuals with intellectual disabilities I: Development and provisional clinical reference data. *Journal of Intellectual Disability Research, 56,* 527-545. doi: 10.1111/j.1365-2788.2011.01507.x |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess behaviours of concern |
| **Description** | 52-item informant-based behaviour rating scale (available in 18 languages) that assesses behaviour of concern across three domains:   * Self-injurious behaviour * Stereotyped behaviour * Aggressive/destructive behaviour   A 30-item short version (BPI-S) is also available that assesses the same three domains of behaviour. The short-version is available in 7 languages |
| **Participant group** | Children (including infants from 6 months of age), adolescents and adults with intellectual disability (mild to profound), autism spectrum disorder and other developmental disorders |
| **Access** | <http://bpi.haoliang.me/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | * Free for personal, unfunded research, and not-for-profit purposes. * Clinics, schools, investigators with funded research and other entities who wish to use the BPI on a routine basis will be charged either USD 150.00 (AUD 156.00) for the permission to reproduce 50 copies from the electronic prototype, or USD 250.00 (AUD 260.00) for an unlimited number of copies. |
| **Administration time** | Not specified |
| **Psychometric properties** | For evidence of internal consistency, test-retest and inter-rater reliability, and concurrent validity, see:   * van Ingen, D. J., Moore, L. L., Zaja, R. H., & Rojahn, J. (2010). The Behaviour Problems Inventory (BPI-01) in community-based adults with intellectual disabilities: Reliability and concurrent validity vis-à-vis the Inventory for Participant and Agency Planning (ICAP). *Research in Developmental Disabilities, 31,* 97-107. doi: 10.1016/j.ridd.2009.08.004 * Rojahn, J., Schroeder, S. R., Mayo-Ortega, L., Oyama-Ganiko, R., LeBlanc, J., Marquis, J., & Berke, E. (2013). Validity and reliability of the Behaviour Problems Inventory, the Aberrant Behaviour Checklist, and the Repetitive Behaviour Scale- Revised among infants and toddlers at risk for intellectual or developmental disabilities: A multi-method assessment approach. *Research in Developmental Disabilities, 34*, 1804-1814. doi: 10.1016/j.ridd.2013.02.024   The short-form has equivalent psychometric properties to the long-form. For evidence, see:   * Rojahn, J., Rowe, E. W., Sharber, A. C., Hastings, R. P., Matson, J. L., Didden, R., Kroes, D. B. H., & Dumont, E. L. M. (2012). The Behaviour Problems Inventory-Short Form (BPI-S) for individuals with intellectual disabilities II: Reliability and Validity. *Journal of Intellectual Disability Research. 56, 546–565.* doi: 10.1111/j.1365-2788.2011.01506.x |
| **Applications** | Baseline, intermediate, outcome |

## BIP-QEII: Behaviour Intervention Plan Quality Evaluation, Version II

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Browning Wright, D., Mayer, G. R., & Saren, D. (2013). *Behaviour intervention plan quality evaluation scoring guide II.* Los Angeles, CA: The Positive Environments, Network of Trainers. |
| **Categorisation** | BSP Quality |
| **Purpose** | To evaluate the quality of behaviour intervention planning |
| **Description** | 12-item objective, research-based scoring guide that operationalises the key components of positive behaviour support planning and rates the substantive quality of plans. Initially developed to monitor and assess plans prepared by teachers to support children with disability in the school system.  The BIP-QEII scores plan quality across 12 domains:   * Problem Behaviour * Predictor of Behaviour * Analysing What is Supporting Problem Behaviour * Environmental Changes * Predictors Related to Function * Function Related to Replacement Behaviours * Teaching Strategies * Reinforcement * Reactive Strategies * Goals and Objectives * Team Coordination * Communication |
| **Participant group** | Children, adolescents and adults with intellectual disability and behaviours of concern |
| **Access** | <http://www.pent.ca.gov/dsk/sec15/bipmanual_sec15.pdf> |
| **Administration qualification** | Behaviour support practitioners who have received training and practice using the BIP-QEII |
| **Cost (2019)** | Free |
| **Administration time** | 10 - 15 minutes |
| **Psychometric properties** | For independent evidence supporting inter-rater reliability and construct validity, see:   * Webber L. S., McVilly K., Fester T., & Zazelis, T. (2011). A preliminary investigation of the utility of the “Behaviour Support Plan Quality Evaluation Guide II” for use in Australia. *Journal of Intellectual and Developmental Disability*, 36, 273-277. doi: 10.3109/13668250.2011.587401 * McVilly, K., Webber, L., Paris, M., & Sharp, G. (2013). Reliability and utility of the Behaviour Support Plan Quality Evaluation tool (BSP-QEII) for auditing and quality development in services for adults with intellectual disability and challenging behaviour. *Journal of Intellectual Disability Research, 57*, 716-727. doi: 10.1111/j.1365-2788.2012.01603.x |
| **Applications** | Outcome |

# C

## CANDID: Camberwell Assessment of Needs for Adults with Developmental and Intellectual Disabilities

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Xenitidis, K., Slade, M., Thornicroft, G., & Bouras, N. (2003). *The Camberwell assessment of needs for adults with developmental and intellectual disabilities* (CANDID). London, United Kingdom: Gaskell. |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess met and unmet needs |
| **Description** | Contains 25 items measuring needs related to accommodation, food, self-care, daytime activities, and health for example. Contains two version, a full-version for research use (CANDID-R) and a short-version (CANDID-S) |
| **Participant group** | Adults with intellectual disability and mental health problems (dual diagnosis) |
| **Access** | Can be purchases from major online bookstores such as Amazon Australia |
| **Administration qualification** | Mental health professional |
| **Cost (2019)** | Amazon Australia – 299.46 AUD |
| **Administration time** | 30 minutes |
| **Psychometric properties** | For evidence of inter-rater and test-retest reliability, and face, content, and concurrent validity, see:   * Xenitidis, K., Thornicroft, G., Leese, M., Slade, M., Fotiadou, M., Philip, H., … , Murphy, D. G. M. (2000). Reliability and validity of the CANDID- A needs assessment instrument for adults with learning disabilities and mental health problems. *British Journal of Psychiatry, 176,* 473-478. doi: 10.1192/bjp.176.5.473 |
| **Applications** | Baseline, intermediate, outcome |

## CDC: Carer Depression Checklist

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Torr, J., Iacono, T., Graham, M. J., & Galea, J. (2008).Checklists for general practitioner diagnosis of depression in adults with intellectual disability. *Journal of Intellectual Disability Research, 52,* 930-941. doi: 10.1111/j.1365-2788.2008.01103.x |
| **Categorisation** | CARER QUALITY OF LIFE |
| **Purpose** | To assist access to mental health services for people with an intellectual disability |
| **Description** | An observation checklist for carers to rate 54 observable symptoms of depression across the following domains:   * Depressed mood * Depressed thinking * Irritability * Loss of interest in, or enjoyment of usual activities * Anxiety * Social interaction and communication * General functioning * Other behaviour * Appetite/weight * Sleep * Mood variation |
| **Participant group** | Adults with intellectual disability living in supported accommodation |
| **Access** | Contained within the Appendix of the original reference listed above |
| **Administration qualification** | Mental health professionals |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and construct and concurrent validity |
| **Applications** | Baseline, intermediate |

## ChA PAS: Child and Adolescent Psychiatric Assessment Schedule

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Moss, S., Friedlander, R., & Lee, P. (2013). *The child and adolescent psychiatric assessment schedule*. East Sussex, United Kingdom: Pavilion Publishing and Media. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess for the presence of mental health disorders in children and adolescents |
| **Description** | Self-report and informant-based semi-structured clinical interview linked to a clinical glossary that guides the ratings provided by the respondent. Considers the following mental health disorders:   * Psychosis * Manic episode * Depressive episode * Anxiety disorder * Obsessive compulsive disorder * Conduct disorder * Attention deficit hyperactivity disorder * Autism spectrum disorder (screening only) |
| **Participant group** | For children and adolescents, with and without intellectual disability and other disabilities |
| **Access** | <https://www.pavpub.com/the-cha-pas-interview-handbook-and-clinical-interview/> |
| **Administration qualification** | Child psychiatrists, child and educational psychologists, social workers and counsellors |
| **Cost (2019)** | * **Manual - 180 GBP (328 AUD)** * **Scoring Sheets - 70 GBP (128 AUD)** |
| **Administration time** | 60 minutes |
| **Psychometric properties** | None available in the test manual |
| **Applications** | Baseline |

## CARS2: Childhood Autism Rating Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Schopler, E., Van Bourgondien, M. E., Wellman, J., & Love, S. (2010). *Childhood autism rating scale-Second edition (CARS2): Manual*. Los Angeles, CA: Western Psychological Services. |
| **Categorisation** | AUTISM SPECTRUM DISORDER |
| **Purpose** | To assess the severity of autism spectrum disorder |
| **Description** | A rating scale to assess identify people with autism spectrum disorder, and assess the severity of symptoms. Based on quantifiable ratings and direct behavioural observation. Addresses the following functional areas:   * Relating to people * Body use * Visual response * Listening response * Taste, smell, and touch response and use * Verbal communication * Nonverbal communication * Level and consistency of intellectual response |
| **Participant group** | Children, adolescents and adults (2 years and over). |
| **Access** | <https://www.pearsonclinical.com.au/products/view/392> |
| **Administration qualification** | * B Level - Allied health or special education professional - This applies to but is not limited to undergraduate and Master’s degrees in speech pathology, occupational therapy, physiotherapy and may include special education, medical and behavioural science. * M Level - Medical practitioner |
| **Cost (2019)** | Complete Kit – 311 AUD |
| **Administration time** | 10 - 15 minutes |
| **Psychometric properties** | For independent evidence of sensitivity and specificity, see:   * Dawkins, T., Meyer, A. T., & Van Bourgondien, M. E. (2016). The relationship between the Childhood Autism Rating Scale: Second Edition and clinical diagnosis utilizing the DSM-IV-TR and the DSM-5. *Journal of Autism and Developmental Disorders, 46*, 3361–3368. doi: 10.1007/s10803-016-2860-z |
| **Applications** | Baseline |

## CDI 2: Children’s Depression Inventory 2

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Kovacs, M. (2011). *Children's depression inventory*. North Tonawanda, NY: Multi-Health Systems, Inc. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To measure presence and severity of depressive symptoms in children and adolescents |
| **Description** | 27-item self-report and informant-report (parent and teacher) rating scale based on the Beck Depression Inventory. Assessment depression symptoms across the following scales and subscales:  Scales:   * Emotional Problems * Functional Problems   Subscales:   * Negative Mood * Negative Self-Esteem * Ineffectiveness * Interpersonal Problems |
| **Participant group** | Children and adolescents (7-17 years) |
| **Access** | <https://www.pearsonclinical.com.au/products/view/448> |
| **Administration qualification** | * C Level - Registered psychologist * M Level - Medical practitioner |
| **Cost (2019)** | * Hand Scored Kit - 474 AUD * Software Kit – 680 AUD |
| **Administration time** | 5 - 15 minutes |
| **Psychometric properties** | For independent evidence of internal consistency and inter-rater reliability, sensitivity and specificity, see:   * Hermans, H., & Evenhuis, H. M. (2010). Characteristics of instruments screening for depression in adults with intellectual disabilities: Systematic review. *Research in Developmental Disabilities, 31,* 1109-1120. doi: 10.1016/j.ridd.2010.04.023 * Meins, W. (1993). Assessment of depression in mentally retarded adults: Reliability and validity of the Children’s Depression Inventory (CDI). *Research in Developmental Disabilities, 14*, 299–312. doi: 10.1016/0891-4222(93)90024-E |
| **Applications** | Baseline, intermediate, outcome |

## C-SHARP: Children’s Scale of Hostility and Aggression: Reactive/Proactive

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Farmer, C. & Aman, M. (2009). Development of the Children’s Scale of Hostility and Aggression: Reactive/Proactive (C-SHARP). Research in Developmental Disabilities, 30, 1155-1167. doi: 10.1016/j.ridd.2009.03.001 |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess aggressive and hostile behaviour |
| **Description** | A 48-item respondent-informed rating scale, that assesses aggressive and hostile behaviour across the following domains:   * Verbal Aggression * Physical Aggression * Hostile Affect * Covert Aggression * Bullying |
| **Participant group** | Children and adolescents with developmental disabilities. |
| **Access** | <https://psychmed.osu.edu/index.php/instrument-resources/c-sharp/> |
| **Administration qualification** | **Professionals working in the mental health field - physicians, licensed psychologists, social workers, and counsellors, and individuals working under the direct supervision of such professionals** |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability and construct validity. |
| **Applications** | Baseline, intermediate, outcome |

## CQ: Choice Questionnaire

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Stancliffe, R. J., & Parmenter, T. R. (2009). The Choice Questionnaire: A scale to assess choices exercised by adults with intellectual disability. *Journal of Intellectual and Developmental Disability, 24*,107-132. doi: 10.1080/13668259900033911 |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess the degree of choice available to people with an intellectual disability |
| **Description** | 26-item self-report or respondent-informed interview that seeks information on a person’s degree of choice across the following domains:   * Domestic activities, staff and the other people you live with * Money and spending * Health * Social activities, community access and personal relationships * Work/day activities * Overall Choice |
| **Participant group** | Adults with an intellectual disability who exhibit adequate communication skills |
| **Access** | Contained within Appendices A and B of the original reference listed above |
| **Administration qualification** | None |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency, inter-rater and test-retest reliability, and content, concurrent and construct validity.  **For independent evidence of internal consistency reliability, and content, concurrent and discriminant validity, see:**   * **Li,** C., Tsoi, E. W. S., Zhang, A. L., Chen, C., & Wang, C. K. J. (2013). Psychometric properties of self-reported quality of life measures for people with intellectual disability: A systematic review. *Journal of Developmental and Physical Disabilities, 25*, 253-270. doi: 10.1007/s10882-012-9297-x |
| **Applications** | Baseline, intermediate, outcome |

## CELF-5: Clinical Evaluation of Language Fundamentals

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Wiig, E. H., Semel, E., & Secord, W. A. (2017). *Clinical evaluation of language fundamentals-Fifth edition (CELF-5): Manual*. Sydney, Australia: Pearson. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess language in general population students. |
| **Description** | A comprehensive battery of 16 tests that provides a streamlined, flexible approach to language assessment. The following domains are assessed:   * Observational Rating Scales * Sentence Comprehension * Linguistic Concepts * Word Structure * Word Classes * Following Directions * Formulated Sentences * Recalling Sentences * Understanding Spoken Paragraphs * Word Definitions * Sentence Assembly * Semantic Relationships * Reading Comprehension * Structured Writing * Pragmatics profile * Pragmatics Activities Checklist |
| **Participant group** | Children, adolescents and adults (5 - 21 years of age) |
| **Access** | <https://www.pearsonclinical.com.au/products/view/592> |
| **Administration qualification** | S Level - Speech pathologist |
| **Cost (2019)** | Complete Kit – 1898 AUD |
| **Administration time** | 30 - 45 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline |

## CMAI: Cohen-Mansfield Agitation Inventory

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Cohen-Mansfield, J., Marx, M. S., & Rosenthal, A. S. (1989). A description of agitation in a nursing home. *Journal of Gerontology, 44*(3), M77-M84. doi: 10.1093/geronj/44.3.M77 |
| **Categorisation** | DEMENTIA |
| **Purpose** | To assess the frequency of agitated behaviours exhibited by older people in long-term care settings |
| **Description** | Respondent-informed interview to assess the frequency of agitation behaviours. In general, three versions of the CMAI are available for use:   * The original 29-item interview that uses retrospective recall to assess the frequency of agitation behaviours over the previous two weeks * A 37-item interview specifically for older adults living in the community * A 14-item short-form interview for older adults living in long-term care settings |
| **Participant group** | Elderly adults |
| **Access** | For the test manual and the various interview forms: <http://ltctoolkit.rnao.ca/node/1752> |
| **Administration qualification** | Family caregivers, social workers, care staff |
| **Cost (2019)** | Free |
| **Administration time** | Between 10 - 45 minutes depending upon the version used |
| **Psychometric properties** | The test manual contains evidence of inter-rater reliability, and construct and concurrent validity. Additional sources of evidence are also referenced in the manual. |
| **Applications** | Baseline, intermediate |

## CM: Communication Matrix

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Rowland, C. (2011). Using the Communication Matrix to assess expressive skills in early communicators. *Communication Disorders Quarterly, 32*, 190-201. doi: 10.1177%2F1525740110394651 |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess the expressive communication skills of children with multiple and severe disabilities |
| **Description** | Contains a combination of respondent-informed interview and observation tools to assess whether children:   * **Refuse** things that we don't want * **Obtain** things that we do want * **Engage** in social interaction * **Provide** or seek information   **It also assesses a child’s** communication behaviours across seven domains:   * Pre-intentional behaviour * Intentional behaviour * Unconventional communication * Conventional communication * Concrete symbols * Abstract symbols * Language |
| **Participant group** | Children with severe communication difficulties, including sensory, motor and cognitive impairments |
| **Access** | <http://www.communicationmatrix.org/> |
| **Administration qualification** | Speech pathologists |
| **Cost (2019)** | Free |
| **Administration time** | No specified |
| **Psychometric properties** | For evidence of inter-rater and test-retest reliability, and content validity, see:   * Rowland, C. (2012). *Communication matrix: Description, research basis and data.* Portland, OR: Oregon Health and Science University. Retrieved from [https://www.communicationmatrix.org/Uploads/ Pdfs/CommunicationMatrixDataandResearchBasis.pdf](https://www.communicationmatrix.org/Uploads/%20Pdfs/CommunicationMatrixDataandResearchBasis.pdf) |
| **Applications** | Baseline |

## CAS: Contextual Assessment Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | McAtee, M., Carr, E. D., & Schulte, C. (2004). A contextual assessment inventory for problem behaviour: Initial development. *Journal* *of Positive Behaviour Interventions, 6*, 148-165. doi: 10.1177%2F10983007040060030301 |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To identify a functional relationship between the context and identified problem behaviours |
| **Description** | 80-item screening survey with 13 open-ended questions that aims to identify the possible setting events and discriminative stimuli for problem behaviours across four categories:   * Social/cultural: Negative interactions, disappointments; * Nature of Task or Activity: Related factors, daily routines * Physical: Uncomfortable environment, changes in the environment * Biological: Medication, illness, physiological states |
| **Participant group** | Children, adolescents and adults with developmental disabilities |
| **Access** | Contained within the Appendix of the original reference listed above |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 20 minutes |
| **Psychometric properties** | For evidence of concurrent and predictive validity, see:   * Carr, E. G., Ladd, M. V., & Schulte, C. F. (2008). Validation of the Contextual Assessment Inventory for problem behaviour. *Journal of Positive Behaviour Interventions, 10*, 91-104. doi: 10.1177%2F1098300707312543 |
| **Applications** | Baseline, intermediate, outcome |

# D

## DBC2: Developmental Behaviour Checklist 2

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Gray, K., Tonge, B., Einfeld, S. L., Gruber, C., & Klein, A. (2018). *Developmental behaviour checklist 2: Manual*. Torrance, CA: WPS |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess a broad range of behavioural and emotional disturbances in young people and adults |
| **Description** | Describes emotional and behavioural problems in people with intellectual and/or developmental disability across five domains:   * Disruptive/Anti‐Social Behaviour: * Self‐absorbed; * Communication Disturbance; * Anxiety; and, * Social Relating.   Three forms available:   * Parent (to be completed by a parent or family carer of the child/young person) * Teacher (to be completed by a teacher who has known the child or young person for at least six months) * Adult (to be completed by a parent, family carer or paid carer who knows the adult very well)   Multiple language translations available |
| **Participant group** | * Children and young people: 4 - 18 years * Adult: 18 years and onwards |
| **Access** | [https://www.wpspublish.com/store/p/3424/dbc2-developmental-behavior-checklist-2 - purchase-product](https://www.wpspublish.com/store/p/3424/dbc2-developmental-behavior-checklist-2#purchase-product) |
| **Administration qualification** | Level C qualification:  A Master’s degree in psychology, school counselling, occupational therapy, speech pathology, social work, education, special education, or related field; or  A bachelor’s degree (BA, BS) in psychology, school counselling, occupational therapy, speech pathology, social work, education, special education, or related field and license or certification from an agency/organisation that requires training and experience in assessment. |
| **Cost (2019)** | * Child Kit- 147 USD (206 AUD) * Adult Kit- 116 USD (162 AUD) |
| **Administration time** | 15 - 20 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

## DASH-II: Diagnostic Assessment for the Severely Handicapped-II

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson, J. L., Rush, K. S., Hamilton, M., Anderson, S. J., Bamburg, J. W., Baglio, C. S., ... , Kirkpatrick-Sanchez, S. (1999). Characteristics of depression as assessed by the Diagnostic Assessment for the Severely Handicapped-II (DASH-II). *Research in Developmental Disabilities, 20*, 305-313. doi: 10.1016/S0891-4222(99)00012-8 |
| **Categorisation** | BEHAVIOURS OF CONCERN  DUAL DIAGNOSIS |
| **Purpose** | To assess behavioural and psychiatric conditions for people with severe to profound intellectual disability |
| **Description** | 84-items informant-report questionnaire that assesses psychiatric conditions based on DSM-IV criteria. The following conditions are assessed:   * Anxiety; * Depression; * Mania; * Autism spectrum disorder; * Schizophrenia; * Stereotypies; * Self-Injury; * Elimination; * Eating; * Sleeping; * Sexual; * Organic; and * Impulse Control. |
| **Participant group** | Adults with severe or profound intellectual disability |
| **Access** | <http://www.disabilityconsultants.org/DASHII.php> |
| **Administration qualification** | Mental health professionals |
| **Cost (2019)** | Complete Kit - 300 USD (AUD 426) |
| **Administration time** | 25 minutes |
| **Psychometric properties** | Original reference contains evidence of sensitivity.  For evidence of internal consistency and concurrent validity, see:   * Hermans, H., & Evenhuis, H. M. (2010). Characteristics of instruments screening for depression in adults with intellectual disabilities: Systematic review. *Research in Developmental Disabilities, 31,* 1109-1120. doi: 10.1016/j.ridd.2010.04.023 |
| **Applications** | Baseline, intermediate, outcome |

## DRAMS: Diagnostic Risk Assessment and Management System

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Lindsay W. R., Murphy, L., Smith, G., Murphy, D., Edwards, Z., Chittock, C., … , Young, S. J. (2004). The Dynamic Risk Assessment and Management System: An assessment of immediate risk of violence for individuals with offending and challenging behaviour. *Journal of Applied Research in Intellectual Disabilities, 17*, 267-274. doi: 10.1111/j.1468-3148.2004.00215.x |
| **Categorisation** | FORENSIC ASSESSMENT |
| **Purpose** | Assesses dynamic risk factors for offenders with intellectual disability |
| **Description** | 31-item respondent-informed assessment tool that measures risks factors for offending across the following domains:   * Mood/emotion; * Antisocial behaviour; * Intolerance/agreeableness; * Sexual self-regulation; * Violent self-regulation; * Agreement with routine; * Substance abuse; * Opportunity for victim access; and, * Psychotic symptoms, winding others up, refusing medication. |
| **Participant group** | Adults with intellectual disability |
| **Access** | Author to be directly contacted for access to the assessment tool |
| **Administration qualification** | Not specified – typically completed by a staff member who knows the person with an intellectual disability well |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of inter-rater reliability.  For independent evidence of internal consistency and inter-rater reliability, and predictive, concurrent and discriminant validity, see:   * Steptoe, L. R., Lindsay, W. R., Murphy, L., & Young, S. J. (2008). Construct validity, reliability and predictive validity of the dynamic risk assessment and management system (DRAMS) in offenders with intellectual disability. *Legal and Criminological Psychology, 13*, 309-321. doi: 10.1348/135532507X218251 |
| **Applications** | Baseline, intermediate |

## DisDAT: Disability Distress Assessment Tool

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Regnard, C., Reynolds, J., Watson, Matthews, D., Gibson, L., & Clarke, C. (2007). Understanding distress in people with severe communication difficulties: Developing and assessing the Disability Distress Assessment Tool (DisDAT). *Journal of Intellectual Disability Research, 51*, 277-292. doi: 10.1111/j.1365-2788.2006.00875.x |
| **Categorisation** | QUALITY OF LIFE  COMMUNICATION |
| **Purpose** | To screen for signs of distress and contentment |
| **Description** | Respondent-informed, observation tool that identifies distress and contentment cues in people. Examples include smiling, eye contact, and grimacing. |
| **Participant group** | Adults with profound intellectual disability and severely limited communication, including comorbid dementia |
| **Access** | Contained within the Appendix of the original reference listed above |
| **Administration qualification** | Recommended that a team of respondents complete the measure as opposed to just one respondent |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | No psychometric information available |
| **Applications** | Baseline, intermediate, outcome |

## DISABKIDS

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Bullinger, M., Schmidt, S., Petersen, C., & DISABKIDS group. (2002). Assessing quality of life of children with chronic health conditions and disabilities: A European approach. *International Journal of Rehabilitation Research*, *25*, 197-206. doi: 10.1097/00004356-200209000-00005 |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess health-related quality of life and the level of distress caused by chronic disease |
| **Description** | Self-report and informant-report measure that assesses physical, social and emotional wellbeing across the following domains:   * Independence; * Emotion; * Social inclusion; * Social exclusion; * Limitation; and * Treatment.   Three versions are available:   * DCGM-37 (long version); * DCGM-12 (short version); and, * DISABKIDS – Smileys (used with children with cognitive levels between the age of 4 and 7 years) |
| **Description (cont.)** | Disease- specific modules are also available:   * Arthritis; * Asthma; * Atopic dermatitis; * Cerebral palsy; * Cystic fibrosis; * Diabetes; and, * Epilepsy   Available in multiple languages |
| **Participant group** | Children and adolescents (4 – 18 years) |
| **Access** | <https://www.disabkids.org/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 5-20 minutes depending on the version used |
| **Psychometric properties** | For evidence of internal consistency and test-restest reliability, and construct and concurrent validity, see:   * Simeoni, M. C., Schmidt, S., Muehlan, H., Debensason, D., Bullinger, M., & Disabkids Group. (2007). Field testing of a European quality of life instrument for children and adolescents with chronic conditions: The 37-item DISABKIDS Chronic Generic Module. *Quality of Life Research*, *16*, 881-893. doi: 10.1007/s11136-007-9188-2 |
| **Applications** | Baseline, intermediate, outcome |

# E

## EPS: Emotional Problems Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Prout, H. T., & Strohmer, D. C. (1991). *Emotional problem scales: Professional manual for the behaviour rating scales and the self-report inventory*: Lutz, FL: Psychological Assessment Resources. |
| **Categorisation** | BEHAVIOURS OF CONCERN  DUAL DIAGNOSIS |
| **Purpose** | To assess emotional and behavioural problems in people with mild intellectual disability |
| **Description** | Contains two complimentary scales:   * 135-item respondent-informed *Behaviour Rating Scale* (BRS), that assesses behaviour over the last 30 days, across the following domains:   + Thought/Behaviour Disorder;   + Verbal Aggression;   + Physical Aggression;   + Sexual Maladjustment;   + Noncompliance;   + Distractibility;   + Hyperactivity,;   + Somatic Concerns;   + Anxiety;   + Depression;   + Withdrawal; and   + Low Self-Esteem |
| **Description (cont.)** | * 147-item *Self-Report Inventory* (SRI) which is completed by the person with an intellectual disability. It assesses behaviour across the following domains:   + Thought/Behaviour Disorder;   + Impulse Control;   + Anxiety;   + Depression;   + Low Self-Esteem; and   + Positive Impression. |
| **Participant group** | For adolescents and adults (14 years and over) with mild intellectual disability |
| **Access** | <https://iapsychtests.azurewebsites.net/Home/Page/8> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Must contact Integrated Assessment for pricing |
| **Administration time** | 20 - 30 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability and concurrent validity.  For independent evidence of construct and concurrent validity, see:   * Hogue, T. E., Mooney, P., Morrissey, C., Steptoe, L., Johnston, S., Lindsay, W. R., & Taylor, J. (2007). Emotional and behavioural problems in offenders with intellectual disability: Comparative data from three forensic services. *Journal of Intellectual Disability Research*, *51*, 778-785. doi: 10.1111/j.1365-2788.2006.00938.x * Lindsay, W. R., Taylor, J. L., Hogue, T. E., Mooney, P., Steptoe, L., & Morrissey, C. (2010). Relationship between assessed emotion, personality, personality disorder, and risk in offenders with intellectual disability. *Psychiatry, Psychology and Law, 17*, 385-397. doi: 10.1080/13218710903443344 |
| **Applications** | Baseline, intermediate, outcome |

## ERCBS: Emotional Reactions to Challenging Behaviours Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Mitchell, G., & Hastings, R. P. (1998). Learning disability care staff emotional reactions to aggressive challenging behaviours: Development of a measurement tool. *British Journal of Clinical Psychology, 37*, 441-449. doi: 10.1111/j.2044-8260.1998.tb01401.x |
| **Categorisation** | CARER QUALITY OF LIFE |
| **Purpose** | To assess carer stress in response to behaviours of concern (in the form of typical emotional reactions experienced by carers as part of their work) |
| **Description** | 23-item self-report measure of the emotional reactions that carers have said they experience when they work with people with behaviours of concern, including anger, sadness, and incompetence. |
| **Participant group** | Carers of people with disability who display behaviours of concern |
| **Access** | The measure is available within the *Victorian Positive Practice Framework*:  <https://providers.dhhs.vic.gov.au/positive-practice-framework-word> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency and test-retest reliability, and face and construct validity |
| **Applications** | Baseline, intermediate, outcome |

# F

## FQLS: Family Quality of Life Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Beach Centre on Disabilities. (2006). *Family quality of life scale*. Lawrence, KS: Author. |
| **Categorisation** | CARER QUALITY OF LIFE |
| **Purpose** | To measure a family’s perceived satisfaction in terms of quality of family life |
| **Description** | 25-item self-report inventory measuring family quality of life across the following domains:   * Family Interaction; * Parenting; * Emotional Well-being; * Physical/Material Well-being; * Disability-Related Support.   The FQLS has been translated into several languages. |
| **Participant group** | Families of people with disability, currently focused on children and young people (birth to 21 years of age) |
| **Access** | <http://www.midss.org/content/family-quality-life-scale-fqol> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 5 - 10 minutes |
| **Psychometric properties** | For independent evidence of test-retest reliability, and construct and concurrent validity, see:   * Hoffman, L., Marquis, J., Poston, D., Summers, J. A., & Turnbull, A. (2006). Assessing family outcomes: Psychometric evaluation of the Beach Centre Family Quality of Life scale. *Journal of Marriage and Family, 68*, 1069-1083. doi: 10.1111/j.1741-3737.2006.00314.x * Hu, X., Summers, J. A., Turnbull, A., & Zuna, N. (2011). The quantitative measurement of family quality of life: A review of available instruments. *Journal of Intellectual Disability Research, 55*, 1098-1114. doi: 10.1111/j.1365-2788.2011.01463.x |
| **Applications** | Baseline, intermediate, outcome |

## FQLS-2006: Family Quality of Life Survey-2006

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Brown I., Brown, R. I., Baum N. T., Issacs, B. J., Myerscough, T., Neikrug, S., ... , Wang, M. (2006). *Family quality of life survey: Main caregivers of people with intellectual disabilities*. Toronto, Canada: Surrey Place Centre. |
| **Categorisation** | CARER QUALITY OF LIFE |
| **Purpose** | To determine quality of life in families with a child with an intellectual disability of developmental disability |
| **Description** | 121-item interview-based or respondent-informed assessment tool that measures family quality of life across the following domains:   * Health - health of family; * Finances - financial well-being; * Family - internal relationships; * Others - informal support from others; * Service support - from disability services; * Values - personal, spiritual, cultural, or religious values; * Career - careers and career preparation; * Leisure - leisure and recreation; * Community - community interaction.   The FQLS-2006 has been translated into 16 other languages. |
| **Participant group** | Families of children with an intellectual or developmental disability |
| **Access** | <https://www.surreyplace.ca/research/current-research/about-the-international-family-quality-of-life-project/surveys/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | For independent evidence of internal consistency reliability, and construct and concurrent validity, see:   * Isaacs, B., Wang, M., Samuel, P., Ajuwon, P., Baum, N., Edwards, M., & Rillotta, F. (2012). Testing the factor structure of the Family Quality of Life Survey-2006. *Journal of Intellectual Disability Research*, *56*, 17-29. doi: 10.1111/j.1365-2788.2011.01392.x * Samuel, P. S., Pociask, F. D., DiZazzo-Miller, R., Carrellas, A., & LeRoy, B. W. (2016). Concurrent Validity of the International Family Quality of Life Survey. *Occupational Therapy in Health Care*, *30*, 187-201. doi: 10.3109/07380577.2015.1116129 |
| **Applications** | Baseline, intermediate, outcome |

## FSAMR: Fear Survey for Adults with Mental Retardation

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Ramirez, S. Z., & Lukenbill, J. F. (2007). Development of the Fear Survey for Adults with Mental Retardation. *Research in Developmental Disabilities, 28*, 225-237. doi: 10.1016/j.ridd.2006.01.001 |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess fears exhibited by adults with an intellectual disability |
| **Description** | 73-item self-report interview assessing the person’s fear stimuli across the following domains:   * Physical assault; * Animals; * Illness; * Injury; * Changes in routine/unfamiliar environment; * Socio-emotional; * Natural/supernatural; * People (non-specific); * Idiosyncratic;   There are an additional six open-ended questions. Some items are repeated to assess the reliability of the person’s responding, and a set of items are also included to test acquiescent responding. |
| **Participant group** | Adults with mild to severe intellectual disability |
| **Access** | Author to be directly contacted for access to the assessment tool |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency and concurrent validity |
| **Applications** | Baseline, intermediate, outcome |

## FAST: Functional Analysis Screening Tool

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Iwata, B. A., DeLeon, I. G., Roscoe, E. M. (2013). Reliability and validity of the Functional Analysis Screening Tool. *Journal of Applied Behaviour Analysis, 46,* 271-284.doi: 10.1002/jaba.31. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To support the preparation of a functional behaviour assessment |
| **Description** | 16-item informant-based assessment of antecedent and consequent events that may correlate with problem behaviours:   * Social-positive reinforcement - access to attention or specific activities; * Social-negative reinforcement - escape from demands or social interactions; * Automatic-positive reinforcement - self-stimulatory behaviour; * Automatic-negative reinforcement - alleviate pain or discomfort. |
| **Participant group** | Children, adolescents and adults with a disability who display behaviours of concern |
| **Access** | Contained within the original reference listed above |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of inter-rater reliability, and predictive validity.  For independent evidence of internal consistency, inter-rater and test-retest reliability, see:   * Zaja, R. H., Moore, L., van Ingen, D. J., & Rojahn, J. (2011). Psychometric comparison of the functional assessment instruments QABF, FACT and FAST for self-injurious, stereotypic and aggressive/destructive behaviour. *Journal of Applied Research in Intellectual Disabilities,* *24,* 18-28. doi: 10.1111/j.1468-3148.2010.00569 |
| **Applications** | Baseline |

## FACT: Functional Assessment for multiple CausaliTy

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson, J. L., Kuhn, D. E., Dixon, D. R., Mayville, S. B., Laud, R. B., Cooper, C. L., ... & Lott, J. D. (2003). The development and factor structure of the Functional Assessment for Multiple causaliTy (FACT). *Research in Developmental Disabilities*, *24*, 485-495. doi: 10.1016/j.ridd.2003.07.001 |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess the multiple functions of behaviours of concern |
| **Description** | 35-item informant-report assessment tool that identifies a hierarchy of multiple behavioural functions across the following domains:   * Attention; * Escape; * Non-Social; * Physical; * Tangible. |
| **Participant group** | Children, adolescents and adults with intellectual disabilities and behaviours of concern |
| **Access** | <http://www.disabilityconsultants.org/FACT.php> |
| **Administration qualification** | None – Completed by a parent or carer familiar with the person |
| **Cost (2019)** | Complete Kit - 300 USD (426 AUD). |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and construct validity.  For independent evidence of internal consistency, inter-rater and test-retest reliability, see:   * Zaja, R. H., Moore, L., van Ingen, D. J., & Rojahn, J. (2011). Psychometric comparison of the functional assessment instruments QABF, FACT and FAST for self-injurious, stereotypic and aggressive/destructive behaviour. *Journal of Applied Research in Intellectual Disabilities,* *24,* 18-28. doi: 10.1111/j.1468-3148.2010.00569 |
| **Applications** | Baseline measure |

## FAI: Functional Assessment Interview

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | O'Neill, R. E., Horner, R. H., Albin, R. W., Sprague, J. R., Storey, K., & Newton, J. S. (1997). *Functional assessment and program development for problem behaviour: A practical handbook* *(2nd ed.)*. Pacific Grove, CA: Brooks/Cole. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess the key variables that affect a person’s behaviour |
| **Description** | An informant-report interview schedule with eleven sections:   * Descriptions and topographies of behaviours; * Ecological/setting events; * Antecedent events (setting events and discriminative stimuli); * Maintaining consequences; * Efficiency of behaviours; * Functional alternatives to challenging behaviours; * Primary communication skills; * Approaches that should and should not be used when supporting the person; * Possible positive reinforcers; * History of behaviours; and * Previous intervention strategies. |
| **Participant group** | Children, adolescents and adults with a disability who exhibit behaviours of concern |
| **Access** | [http://www.kipbs.org/new\_kipbs/fsi/files/Functional Assessment Interview.pdf](http://www.kipbs.org/new_kipbs/fsi/files/Functional%20Assessment%20Interview.pdf) |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 45 - 90 minutes |
| **Psychometric properties** | Not relevant – the interview is used for the purposes of data gathering |
| **Applications** | Baseline |

## FCP-R: Functional Communication Profile - Revised

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Kleiman, L. I. (2003). *Functional communication profile (Revised).* Nerang, Australia: Pro-Ed Australia. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess the communication effectiveness of people with developmental disabilities |
| **Description** | Assessment communication abilities via direct observation, teacher and caregiver reports, and one-on-one testing. The following communication skills are assessed:   * **Sensory/Motor Skills;** * **Attentiveness;** * **Receptive Language;** * **Expressive Language**; * **Pragmatic/Social Language**; * **Speech**; * **Voice;** * **Oral;** * **Fluency;** * Intonation; and * **Non-Oral Communication.** |
| **Participant group** | Children, adolescents and adults (3 years to adult) with intellectual disability and developmental disabilities |
| **Access** | <https://www.proedaust.com.au/functional-communication-profile-revised-fcp-r> |
| **Administration qualification** | Speech pathologist, a graduate of a speech-language assistant program, a special education teacher or classroom specialist, or a graduate student in communicative disorders. |
| **Cost (2019)** | Test - 138 AUD  Test Forms - 65 AUD |
| **Administration time** | 45 - 90 minutes |
| **Psychometric properties** | Not relevant – the test is a criterion-referenced assessment where the person is assessed for mastery of a specified behaviour against a set of criterion |
| **Applications** | Baseline, intermediate |

# G

## G-DSDS: Gedye Dementia Scale for Down Syndrome

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Gedye, A. (1995). *Dementia scale for Down syndrome*. Vancouver, Canada: Gedye Research and Consulting. |
| **Categorisation** | DEMENTIA |
| **Purpose** | To assess the presence or absence of dementia in people with Down syndrome |
| **Description** | 60-item respondent-informed interview schedule seeking information about changes in the person’s cognitive ability and daily living skills. The findings are used to indicate early, middle or late stages of dementia. The tool also provides for differential diagnosis of Alzheimer’s disease, dementia with depression, hyperthyroidism and visual and hearing impairments. |
| **Participant group** | Adults with Down syndrome, with or without developmental disability |
| **Access** | <http://www.gedye.ca/> |
| **Administration qualification** | Only psychologists and psychometrists with university training in standardised testing |
| **Cost (2019)** | Manual - 40 USD (56 AUD)  Booklets - 40 USD (56 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | For independent evidence of sensitivity, specificity and concurrent validity, see:   * Deb, S., & Braganza, J. (1999). Comparison of rating scales for the diagnosis of dementia in adults with Down’s syndrome. *Journal of Intellectual Disability Research, 43*, 400-407. doi: 10.1046/j.1365-2788.1999.043005400.x |
| **Applications** | Baseline |

## GSNQ: General Sexual Knowledge Questionnaire

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Talbot, T. J., & Langdon, P. E. (2006). A revised sexual knowledge assessment tool for people with intellectual disabilities: Is sexual knowledge related to sexual offending behaviour? *Journal of Intellectual Disability Research, 50*, 532-531. doi: 10.1111/j.1365-2788.2006.00801.x |
| **Categorisation** | SEXUAL KNOWLEDGE |
| **Purpose** | To assess sexual knowledge of people with an intellectual disability |
| **Description** | 63-item semi-structured interview that assesses sexual knowledge across the following domains:  Human anatomy and physiology;  Sexual intercourse;  Pregnancy;  Contraception;  Sexually transmitted disease; and,  Sexuality. |
| **Participant group** | Adults with mild or borderline intellectual disability |
| **Access** | <http://www.midss.org/content/general-sexual-knowledge-questionnaire-qskq> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 30 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and construct validity |
| **Applications** | Baseline, Intermediate |

## GAS-ID: Glasgow Anxiety Scale for People with an Intellectual Disability

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Mindham, J., & Espie, C. A. (2003). Glasgow Anxiety Scale for people with Intellectual Disability (GAS-ID): Development and psychometric properties of a new measure for use with people with a mild intellectual disability. *Journal of Intellectual Disability Research, 47*, 22-30. doi: 10.1046/j.1365-2788.2003.00457.x |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess anxiety disorders in adults with an intellectual disability |
| **Description** | 27-item self-report assessment tool that measures:   * Worries; * Specific fears; and * Physiological symptoms.   The use of visual cue cards is required in order to complete the assessment tool. |
| **Participant group** | Adults with an intellectual disability, including mild intellectual disability |
| **Access** | Contained within the Appendix I of the original reference listed above |
| **Administration qualification** | Mental health professionals |
| **Cost (2019)** | Free |
| **Administration time** | 10 - 15 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency and test-retest reliability, specificity and sensititivy, and concurrent validity |
| **Applications** | Baseline, intermediate, outcome |

## GDS-LD: Glasgow Depression Scale for people with a Learning Disability

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Cuthill F. M., Espie C., & Cooper S. A. (2003). Development and psychometric properties of the Glasgow Depression Scale for people with a learning disability. *British Journal of Psychiatry, 182*, 347-355. doi: 10.1192/bjp.182.4.347 |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess depression in adults with mild or moderate intellectual disability |
| **Description** | * 20-item self-report scale (GDS-LD) that measures symptoms of depression such as sadness, fatigue, attention and suicidal ideation. * There is also a 16-item parallel respondent-informed scale (GDS-Carer Supplement), which asks carers about potential symptoms of depression they have noticed in the person with an intellectual disability. |
| **Participant group** | Adults with intellectual disability, including mild to moderate intellectual disability |
| **Access** | The GDS-LD and the GDS-Carer Supplement are contained within the Appendix 1 and 2 of the original reference listed above |
| **Administration qualification** | Mental health professional |
| **Cost (2019)** | Free |
| **Administration time** | GDS-LD: 10 - 15 minutes  GDS-Carer Supplement: 5 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency and test-retest reliability, specificity and sensititivy, and concurrent validity |
| **Applications** | Baseline, intermediate, outcome |

## GFS: Goodness of Fit Survey

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Special Projects Team: Directorate of Learning Disability Services, Bro Morgannwg NHS Trust. (2010). *A hitchhiker’s guide for the specialist behaviour team (operational guidance).* Cardiff, Wales: Wales National Health Service. |
| **Categorisation** | BEHAVIOURS OF CONCERN  BSP QUALITY |
| **Purpose** | To assess the goodness of fit between an behaviour support plan and the characteristics of the implementing provider’s setting and staff |
| **Description** | This survey seeks information from staff about the prospects of successfully implementing a behaviour support plan within their service setting. Example questions include comfort to implement the interventions, staff perception of their skills to implement the interventions, and intervention fit with service daily routines.   * If there is a general consensus amongst staff that the fit is poor, the positive behaviour support plan will need to be adjusted or aspects of the environment changed. |
| **Participant group** | Children, adolescents and adults with a disability who display behaviours of concern. |
| **Access** | The measure is available within the *Victorian Positive Practice Framework*:  <https://providers.dhhs.vic.gov.au/positive-practice-framework-word> |
| **Administration qualification** | Nil |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Not relevant – the tool is used for the purposes of data gathering |
| **Applications** | Outcome measure |

# H

## HCR-20V3: Historical Clinical Risk Management-20, Version 3

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Douglas, K. S., Hart, S. D., Webster, C. D., & Belfrage, H. (2013). HCR-20V3: Assessing risk of violence-User guide. Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University. |
| **Categorisation** | FORENSIC ASSESSMENT |
| **Purpose** | To assess risk of violent and sexual reoffending in general population |
| **Description** | The HCR-20V3 is comprehensive set of professional guidelines for the assessment and management of violence risk. It measures risk across the following domains:   * Historical Factors; * Clinical Factors; and * Risk Management factors.   Research has looked at the utility of an *Intellectual Disability Supplement* for the measure (discussed in the Psychometrics section) |
| **Participant group** | Adult violent offenders with or without an intellectual disability |
| **Access** | <http://hcr-20.com/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | * Manual and additional worksheets (both 130 AUD) available to purchase from Protect International (<https://protect-international.com/product-category/manuals-and-worksheets/>) * Rating forms are available free of charge via the website (<http://hcr-20.com/>) |
| **Administration time** | Not specified |
| **Psychometric properties** | Test manual contains psychometric information.  For comprehensive psychometric information on previous versions of the measure, see the annotated bibliography available on the website (<http://hcr-20.com/>).  For evidence of predictive validity for the intellectual disability population using the HCR-20 (a previous version) and the HCR-20 with the Intellectual Disability Supplement, see:   * Verbrugge, H. M., Goodman-Delahunty, J. & Frize, M. C. J. (2011). Risk assessment in intellectually disabled offenders: Validation of the suggested ID supplement to the HCR-20. *International Journal of Forensic Mental Health, 10*, 83-91. doi: 10.1080/14999013.2011.555934 |
| **Applications** | Baseline, intermediate, outcome |

## HADS: Hospital Anxiety and Depression Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Snaith, R. P., & Zigmond, A. S. (1994). *The hospital anxiety and depression scale.* Melbourne, Australia: Australian Council of Educational Research. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To screen for the presence and severity of mild degrees of mood disorder, anxiety and depression |
| **Description** | 14-item self-report measure that assesses the symptoms of depression and anxiety.   * The HADS contains a 7-item Depression subscale and a 7-item Anxiety subscale, and both subscales can be used independently of each other. * Has been adapted for adults with mild to moderate intellectual disability. For more information, see the Psychometric section. |
| **Participant group** | Adults (18 years and over) |
| **Access** | <https://shop.acer.edu.au/the-hospital-anxiety-and-depression-scale-hads> |
| **Administration qualification** | Restricted – Mental health professionals with a four-year psychology qualification plus postgraduate training in the use of psychological tests |
| **Cost (2019)** | Complete Kit – 225 AUD |
| **Administration time** | 2 - 5 minutes |
| **Psychometric properties** | Test manual contains psychometric information.  For evidence of internal consistency reliability, and concurrent and construct validity when used with an intellectual disability population, see:   * Dagnan, D., Jahoda, A., McDowell, K., Masson, J., Banks, P., & Hare, D. (2008). The psychometric properties of the hospital anxiety and depressions scale adapted for use with people with intellectual disabilities. *Journal of Intellectual Disability Research,* 52, 942-949. doi: 10.1111/j.1365-2788.2008.01053.x   + - Dagnan et al. (2008) adapted the HADS by simplifying the language for those items where there was consensus that the original wording might be too complex, and standardising the response formats. For more information, please contact the first author of this paper. |
| **Applications** | Baseline, intermediate, outcome |

# I

## ILS: Independent Living Scales

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Loeb, P. A. (1996). *ILS: Independent living scales manual*. San Antonio, TX: The Psychological Corporation. |
| **Categorisation** | ADAPTIVE BEHAVIOUR |
| **Purpose** | To assess competence in undertaking daily living activities independently |
| **Description** | 68-item observational measure of functional competence. It uses a combination of verbal questions with the ability to use a pictorial representation of a ratings scale for providing answers. It assesses the following domain of daily living activities:   * Memory/orientation; * Managing money; * Managing home and transportation; * Health and safety; and * Social adjustment.   Problem-solving ability and performance/information ability are also measured in some of the items. |
| **Participant group** | Adults (17 years and older) with cognitive impairment including intellectual disability, acquired brain injury or dementia |
| **Access** | <https://www.pearsonclinical.com.au/products/view/136> |
| **Administration qualification** | B Level - Allied Health or Special Education Professional. |
| **Cost (2019)** | Complete Kit – 857 AUD |
| **Administration time** | 45 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

## I-CAN: Instrument for Classification and Support Needs

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Riches, V. C., Parmenter, T. R., Llewellyn, G., Hindmarsh, G., & Chan, J. (2009). I-CAN: A new instrument to classify support needs for people with disability: Part I. *Journal of Applied Research in Intellectual Disabilities, 22*, 326-339. doi: 10.1111/j.1468-3148.2008.00466.x |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess the support needs of people with a disability, and planning and resource allocation to guide service delivery |
| **Description** | A web-based semi-structured interview including self-report and informant-report items that determines:   * Information about the person, their dreams and aspirations, their current life situation and their support needs; * The person’s health and wellbeing - Physical health, mental and emotional health, behaviour of concern, health and supports services; * The person’s activities and level of participation - Applying general knowledge/tasks/ demands, communication, self-care and domestic life, mobility, interpersonal interactions and relationships, life-long learning, community/social/civic life; and * The person’s goals.   The I-CAN has three purposes:   * Used by support services to ensure quality services, integrated with health care plans and individual or person-centred plans. * Used by families when applying to the NDIS for funding, and to coordinate and liaise with support and health professionals. * Used by government bodies to allocate resources and predict service costs. |
| **Participant group** | Adolescents and adults (16 years and over) with a disability including intellectual disability, acquired disability or a mental health condition. |
| **Access** | <http://www.i-can.org.au/> |
| **Administration qualification** | Administrators must have passed the I-CAN facilitator training workshop, submitted a report for feedback, and have a current license to administer the I-CAN. |
| **Cost (2019)** | * Annual Facilitator Certification - 140 AUD * Two-day training- 440 AUD (includes one year facilitator certification). * Annual License: contact the organisation for up to date information (see website: <http://www.i-can.org.au/>) |
| **Administration time** | 100 minutes on average (ranging from 30-300 minutes) |
| **Psychometric properties** | For evidence of internal consistency, inter-rater and test-retest reliability, and construct and concurrent validity, see:   * The original reference * Riches, V. C., Parmenter, T. R., Llewellyn, G., Hindmarsh, G., & Chan, J. (2009b). The reliability, validity and practical utility of measuring supports using the I-CAN Instrument: Part II. *Journal of Applied Research in Intellectual Disabilities, 22*, 340-353. doi: 10.1111/j.1468-3148.2008.00467.x * Arnold, S. R. C., Riches, V. C., & Stancliffe, R. J. (2014). I-CAN: The classification and prediction of support needs. *Journal of Applied Research in Intellectual Disabilities, 27*, 97–111. doi: 10.1111/jar.12055 |
| **Applications** | Baseline, intermediate, outcome |

## ICAP: Inventory for Client and Agency Planning

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Bruininks, R. H., Hill, B. K., Weatherman, R. F., & Woodcock, R. (1986). *Inventory for participant and agency*. Itasca, IL: Riverside Publishing. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To measure adaptive and maladaptive behaviours, and to compile demographic information, diagnoses, and other information relevant to determining a person’s service needs |
| **Description** | 185-item respondent-informed assessment tool that assesses:   * Adaptive Behaviours:   + Motor Skills;   + Social and Communication Skills;   + Personal Living Skills; and   + Community Living Skills * Maladaptive Behaviours:   + Hurtful to Self;   + Hurtful to Others;   + Destructive to Property;   + Disruptive Behaviour;   + Unusual or Repetitive Habits;   + Socially Offensive Behaviour;   + Withdrawal or Inattentive Behaviour; and   + Uncooperative Behaviour.   The ICAP provides an overall independence score that combines adaptive and maladaptive behaviour, recognising that limitations can be the result of lower adaptive behaviour and higher maladaptive behaviour.  It also uniquely provides a Service Level Index score that allocates the participant within one of nine overall levels of intensity of supervision and/or training required. |
| **Participant group** | Children, adolescents and adults with intellectual disability |
| **Access** | <https://shop.acer.edu.au/inventory-for-client-and-agency-planning-icap> |
| **Administration qualification** | Can be completed by a parent, teacher, or paid carer who is well acquainted with the person (i.e., has interacted with them for at least three months) |
| **Cost (2019)** | Complete Kit - 575 AUD |
| **Administration time** | 20 - 30 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

# K

## KINDL

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Ravens-Sieberer, U. & Bullinger, M. (1998). Assessing health related quality of life in chronically ill children with the German KINDL: First psychometric and content-analytical results. *Quality of Life Research, 4,* 399-407. doi: 10.1023/A:1008853819715 |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess health-related quality of life in children and adolescents with illnesses |
| **Description** | 24-item self-report and informant-report (parent) assessment tool that measures quality of life across the following domains:   * Physical; * Emotional; * Self-Esteem; * Family; * Friends; and, * School.   Tools are divided between three age groups for self-report:   * 4 - 6 years - 12 items; * 7 - 13 years - 24 items; and, * 14 - 17 years - 24 items.   Tools are divided between two age groups for parent report:   * 3 - 6 year - 24 items, and, * 7 – 17 years - 24 items. |
| **Description (cont.)** | Disease-specific modules are also available:   * Adiposity (obesity); * Asthma bronchiale; * Diabetes; * Epilepsy; * Neurodermatitis; * Oncology; and, * Spina bifida. |
| **Participant group** | Children and adolescents (aged between 3 - 17 years) |
| **Access** | <https://www.kindl.org/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free. |
| **Administration time** | 5 - 15 minutes |
| **Psychometric properties** | Test manual contains psychometric information, and is available to download from the website (<https://www.kindl.org/>) |
| **Applications** | Baseline, intermediate |

# L

## LSS-1: Life Satisfaction Scale-1

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Bergström, H., Hochwälder, J., Kottorp, A., & Elinder, L. S. (2013). Psychometric evaluation of a scale to assess satisfaction with life among people with intellectual disabilities living in community residences. *Journal of Intellectual Disability Research, 57*, 250-256. doi: 10.1111/j.1365-2788.2011.01531.x |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess satisfaction with one’s home environment and their leisure time |
| **Description** | 12-item self-report measure that assesses:   * Satisfaction with housing environment; * Satisfaction with life; * Satisfaction with meals; and * Satisfaction with recreational activity. |
| **Participant group** | Adults with mild and moderate intellectual disability |
| **Access** | Author to be directly contacted for access to the assessment tool |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and construct validity |
| **Applications** | Baseline, intermediate, outcome |

## LSS-2: Lifestyle Satisfaction Scale-2

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Heal, L.W., & Chadsey-Rusch, J. (1985). The Lifestyle Satisfaction Scale (LSS): Assessing individuals’ satisfaction with residence, community setting, and associated services. *Applied Research in Mental Retardation, 6*, 475-490. doi: 10.1016/0270-3092(85)90022-0 |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To assess subjective quality of life of people with an intellectual disability |
| **Description** | 29-item self-report interview scale that assesses:   * General satisfaction with one’s community; * Friends and free time satisfaction; * Satisfaction with services; * General life satisfaction; and * Job satisfaction.   Also contains an acquiescence scale to assess and correct scores for acquiescent responding. |
| **Participant group** | Adults with intellectual disability, including mild to severe intellectual disability |
| **Access** | Contained within the Appendix of the original reference listed above |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 20 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, inter-rater and test-retest reliability, and construct validity |
| **Applications** | Baseline, intermediate, outcome |

# M

## M-ABCS: Modified Abel-Becker Cognition Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Kolton, J. C. (1993). *A modified version of the Abel-Becker Cognition Scale for use with intellectually disabled sex offenders* (Unpublished doctoral dissertation). Department of Psychology, Simon Fraser University: Burnaby, Canada. Retrieved from <https://core.ac.uk/download/pdf/56371290.pdf> |
| **Categorisation** | FORENSIC ASSESSMENT |
| **Purpose** | To assess cognitive distortions (thinking errors) supportive of offending in child sexual offenders |
| **Description** | 29-item tool self-report scale adapted from the Abel-Becker Cognition Scale (ABSC; Abel, Becker & Cunningham, 1984). |
| **Participant group** | Adults with intellectual disability who have committed sexual offences |
| **Access** | Contained within Appendix 2 of the original reference listed above |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, test-retest reliability, and concurrent validity. It was concluded that the M-ABCS has psychometrics comparable to the original ABCS measure. |
| **Applications** | Baseline, intermediate |

## MASS: Mood and Anxiety Semi-Structured Interview

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Charlot, L., Deutsch, C., Hunt, A., Fletcher, K., & McLlvane, W. (2007). Validation of the mood and anxiety semi-structured (MASS) interview for patients with intellectual disabilities. *Journal of Intellectual Disability Research, 51*, 821–834. doi: 10.1111/j.1365-2788.2007.00972.x |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess mood and anxiety symptoms in people with an intellectual disability |
| **Description** | 35-item informant based assessment tool based on DSM-IV-TR criteria for mood and anxiety disorders. It assesses the presence or absence of symptoms in the last month (based on a set of behavioural descriptions). |
| **Participant group** | Adults with intellectual disability |
| **Access** | Contained within Table 1 of the original reference listed above |
| **Administration qualification** | The interview can be conducted by mental health clinicians with experience with people with intellectual disability |
| **Cost (2019)** | Free |
| **Administration time** | 30 - 60 minutes |
| **Psychometric properties** | Original reference contains evidence of sensitivity and specificity, and concurrent validity. |
| **Applications** | Baseline, intermediate, outcome |

## MIPQ: Mood, Interest and Pleasure Questionnaire

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Ross E., & Oliver C. (2003). Preliminary analysis of the psychometric properties of the Mood, Interest and Pleasure Questionnaire (MIPQ) for adults with severe and profound learning disabilities. *The British Journal of Clinical Psychology, 42*, 81–93. doi: 10.1348/014466503762842039 |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To detect symptoms of depression in participants with intellectual disability |
| **Description** | 25-item informant-report measure based on DSM-IV criteria for depressive disorders. Assesses symptoms across two domains:   * Mood; and * Interest and Pleasure. |
| **Participant group** | Adults with severe or profound intellectual disability who are non-verbal |
| **Access** | Contained within the Appendix of the original reference listed above |
| **Administration qualification** | Mental health professionals |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency, inter-rater and test-retest reliability, and concurrent validity |
| **Applications** | Baseline, intermediate, outcome |

## MPAS: Moss Psychiatric Assessment Schedules

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Moss, S. (2016). *Moss psychiatric assessment schedules.* East Sussex, United Kingdom: Pavilion Publishing and Media. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To provide a suite of assessment tools for mental health problems in people with intellectual disability and the general population |
| **Description** | Formally known as the *Psychiatric Assessment Schedule for Adults with Developmental Disabilities (PAS-ADD)*  Moss Psychiatric Assessment Schedules [MPAS-Diag (ID)]  A self-report or informant-based semi-structured interview written in everyday language to determine mental health diagnoses in line with the DSM 5 and ICD-11. Items consider:   * Appetite and sleep; * Tension and worry; * Phobias and panic; * Depression and hypomania; * Obsessions and compulsions; * Psychoses; and * Autism spectrum disorder.   Moss Psychiatric Assessment Schedules-Check (MPAS-Check)  25-item informant-based, broad screening instrument based on the most predictive items of the MPAS-Diag (ID).  Moss Psychiatric Assessment Schedules (MPAS-ID)  A variant of the comprehensive MPAS-Diag (ID), the MPAS-ID is an informant-based semi-structured clinical interview that aims to collect information to assist in the determination of mental health diagnoses in line with the DSM 5 and ICD-11. |
| **Participant group** | Adults with an intellectual disability |
| **Access** | Moss Psychiatric Assessment Schedules [MPAS-Diag (ID)]  <https://www.pavpub.com/mental-health/assessment/mpas-diag-id>  Moss Psychiatric Assessment Schedules-Check (MPAS-Check)  <https://www.pavpub.com/mental-health/assessment/mpas-check>  Moss Psychiatric Assessment Schedules (MPAS-ID)  <https://www.pavpub.com/mental-health/assessment/mpas-id> |
| **Administration qualification** | Moss Psychiatric Assessment Schedules [MPAS-Diag (ID)]   * Clinicians with a background in psychopathology and expertise in interviewing people with intellectual disability or trained mental health professionals   Moss Psychiatric Assessment Schedules-Check (MPAS-Check)   * Care staff and families   Moss Psychiatric Assessment Schedules (MPAS-ID)   * Suitable for use by all professionals involved in mental health assessments for people with an intellectual disability * Professional training required - Essential that users have guided practice in using the assessment to ensure reliable and valid results |
| **Cost (2019)** | Moss Psychiatric Assessment Schedules [MPAS-Diag (ID)]   * Manual - 225 GBP (420 AUD) * Forms - 70 GBP (131 AUD)   Moss Psychiatric Assessment Schedules-Check (MPAS-Check)   * Complete Kit - 60 GBP (112 AUD)   Moss Psychiatric Assessment Schedules (MPAS-ID)   * Manual - 180 GBP (336 AUD) * Forms - 60 GBP (112 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | Moss Psychiatric Assessment Schedules [MPAS-Diag (ID)]  For evidence of inter-rater reliability, see:   * Costello, H., **Moss,** S., Prosser, H., & Hatton, C. (1997). Reliability of the ICD 10 version of the Psychiatric Assessment Schedule for adults with developmental disability. *Social Psychiatry and Psychiatric Epidemiology*, *32*, 339-343. doi: 10.1007/BF00805439   Moss Psychiatric Assessment Schedules-Check (MPAS-Check)  For evidence of internal consistency and inter-rater reliability, and concurrent and construct validity, see:   * Moss, S., Prosser, H., Simpson, N., Patel, P. Rose, S., Turner, A., & Hatton, C. (1998). Reliability and validity of the PAS-ADD Checklist for detecting psychiatric disorders in adults with intellectual disability. *Journal of Intellectual Disability Research, 42*, 173-183. doi: 10.1046/j.1365-2788.1998.00116.x   Moss Psychiatric Assessment Schedules (MPAS-ID)  For evidence of internal consistency and inter-rater reliability, and concurrent validity, see:   * Prosser, H., Moss, S., Costello, H., Simpson, N., Patel, P., & Rowe, S. (1998). Reliability and validity of the Mini PAS-ADD for assessing psychiatric disorders in adults with intellectual disability. *Journal of Intellectual Disability Research, 42*, 264-272. doi: 10.1046/j.1365-2788.1998.00146.x |
| **Applications** | Baseline, intermediate, outcome |

## MAS: Motivation Assessment Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Durand, V. M., & Crimmins, D. B. (1992). *The motivation assessment scale administration guide*. Topeka, KS: Monaco & Associates. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess the functions of behaviours of concern |
| **Description** | 16-item informant-based scale (that can be administered as an interview) that assesses for the functions of behaviour across four domains:   * Sensory; * Escape; * Attention; and * Tangible. |
| **Participant group** | For children, adolescents and adults with developmental disabilities |
| **Access** | <http://store.monacoassociates.com/motivationassessmentscale-25formsenglish.aspx> |
| **Administration qualification** | Speech pathologists, psychologists or other allied health professionals |
| **Cost (2019)** | Complete Kit - 79 USD (113 AUD) |
| **Administration time** | 10 - 15 minutes |
| **Psychometric properties** | For independent evidence of internal consistency and inter-rater reliability, and construct validity, see:   * Koritsas, S., & Iacono, T. (2013). Psychometric comparison of the Motivation Assessment Scale (MAS) and the Questions About Behavioural Function (QABF). *Journal of Intellectual Disability Research, 57,* 747-757. doi: 10.1111/jir.12022 * Virues-Ortega, J., Segui-Duran, D., Descazo-Quero, A., Carnerero, J. J., & Martin, N. (2011). Caregivers’ agreement and validity of indirect functional analysis: A cross cultural evaluation across multiple problem behaviour topographies. *Journal of Autism and Developmental Disorders, 41,* 82-91. doi: 10.1007/s10803-010-1022-y |
| **Applications** | Baseline |

# N

## NRDLS- 4: New Reynell Developmental Language Scales

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Edwards, S., Letts, C., & Sinka, I. (2011). *New reynell developmental language scales.* Brentford, United Kingdom: GL Assessment. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | Assesses speech and language delays and impairments in the general population |
| **Description** | 136-item pen/paper test constructed to reflect knowledge of language impairment, and structural and lexical development in children’s language. Contains two scales:   * Comprehension Scale - Vocabulary items and grammar; and, * Production Scale - Use of spoken language   Offers a mix of play-based activities with a range of stimulus material, including a trio of characters that children can handle and ‘direct’ as they carry out many of the assessment tasks.  Also provided guidance for children from different linguistic and cultural context. |
| **Participant group** | Children (2 - 7 years) |
| **Access** | <https://shop.acer.edu.au/the-new-reynell-developmental-language-scales> |
| **Administration qualification** | Specialist speech therapist |
| **Cost (2019)** | 1,275 AUD |
| **Administration time** | 35 - 60 minutes |
| **Psychometric properties** | For information on how the test was developed, see:   * Letts, C., Edwards, S., Schaefer, B., & Sinka, I. (2014). The New Rynell Developmental Language Scales: Descriptive account and illustrative case study. *Child Language Teaching and Therapy, 30*, 103-116. doi: 10.1177%2F0265659013492784   No psychometric information available. |
| **Applications** | Baseline, intermediate |

## NCBRF: Nisonger Child Behaviour Rating Form

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Aman, M. G., Tassé, M. J., Rojahn, J. & Hammer D. (1996). The Nisonger CBRF: A child behaviour rating form for children with developmental disabilities. *Research in Developmental Disabilities 17*, 41-57. doi: 10.1016/0891-4222(95)00039-9 |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess a broad range of psychopathological and behaviour problems in children and adolescents with an intellectual disability |
| **Description** | An informant-based rating scale measuring psychopathological and behaviour problems across two domains:   * Social Competence - Compliance and social adaptive behaviour; and * Problem Behaviour - Conduct problem, insecure/anxious, hyperactive, self-injury, stereotypic, self-isolated/ritualistic and overly sensitive.   Teacher and parent versions are available. |
| **Participant group** | Children and adolescents with intellectual disability |
| **Access** | <https://psychmed.osu.edu/index.php/instrument-resources/ncbrf/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of internal consistency and inter-rater reliability, and construct and concurrent validity |
| **Applications** | Baseline, intermediate, outcome |

# O

## O&IS-R: Outcomes and Impact Scale-Revised

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Wilson, E., Hagiliassis, N., Koritsas, S. & Caldwell, M. (2014). The outcomes and impact scale-Revised. Melbourne, Australia: Scope. |
| **Categorisation** | BSP QUALITY |
| **Purpose** | To assess outcomes for service providers |
| **Description** | A self-report survey available in standard and easy English that measures the impact that a service has had on a participant’s life. Takes a whole-of-life approach as assesses outcomes across nine domains:   * Personal wellbeing; * Social; * Political; * Cultural; * Recreation and leisure; * Economic; * Educational; and, * Spiritual. |
| **Participant group** | Adults with a range of disabilities, including intellectual disability |
| **Access** | <https://socialsuitehq.com/product/measuring-impact-service-outcomes-miso-framework-disability-organisations/> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Unknown – contact Social Suite via their website (<https://socialsuitehq.com/product/measuring-impact-service-outcomes-miso-framework-disability-organisations/>) |
| **Administration time** | 5 - 10 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and face, content and construct validity |
| **Applications** | Outcome |

## OBS: Overt Behaviour Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Kelly, G., Todd, J., Simpson, G., Kremer, P., & Martin, C. (2006). The Overt Behaviour Scale (OBS): A tool for measuring challenging behaviours following ABI in community settings. *Brain Injury, 20*, 307-319. doi: 10.1080/02699050500488074 |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To assess behaviours of concern in adults with acquired brain injuries |
| **Description** | 34-item direct observation rating scale or informant-based semi-structured interview that assesses the behaviours listed below according to their type, severity, frequency and impact:   * Verbal aggression; * Physical aggression against objects; * Physical acts against self; * Physical aggression against other people; * Inappropriate sexual behaviour; * Perseveration/repetitive behaviour; * Wandering/absconding; * Inappropriate social behaviour; and * Lack of initiation. |
| **Participant group** | Adults with acquired brain injury |
| **Access** | <http://www.tbims.org/combi/obs> |
| **Administration qualification** | Clinician or an allied health practitioner |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence test-retest and inter-rater reliability, and concurrent and construct validity |
| **Applications** | Baseline, intermediate, outcome |

# P

## PPP: Paediatric Pain Profile

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Hunt, A., Goldman, A., Seers, K., Crichton, N., Mastroyannopoulou, K., Moffat, V., ... , & Brady, M. (2004). Clinical validation of the paediatric pain profile. *Developmental Medicine and Child Neurology*, *46*, 9-18. doi: 10.1017/S0012162204000039 |
| **Categorisation** | PAIN |
| **Purpose** | To assess and monitor pain in children and adolescents with communication problems |
| **Description** | Informant-based 20-item behaviour rating scale assessing behavioural cues that indicate pain. Example items include:   * Bit self or banged head * Resisted being moved |
| **Participant group** | Children and adolescents (1-18 years) with severe neurological and cognitive impairments, particularly those with impairments that lead them to be unable to communicate pain through speech |
| **Access** | * Dedicated website for the measure: <http://www.ppprofile.org.uk/> * Also contained within Appendix I of the original reference listed above |
| **Administration qualification** | Parents, carers or clinicians |
| **Cost (2019)** | Free |
| **Administration time** | 2 - 3 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency and inter-rater reliability, sensitivity and specificity, and construct validity |
| **Applications** | Baseline, intermediate, outcome |

## PWI-ID: Personal Well-Being Index- Intellectual Disability

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Cummins, R. A., & Lau, A. L. D. (2010). *Personal wellbeing index- Intellectual disability (English) (3rd ed.).* Melbourne, Australia: Australian Centre on Quality of Life, Deakin University. |
| **Categorisation** | QUALITY OF LIFE |
| **Purpose** | To determine satisfaction with the current quality of life in participants with and intellectual or cognitive disability |
| **Description** | 7-item self-report scale measuring the following quality of life domains:   * Standard of living; * Health; * Achieving in life; * Relationships; * Safety; * Community-connectedness; and * Future security.   Incorporates a pre-testing protocol to determine whether, and to what level of complexity, respondents are able to use the scale. |
| **Participant group** | Adults with intellectual disability or cognitive disability |
| **Access** | <http://www.acqol.com.au/uploads/pwi-id/pwi-id-english.pdf> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 10 - 20 minutes |
| **Psychometric properties** | For independent evidence of internal consistency and test-retest reliability, and content, construct and concurrent validity, see:   * **Li,** C., Tsoi, E. W. S., Zhang, A. L., Chen, C., & Wang, C. K. J. (2013). Psychometric properties of self-reported quality of life measures for people with intellectual disability: A systematic review. *Journal of Developmental and Physical Disabilities, 25*, 253-270. doi: 10.1007/s10882-012-9297-x |
| **Applications** | Baseline, intermediate, outcome |

## PPEC- C: Pragmatic Profile of Everyday Communication - Child

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Dewart, H., & Summers, S. (1995). *The pragmatics profile of everyday communication skills in children.* Berkshire, United Kingdom: NFER Nelson. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess communication functions and pragmatics in children with developmental disabilities |
| **Description** | 29-item semi-structured, respondent-informed interview schedule that assess communication functions and pragmatics across the following domains:   * Communicative functions (e.g., attention directing); * Response to communication (e.g., understanding of a gesture); * Interaction and conversation (e.g., initiating interaction); and * Contextual variation (e.g., time, topic). |
| **Participant group** | Children (0 - 10 years) with developmental disabilities and severe communication impairment |
| **Access** | [http://complexneeds.org.uk/modules/Module-2.4-Assessment-monitoring-and-evaluation/All/downloads/m08p080c/ the\_pragmatics\_profile.pdf](http://complexneeds.org.uk/modules/Module-2.4-Assessment-monitoring-and-evaluation/All/downloads/m08p080c/%20the_pragmatics_profile.pdf) |
| **Administration qualification** | Speech pathologists, clinical psychologists |
| **Cost (2019)** | Free |
| **Administration time** | 30 minutes |
| **Psychometric properties** | Not relevant – the tool is used for the purposes of data gathering |
| **Applications** | Baseline, intermediate |

## PPEC-A: Pragmatic Profile of Everyday Communication - Adults

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Dewart, H., & Summers, S. (1996). *The pragmatics profile of everyday communication skills in adults*. Berkshire, United Kingdom: NFER Nelson. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess communication functions and pragmatics in adults with developmental disabilities |
| **Description** | 29-item semi-structured, respondent-informed interview schedule that assess communication functions and pragmatics across the following domains:   * Communicative functions (e.g., attention directing); * Response to communication (e.g., understanding of a gesture); * Interaction and conversation (e.g., initiating interaction); and * Contextual variation (e.g., time, topic). |
| **Participant group** | Adults with developmental disabilities and severe communication impairment |
| **Access** | <https://www.flexiblemindtherapy.com/uploads/6/5/5/2/65520823/pragmatics_profile_adults.pdf> |
| **Administration qualification** | Speech pathologists, clinical psychologists |
| **Cost (2019)** | Free |
| **Administration time** | 30 minutes |
| **Psychometric properties** | Not relevant – the tool is used for the purposes of data gathering |
| **Applications** | Baseline, intermediate |

## ProQoL: Professional Quality of Life

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Hudnall Stamm, B. (2010). *The concise ProQOL manual (2nd ed.).* Retrieved from <https://proqol.org/uploads/ProQOL_Concise_2ndEd_12-2010.pdf> |
| **Categorisation** | CARER QUALITY OF LIFE |
| **Purpose** | To assess ccompassion satisfaction and compassion fatigue in professional staff |
| **Description** | 30-item self-report measure that assesses:   * Compassion satisfaction -The pleasure derived from being able to do work well (e.g., pleasure in helping others, feeling positive about colleagues; and * Compassion fatigue - That can lead to burnout (e.g., anger, exhaustion, frustration, depression) and secondary trauma (e.g., a negative feeling driven by fear and work‐related trauma). |
| **Participant group** | Health care professionals |
| **Access** | <https://proqol.org/Home_Page.php> |
| **Administration qualification** | Can be self-administered and scored |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline |

## PIMRA: Psychopathology Instrument for Mentally Retarded Adults

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson J. (1988). *The psychopathology inventory for mentally retarded adults (PIMRA) manual.* Baton Rouge, LA: Disability Consultants, LLC. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess for dual diagnosis. |
| **Description** | 56-item, self-report and informant-based scale based on assessing psychiatric symptoms in accordance to the DSM-III for the following disorders:   * Schizophrenia; * Depression; * Psychosexual disorders; * Adjustment disorders; * Anxiety disorders; * Somatoform disorders; and * Personality disorders. |
| **Participant group** | Adults with intellectual disability, including people with mild to severe intellectual disability |
| **Access** | <http://www.disabilityconsultants.org/PIMRA.php> |
| **Administration qualification** | Mental health professionals |
| **Cost (2019)** | Complete Kit - 300 USD (420 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | For evidence of internal consistency ad test-retest reliability, and construct and concurrent validity   * Matson, J. L., Belva, B. C., Hattier, M. A., & Matson, M. L. (2012). Scaling methods to measure psychopathology in persons with intellectual disabilities. *Research in Developmental Disabilities, 33*, 549-562. doi: 10.1016/j.ridd.2011.10.023 |
| **Applications** | Baseline, intermediate |

# Q

## QABF: Questions about Behavioural Function

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson J. L., & Vollmer T. R. (1995). *Questions about behavioural function (QABF) manual*. Baton Rouge, LA: Disability Consultants, LLC. |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To guide a more comprehensive analysis of the function(s) of behaviours of concern |
| **Description** | 25-item informant-based scale that assesses possible functions of behaviour of concern, including:   * Physical discomfort; * Non-social reinforcement; * Social attention; * Escape; * Tangible reinforcement. |
| **Participant group** | Children, adolescents and adults with developmental disabilities demonstrating behaviours of concern |
| **Access** | <http://www.disabilityconsultants.org/QABF.php> |
| **Administration qualification** | Parent or carers (paid/unpaid) who knows the person with a developmental disability well |
| **Cost (2019)** | Complete Kit - 300 USD (420 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | For independent evidence of internal consistency, inter-rater and test-retest reliability, and construct and concurrent validity, see:   * Koritsas, S., & Iacono, T. (2013). Psychometric comparison of the Motivation Assessment Scale (MAS) and the Questions About Behavioural Function (QABF). *Journal of Intellectual Disability Research, 57,* 747-757. doi: 10.1111/jir.12022 * Zaja, R. H., Moore, L., van Ingen, D. J., & Rojahn, J. (2011). Psychometric comparison of the functional assessment instruments QABF, FACT and FAST for self-injurious, stereotypic and aggressive/destructive behaviour. *Journal of Applied Research in Intellectual Disabilities,* *24,* 18-28. doi: 10.1111/j.1468-3148.2010.00569.x |
| **Applications** | Baseline, intermediate, outcome |

# R

## Reiss Screen: Reiss Screen for Maladaptive Behaviour

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Havercamp S., & Reiss, S. (1997). The Reiss Screen for Maladaptive Behaviour: Confirmatory factor analysis. *Behaviour Research and Therapy, 35*, 967-971. doi: 10.1016/S0005-7967(97)00043-0 |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To screen for mental health problems in people with an intellectual disability |
| **Description** | 38-item informant-based scale to identify people who are expected to need a mental health services. Symptoms of psychiatric disorder screened in three ways:   * Severity of behaviours of concern; * Diagnosis; and * Rare but significant symptoms such as suicidal behaviour. |
| **Participant group** | Adolescents and adults (16 years and older) with an intellectual disability and suspected mental health problems |
| **Access** | <http://www.idspublishing.com/screen/> |
| **Administration qualification** | Caretakers, teachers, work, supervisors, or parents |
| **Cost (2019)** | Internet Version   * Complete Kit- 170 USD (242 AUD)   Paper & Pencil Version   * Complete Kit- 190 USD (271 AUD) |
| **Administration time** | 10 minutes |
| **Psychometric properties** | Original reference contains evidence of construct validity.  For independent evidence of internal consistency and inter-rater reliability, and sensitivity and specificity, see:   * Hermans, H., & Evenhuis, H. M. (2010). Characteristics of instruments screening for depression in adults with intellectual disabilities: Systematic review. *Research in Developmental Disabilities, 31,* 1109-1120. doi: 10.1016/j.ridd.2010.04.023 |
| **Applications** | Baseline, intermediate |

## RBS-R: Repetitive Behaviour Scale-Revised

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Bodfish, J.W., Symons, F.J., Parker, D.E., & Lewis, M.H. (2000). Varieties of repetitive behaviour in autism: Comparisons to mental retardation. *Journal of Autism and Developmental Disorders, 30*, 237-243. doi: 10.1023/A:1005596502855 |
| **Categorisation** | BEHAVIOURS OF CONCERN  AUTISM SPECTRUM DISORDER |
| **Purpose** | To assess compulsive and repetitive behaviour in people with autism spectrum disorder |
| **Description** | 43-item informant-based behaviour rating scale that measures the severity of the following behaviours:   * Stereotyped behaviour; * Self-injurious behaviour; * Compulsive behaviour; * Ritualistic behaviour; * Sameness behaviour; and * Restricted behaviour. |
| **Participant group** | Children, adolescents and adults with autism spectrum disorder |
| **Access** | Author to be directly contacted for access to the assessment tool |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | For independent evidence of internal consistency and inter-rater reliability, and construct validity, see:   * Lam, K. S. L., & Aman, M. G. (2007). The Repetitive Behaviour Scale-Revised: Independent validation in individuals with autism spectrum disorders. *Journal of Autism and Developmental Disorders, 37*, 855-866. doi: 10.1007/s10803-006-0213-z |
| **Applications** | Baseline, intermediate |

## RASSOR: Rapid Risk Assessment for Sex Offence Recidivism

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Hanson, R. K. (1997). *The development of a brief actuarial risk scale for sexual offense recidivism (User Report 1997-04)*. Ottawa, Canada: Department of the Solicitor General of Canada. Retrieved from [https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/dvlpmnt-brf-ctrl/index-en.aspx - Res](https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/dvlpmnt-brf-ctrl/index-en.aspx#Res) |
| **Categorisation** | FORENSIC ASSESSMENT |
| **Purpose** | To assess risk of re-offending in sexual offenders from the general population |
| **Description** | 4-item, actuarial (statistical) tool that predicts risk of offending based on the following characteristics:   * Prior sex offences; * Sex of victim; * Relationship to victim; and * Age at time of offence. |
| **Participant group** | Can be used with adult sexual offenders with intellectual disability |
| **Access** | Contained within Table 4 of the original reference listed above |
| **Administration qualification** | Not specified, but assessors should understand theory behind risk assessments |
| **Cost (2019)** | Free |
| **Administration time** | 10 minutes |
| **Psychometric properties** | For independent evidence of concurrent validity and predictive validity, see:   * Tough, S. (2001). *Validation of two standard risk assessments (RRASOR, 1997; STATIC-99, 1999) on a sample of adult males who are intellectually disabled with significant cognitive deficits* (unpublished Master’s dissertation). Department of Human Development and Applied Psychology, University of Toronto: Toronto, Canada. Retrieved from <https://tspace.library.utoronto.ca/handle/1807/15561> |
| **Applications** | Baseline |

# S

## SIB-R: Scales of Independent Behaviour- Revised

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Bruininks, R., Woodcock, R., Weatherman, R., & Hill, B. (1997). *Scales of independent behaviour-revised.* Rolling Meadows, IL: Riverside Publishing. |
| **Categorisation** | ADAPTIVE BEHAVIOURS  BEHAVIOURS OF CONCERN |
| **Purpose** | To assess a person’s adaptive and problem behaviours across school, home, employment and within the community |
| **Description** | 283-item informant-based, norm-referenced assessment tool of adaptive and maladaptive behaviours across the following domains:   * Adaptive behaviour domains:   + Motor Skills;   + Independent Living Skills;   + Social Interaction and Communication Skills; and   + Community Living Skills. * Problem behaviour domains:   + Hurtful to Self;   + Unusual or Repetitive Habits;   + Hurtful to Others;   + Socially Offensive Behaviour;   + Destructive to Property;   + Withdrawal or Inattentive Behaviour;   + Disruptive Behaviour; and   + Uncooperative Behaviour. |
| **Description (cont.)** | Provides:   * An *adaptive behaviour* score (the extent to which the person performs a task completely and independently); * A *problem behaviour* score (the extent to which the person exhibits problem behaviours) * A *support scale* score – based on the adaptive and problem behaviour scores, and approximates the level of support that the person may need in order to be independent in a number of areas.   Three versions are available:   * Full scale - Comprehensive; * Short Form - Brief screening tool; and   Early Development Form- Brief version for young children or people with a developmental level below 8 years of age. |
| **Participant group** | Infants to adults (3 months - 80 years) |
| **Access** | <https://shop.acer.edu.au/scales-of-independent-behavior-revised-sib-r> |
| **Administration qualification** | Master’s degree in psychology, or a Bachelor degree in psychology plus evidence of training in assessment |
| **Cost (2019)** | Complete Kit - 705 AUD |
| **Administration time** | * Full Scale: 45 - 60 minutes * Short Form/Early Development Form: 15 - 20 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

## SBS: Sensory Behaviour Schedule

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Harrison, J., & Hare, D. J. (2004). Brief report: Assessment of sensory abnormalities in people with autistic spectrum disorders. *Journal of Autism and Developmental Disorders, 34,* 727-730. doi: 10.1007/s10803-004-5293-z |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To provide routine screening and assessment of sensory abnormalities in adults with autism spectrum disorder |
| **Description** | 17-item, informant-based scale that assesses sensory abnormalities across the following domains:   * Visual; * Auditory; * Olfactory; * Taste; * Tactile; * Kinaesethic; * Proprioception; * Vestibulary; * Temperature; and * Sensory preferences. |
| **Participant group** | Adults with autism spectrum disorder |
| **Access** | Contained within Appendix I of the original reference listed above |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Free |
| **Administration time** | 1 - 2 minutes |
| **Psychometric properties** | Original reference contains evidence of inter-rater reliability to support the development of the SBS |
| **Applications** | Baseline, intermediate, outcome |

## SNI: Social Networks Inventory

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Blackstone, S. & Berg, M. H. (2012). *Social networks: A communication inventory for individuals with complex communication challenges and their communication partners.* Monterey, CA: Augmentative Communication Inc. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess communication between people and their significant others, for the purposes of intervention planning |
| **Description** | Self-report and respondent-informant structured interview that summarises a person’s use of communication modalities and their effectiveness and efficiency within five circles of communication partners |
| **Participant group** | Children and adults with developmental or acquired disabilities and complex communication needs, |
| **Access** | <https://www.attainmentcompany.com/social-networks-package> |
| **Administration qualification** | Professionals |
| **Cost (2019)** | Complete Kit - 89 USD (127 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | Not relevant – the forms contained in SNI are used for the purposes of data gathering |
| **Applications** | Baseline, intermediate, outcome |

## SPSS: Social Performance Survey Schedule

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Matson, J. L. (1983). *Social performance survey schedule (SPSS) test manual*. Baton Rouge, LA: Disability Consultants, LLC. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess a person’s social skills |
| **Description** | 57-item informant-based behaviour rating scale that assesses social skills across the following domains:   * Socially desirable - Appropriate social skills and communication skills; and * Socially undesirable - Inappropriate assertion; and sociopathic behaviour. |
| **Participant group** | Adults with mild and moderate intellectual disability |
| **Access** | <http://www.disabilityconsultants.org/SPSS.php> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Complete Kit - 300 USD (420 AUD) |
| **Administration time** | Not specified |
| **Psychometric properties** | For independent evidence of internal consistency reliability, concurrent and construct validity, see:   * Long, E., McDonald, S., Tate, R., Togher, L., Bornhifen, C. (2008). Assessing social skills in people with very severe traumatic brain injury: Validity of the Social Performance Survey Schedule (SPSS). *Brain Impairment, 9*, 274-281. doi: 10.1375/brim.9.3.274 * Matson, J. L., Helsel, W. J., Bellack, A. S., & Senatore, V. (1983). Development of a rating scale to assess social skill deficits in mentally retarded adults. *Applied Research in Mental Retardation, 4*, 399-407. doi: 10.1016/0270-3092(83)90038-3 * Rojahn, J., Rowe, E. W., Kasdan, S., Moore, L., & van Ingen, D.J. (2011). Psychometric properties of the Aberrant Behaviour Checklist, the Anxiety, Depression and Mood Scale, the Assessment of Dual Diagnosis, and the Social Performance Survey Schedule in adults with intellectual disabilities. *Research in Developmental Disabilities, 32*, 2309-2320. doi: 10.1016/j.ridd.2011.07.035 |
| **Applications** | Baseline, intermediate, outcome |

## SSKAT-R: Socio-Sexual Knowledge and Attitudes Test- Revised

| **Details of tool** | **Summary of Information** |
| --- | --- |
| ***Reference*** | Griffiths, D., & Lunsky, Y. (2003). *Socio-sexual knowledge and attitudes test-revised.* Wood Dale, IL: Stoelting Co. |
| **Categorisation** | SEXUAL KNOWLEDGE  FORENSIC ASSESSMENT |
| **Purpose** | To measure sexual knowledge and attitudes in the general population, with emphasis on the setting of appropriate boundaries and behaviours. |
| **Description** | A criterion-based assessment of what the people know and believe about sexual intercourse. Topics covered by the assessment include:   * **Anatomy -** Male and female; * **Women's Bodies -** Menstruation, menopause, cancer, etc.; * **Men's Bodies -** Privacy, masturbation, cancer, etc.; * **Intimacy -** Dating, marriage, physical contact; * **Pregnancy, Childbirth & Childrearing -** conception, baby care and adoption; * **Birth Control and Sexually Transmitted Diseases (STDs) -** Methods and use of birth control, prevention/symptoms of STDs; and, * **Healthy Boundaries -** Appropriate and inappropriate touching and behaviours. |
| **Participant group** | Adolescents to adults (15 - 80 years) with sexuality concerns, including people with developmental delay and limited language |
| **Access** | <https://www.stoeltingco.com/socio-sexual-knowledge-and-attitudes-test-revised-sskaat-r.html> |
| **Administration qualification** | Educators, counsellors and social workers |
| **Cost (2019)** | **Complete Kit - 350 USD** (500 AUD) |
| **Administration time** | Untimed, open-ended |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate |

## Static-99

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Phenix, A., Fernandez, Y., Harris, A. J. R., Helmus, M., Hanson, R.K., Thornton, D. (2016). *Static-99R coding rules revised.* Retrieved from <http://static99.org/pdfdocs/Coding_manual_2016_InPRESS.pdf> |
| **Categorisation** | FORENSIC ASSESSMENT |
| **Purpose** | To assess the risk of re-offending in general population sexual offenders |
| **Description** | 10-item actuarial (statistical) tool that produces an estimate of future of re-offending. Due to the historical nature of information considered, a file search only occurs in order to complete the Static-99. Takes into consideration:   * Age of offender; * Living with an intimate partner; * Non-sexual conviction history; * Prior non-sexual violence; * Prior sex offences; * Prior sentencing; * Non-contact sexual convictions; and, * Victim characteristics. |
| **Participant group** | Adult sexual offenders, including people with mild intellectual disability |
| **Access** | <http://www.static99.org/> |
| **Administration qualification** | * An advanced degree in the behavioural or medical sciences; * Registration with a professional body; * Experience with forensic or other relevant populations; and, * Adequate training and experience in using the tool. |
| **Cost (2019)** | Free |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of inter-rater reliability.  For independent evidence of inter-rater reliability and predictive validity, see:   * Lindsay, W. R., Hogue, T. E., Taylor, J. L., Steptoe, L., Mooney, P., O’Brien, G., … , & Smith, A. H. W. (2008). Risk assessment in offenders with intellectual disability: A comparison across three levels of security. *International Journal of Offender Therapy and Comparative Criminology, 52,* 90-111. doi: 10.1177%2F0306624X07308111 |
| **Applications** | Baseline |

## SDQ: Strengths and Difficulties Questionnaire

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A research note. *Journal of Child Psychology and Psychiatry, 38*, 581-586. doi: 10.1111/j.1469-7610.1997.tb01545.x |
| **Categorisation** | BEHAVIOURS OF CONCERN |
| **Purpose** | To screen for behaviours of concern in the general and disability populations |
| **Description** | 25-item informant-based rating scale that assesses behaviours across the following domains:   * Emotional symptoms; * Conduct problems; * Hyperactivity/inattention; * Peer relationship problems; and * Prosocial behaviour.   Includes an impact supplement to enquire about behaviour chronicity, distress, social impairment and burden to others.  Available to download in multiple languages. |
| **Participant group** | For children and adolescents (3 - 16 years) with and without disabilities |
| **Access** | <https://sdqinfo.org/> |
| **Administration qualification** | Not specified, to be completed by a parent or teacher |
| **Cost (2019)** | * Online Scoring Tool (recommended) - 0.25 USD (0.36 AUD) per informant, and 0.25 USD (0.36 AUD) for a scoring report * Hand Scoring Tools are also available free of charge |
| **Administration time** | Not specified |
| **Psychometric properties** | Original reference contains evidence of inter-rater reliability, specificity and sensitivity, and concurrent validity.  **For independent evidence of concurrent validity, see:**   * Rice, L. J., Emerson, E., Gray, K. M., Howlin, P., Tonge, B. J., Warner, G. L., & Einfeld, S. L. (2018). Concurrence if the strengths and difficulties questionnaire and developmental behaviour checklist among children with intellectual disability. *Journal of Intellectual Disability Research, 62*, 150-155. doi: 10.1111/jir.12426 |
| **Applications** | Baseline, intermediate, outcome |

## SSS: Stress Survey Schedule

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Groden, J., Diller, A., Bausman, M., Velicer, W., Norman, G., & Cautela, J. (2001). The development of a Stress Survey Schedule for persons with autism and other developmental disabilities. *Journal of Autism and Developmental Disorders, 31*, 207-217. doi: 10.1023/A:1010755300436 |
| **Categorisation** | BEHAVOIURS OF CONCERN |
| **Purpose** | To assess environmental stressors experienced by people with autism spectrum disorder or other developmental disabilities |
| **Description** | 62-item informant-based rating scale that assessed the following dimensions of stress:   * Changes/threats; * Anticipation/uncertainty; * Unpleasant events; * Pleasant events; * Sensory/personal contact; * Food-related activity; * Social/environmental interactions; and * Ritual-related stress. |
| **Participant group** | Children, adolescents and adults with autism spectrum disorder and pervasive developmental disabilities. |
| **Access** | [https://www.kmsd.edu/cms/lib/WI01919005/Centricity/Domain/ 257/Groden Stress Survey.pdf](https://www.kmsd.edu/cms/lib/WI01919005/Centricity/Domain/%20257/Groden%20Stress%20Survey.pdf) |
| **Administration qualification** | None specified |
| **Cost (2019)** | Free |
| **Administration time** | 5 - 10 minutes |
| **Psychometric properties** | Original reference contains evidence of internal consistency reliability, and construct validity.  For independent evidence of internal consistency reliability, and construct validity, see:   * Goodwin, S., Groden, J., Velicer, W. F., & Diller, A. (2007). Brief report: Validating the Stress Survey Schedule for persons with autism and developmental disabilities. *Focus in Autism and Other Developmental Disabilities, 22*, 183-189. doi: 10.1177%2F10883576070220030501 |
| **Applications** | Baseline, intermediate, outcome |

## SIS: Supports Intensity Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Thompson, J. R., Bryant, B. R., Schalock, R. L., Shogren, K. A., Tassé, M. J., Wehmeyer, M., … , Rotholz, D. A. (2004). *Supports intensity scale.* Washington, DC: American Association on Intellectual and Developmental Disability. |
| **Categorisation** | BSP QUALITY |
| **Purpose** | To guide the development of person-centered plans, by measuring a person’s level of support need |
| **Description** | Informant-based support needs assessment scale that measures the frequency, intensity and type of support that a person needs to function on an everyday basis in the community. Contains three sections:   * Section 1: Support Needs   + Life activities are rated in the areas of home living, community living, lifelong learning, employment, health and safety, social activities. * Section 2: Supplemental Protection and Advocacy Scale   + Includes items related to advocating for self, managing money and personal finances, protection from exploitation, exercising legal responsibilities, belonging to and participating in support organisations, obtaining legal services, making choices and decisions, and advocating for others. * Section 3: Medical and Behavioural Support Needs   + Medical Support Needs - Respiratory care, feeding assistance, skin care and other exceptional medical care; and,   + Behavioural Support Needs - Self-directed destructiveness, externally directed destructiveness, and sexual and other behaviours.   Adult (SIS-A) and Child (SIS-C) versions available.  Has been translated into 13 languages. |
| **Participant group** | SIS-A: Adolescents and adults (16 years and older).  SIS-C: Children aged 5 to 16 years |
| **Access** | <http://aaidd.org/sis> |
| **Administration qualification** | Professional in the human services field with a 4-year degree qualification |
| **Cost (2019)** | Costs unavailable: International orders can only be processed by contacting  [[ajith@aaidd.org](mailto:ajith@aaidd.org)](mailto:ajith@aaidd.org) |
| **Administration time** | Not specified |
| **Psychometric properties** | Test manual contains psychometric information.  For evidence of construct validity, and concurrent validity between the two versions of the SIS, see:   * Seo, H., Wehmeyer, M. L., & Shogren, K. A. (2017). Examining underlying relationships between the Supports Intensity Scale-Adult version and the Supports Intensity Scale-Children’s version. *Assessment for Effective Intervention, 42*, 237–247. doi: 10.1177%2F1534508417705084 |
| **Applications** | Baseline, intermediate, outcome |

# T

## TACL-4: Test of Auditory Comprehension of Language

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Carrow-Woolfolk, E. (2014). *Test for auditory comprehension of language (4th ed.).* Nerang, Australia: Pro-Ed Australia. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess receptive language in children - relational words, grammatical and syntactic structures |
| **Description** | Direct testing of the child’s understanding of the following three language forms:   * **Vocabulary - The** meanings of nouns, verbs, adjectives, and adverbs, and of words that represent basic percepts and concepts; * **Grammatical Morphemes -** The meaning of function words and inflections; and, * **Elaborated Phrases/Sentences - T**he meaning of syntactically based word relations and elaborated phrase and sentence constructions, including the modalities of single and combined constructions embedded sentences, and partially and completely conjoined sentences. |
| **Participant group** | Children (3 - 12 years) with suspected receptive language difficulties |
| **Access** | <https://www.proedaust.com.au/receptive-language-1> |
| **Administration qualification** | Not specified |
| **Cost (2019)** | Complete Kit - 698 AUD |
| **Administration time** | 20 - 30 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate |

## TSCC: Trauma Symptom Checklist for Children

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Briere, J. (1996). *Trauma symptom checklist for children professional manual.* Melbourne, Australia: Australian Council of Educational Research. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess post-traumatic stress and related psychological symptomatology in children |
| **Description** | 54-item, informant-based scale that measure trauma symptoms across the following domains:   * Clinical scales:   + Anxiety;   + Depression;   + Anger;   + Post-Traumatic Stress;   + Disassociation; and   + Sexual Concerns. * Contains two validity scales also:   + Under-response; and   + Hyper-response.   TSCC-A is an alternative 44-item form that makes no reference to sexual concerns.  A 12-item screening form is also available, that contains the items that are most predictive of trauma. Symptoms are assessed across two domains:   * General Trauma; and, * Sexual Concerns. |
| **Participant group** | Children and adolescents (8 - 16 years) who have experienced traumatic events, such as physical or sexual abuse, major loss, natural disasters, or who have witnessed violence |
| **Access** | TCSS  <https://shop.acer.edu.au/trauma-symptom-checklist-for-children-tscc-tscc-a>  TCSS-Screening Form  <https://shop.acer.edu.au/trauma-symptom-checklist-for-children-screening-form-tscc-sf> |
| **Administration qualification** | Restricted (R) - A four-year psychology qualification plus postgraduate training in psychological tests. |
| **Cost (2019)** | TSCC and TSCC-A  Introductory Kit - 380 AUD  TSCC-Screening Form  Introductory Kit - 145 AUD |
| **Administration time** | TCSS and TSCC-A: 15 - 20 minutes  TCSS-Screening Form: 5 minutes |
| **Psychometric properties** | Test manuals contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

## TSCYC: Trauma Symptom Checklist for Young Children

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Briere, J. (2005). *Trauma symptom checklist for young children professional manual.* Melbourne, Australia: Australian Council of Educational Research. |
| **Categorisation** | DUAL DIAGNOSIS |
| **Purpose** | To assess post-traumatic stress and related psychological symptomatology in children |
| **Description** | 90-item informant-based scale that measure trauma symptoms across the following domains:   * Clinical scales:   + Post-Traumatic Stress-Intrusion;   + Post-Traumatic Stress-Avoidance;   + Post-Traumatic Stress-Arousal;   + Post-Traumatic Stress-Total;   + Sexual Concerns;   + Dissociation;   + Anxiety;   + Depression; and   + Anger/Aggression. * Contains two validity scales also:   + Response Level; and   + Atypical Response.   A 12-item screening form is also available, that contains the items that are most predictive of trauma. Symptoms are assessed across two domains:   * General Trauma; and, * Sexual Concerns. |
| **Participant group** | Young children (3-12 years) who have experienced traumatic events such as child abuse, peer assault and community violence. |
| **Access** | TSCYC  <https://shop.acer.edu.au/trauma-symptom-checklist-for-young-children-tscyc>  TYCYC  <https://www.parinc.com/Products/Pkey/4521> |
| **Administration qualification** | Restricted (R) - A four-year psychology qualification plus postgraduate training in psychological tests |
| **Cost (2019)** | TSCYC  Introductory Kit - 475 AUD  TYCYC-Screening Form  Introductory Kit - 70 USD (100 AUD) |
| **Administration time** | TSCYC: 15 - 20 minutes  TSCYC-Screening Form: 5 minutes |
| **Psychometric properties** | Test manuals contains psychometric information.  For evidence of internal consistency reliability, and concurrent validity, see:   * Briere, J., Johnson, K., Bissada, A., Damon, L., Crouch, J., Gil, E., … , & Erns, V. (2001). The Trauma Symptom Checklist for Young Children (TSCYC): Reliability and association with abuse exposure in a multi-site study. *Child Abuse & Neglect, 25*, 1001-1014. doi: 10.1016/S0145-2134(01)00253-8 |
| **Applications** | Baseline, intermediate, outcome |

## Triple C: Checklist of Communicative Competencies

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Bloomberg, K., West, D., Johnson, H., Iacono, T., & Communication Resource Centre. (1997). *Triple C: Checklist of communication competencies for adults with severe and multiple disabilities*. Melbourne, Australia. SCOPE. |
| **Categorisation** | COMMUNICATION |
| **Purpose** | To assess communicative behaviours and identify communication strategies |
| **Description** | The Triple C is informant-based observational checklist designed to ascertain the approximate stage at which a person is communicating through the following stages:   * Unintentional passive; * Unintentional active; * Intentional informal; and, * Symbolic (basic); and symbolic (established). |
| **Participant group** | Adolescents and adults with severe and multiple disabilities who do not demonstrate language skills |
| **Access** | <http://www.spectronics.com.au/product/the-triple-c-checklist-of-communication-competencies> |
| **Administration qualification** | Speech pathologists |
| **Cost (2019)** | Complete Kit - 132 AUD |
| **Administration time** | 60 - 90 minutes |
| **Psychometric properties** | For evidence of internal consistency and inter-rater reliability, and construct validity, see:   * Iacono, T., Bloomberg, K., & West, D. (2005). A preliminary investigation into the internal consistency and construct validity of the Triple C: Checklist of Communicative Competencies. *Journal of Intellectual and Developmental Disabilities, 30*, 139-145. doi: 10.1080/13668250500204059 * Iacono, T., Johnson, H., Bloomberg, K., & West, D. (2009). Reliability and validity of the revised Triple C: Checklist of Communicative Competencies for adults with severe and multiple disabilities. *Journal of Intellectual Disability Research, 53*, 44-53. doi: 10.1111/j.1365-2788.2008.01121.x |
| **Applications** | Baseline, intermediate, outcome |

# V

## Vineland-III: Vineland Adaptive Behaviour Scale

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Sparrow, S. S., Cicchetti, D. V., & Saulnier, C. A. (2016). *Vineland adaptive behaviour scales (3rd ed.)*. Sydney, Australia: Pearson. |
| **Categorisation** | ADAPTIVE BEHAVIOUR |
| **Purpose** | To assess personal and social skills required for everyday living |
| **Description** | Informant-based semi-structured interview or questionnaire rating scale that assesses a person’s adaptive behaviour across the following domains:   * Communication; * Daily Living Skills; * Socialisation; * Motor Skills (optional); and * Maladaptive Behaviour (optional).   Vineland-III has three specific forms:  Interview Form - Semi-structured interview to elicit information about the person’s adaptive functioning from a parent or caregiver:   * Comprehensive - 381 items (with 150 optional items); or, * Domain (abbreviated) - 135 items (with 60 optional items).   Parent/Caregiver Form - Questionnaire format that asks about home and family-life behaviour completed by a parent or caregiver:   * Comprehensive - 381 items (with 150 optional items); or, * Domain (abbreviated) - 180 items (with 60 optional items).   Teacher Form - Questionnaire format that collects a teacher’s experiences with adaptive behaviour in school, preschool, or in a structured day care setting:   * Comprehensive - 333 items (with 87 optional items); or, * Domain (abbreviated) - 96 items (with 53 optional items). |
| **Participant group** | Children, adolescents and adults with intellectual and developmental disabilities |
| **Access** | <https://www.pearsonclinical.com.au/products/view/580> |
| **Administration qualification** | B User Level Qualification - Allied Health or Special Education Professional. This applies to, but is not limited to those with an undergraduate and/or Master’s degrees in speech pathology, occupational therapy, physiotherapy and may include special education, medical and behavioural science. |
| **Cost (2019)** | Complete Kit - 1099 AUD |
| **Administration time** | 10 - 20 minutes |
| **Psychometric properties** | Test manual contains psychometric information |
| **Applications** | Baseline, intermediate, outcome |

# W

## WHIM: Wessex Head Injury Matrix

| **Details of tool** | **Summary of Information** |
| --- | --- |
| **Reference** | Shiel, A., Horn, S. A., Wilson, B. A., Watson, M. J., Campbell, M. J., & McLellan, D. L. (2000). The Wessex Head Injury Matrix (WHIM) main scale: A preliminary report on a scale to assess and monitor patient recovery after severe head injury. *Clinical Rehabilitation, 14*, 408-16. doi: 10.1191%2F0269215500cr326oa |
| **Categorisation** | ACQUIRED BRAIN INJURY |
| **Purpose** | To assess recovery in people with severe acquired brain injury in and emerging from a coma or a vegetative state |
| **Description** | 62-item matrix that collects data by observation, and by testing tasks used in everyday life. The measure provides a sequential framework of tightly defined categories of observation assessing recovery, which cover:   * Communication Ability; * Cognitive Skills; and * Social Interaction. |
| **Participant group** | * Adolescents and adults (16+ years) with severe head injury:   + In and emerging from coma; and   + In the vegetative and minimally conscious states. |
| **Access** | <https://www.pearsonclinical.com.au/products/view/209> |
| **Administration qualification** | Certified by a professional organisation recognised by Pearson Assessment or have a graduate and/or post graduate qualification relevant to their profession. Encompasses psychologists, speech or occupational therapists, mental health professionals and health practitioners. |
| **Cost (2019)** | Complete Kit - 224 AUD |
| **Administration time** | Untimed |
| **Psychometric properties** | Test manual contains psychometric information.  Original reference contains evidence of inter-rater and test-retest reliability. |
| **Applications** | Baseline, intermediate |

# Part 2 – Relevant Internet Resources

**Part 2** below contains a list of relevant Australian and international internet resources related to positive behaviour support. This list is not comprehensive in anyway, however these resources have been utilised by behaviour support practitioners in the past to support their practice.

| Autism Awareness Australia (AUS) <https://www.autismawareness.com.au/> |
| --- |
| The most appropriate resources regarding ASD including websites, books, online forums/social media, educational resources, clinical information, resources, making sense of language, and news and events. |

| Autism Victoria (AUS) <http://www.amaze.org.au/> |
| --- |
| Information regarding assessment and diagnosis, professional development, training events, other relevant online resources and research. |

| Alzheimer’s Society (UK) <https://www.alzheimers.org.uk/> |
| --- |
| Relevant fact sheets about dealing with aggressive behaviour and unusual behaviour available through the website’s search function. |

| Association for Positive Behaviour Support (US) <http://apbs.org/index.html> |
| --- |
| Provides information on positive behaviour support and evidence-based practice in the following areas: community; family/home, and school. Standards of practice are also available. |
| Association for Science in Autism Treatment (US) <https://asatonline.org/> |
| Provides relevant resources regarding applied behaviour analysis (e.g., information on techniques and demonstration videos). |

| Australian Psychological Society (AUS) <http://www.psychology.org.au/> |
| --- |
| Members of the Society can access the following documents (must have a member log-in):  Budiselik, M., Davies, M., Geba, E., Hagiliassis, N., Hudson. A., McVilly. K., …, Gold R. (2010). *Evidence-based psychological interventions that reduce the need for restrictive practices in the disability sector: A practice guide for psychologists.* Melbourne, Australia: Australian Psychological Society.  Rinehart, N., May, T., & Williams, K. (2017). *Autism spectrum disorder (ASD) practice guide.* Melbourne, Australia: Australian Psychological Society. |

| Brainlink (AUS) <http://www.brainlink.org.au/> |
| --- |
| Information on acquired brain injury. |

| Bridging Project (AUS) <http://bridgingproject.org.au/> |
| --- |
| A collaborative project between Scope and Centre for Developmental Disability Health, Monash University. Website contains various fact sheets, podcasts and publications regarding mental health and people with a disability. |

| British Institute of Learning Disabilities (UK) <http://www.bild.org.uk/> |
| --- |
| Can purchase books and other resources related to positive behaviour support. |

| British Psychological Society (UK) <https://www.bps.org.uk/> |
| --- |
| Guidelines for assessment, diagnosis, intervention and support of people with intellectual disabilities who develop dementia.  [https://www1.bps.org.uk/system/files/Public files/rep77\_dementia\_and\_id.pdf](https://www1.bps.org.uk/system/files/Public%20files/rep77_dementia_and_id.pdf) |

| Centre for Disability Studies, University of Sydney (AUS) <https://cds.org.au/resources/> |
| --- |
| The *Resources* section of this website contacts a practice guide on clinical risk assessment: <https://cds.org.au/wp-content/uploads/2017/06/PC-Clinical-Risk-Assessment-Practice-Guide-Final-Version-June-2014.pdf> |

| Centre for Developmental Disability Health (AUS) <http://www.cddh.monashhealth.org/> |
| --- |
| Two dedicated fact sheets related to behaviour:  Understanding behaviour change for people with intellectual disability or autism spectrum disorders: <http://www.cddh.monashhealth.org/wp-content/uploads/2016/12/cddh-practice-advice-behaviour-final-281116.pdf>  Assessment and management framework: Behaviour change in people with intellectual disability: <http://www.cddh.monashhealth.org/wp-content/uploads/2016/11/assessment-framework-.pdf> |

| Challenging Behaviour Foundation (UK) <http://www.thecbf.org.uk/> |
| --- |
| Website providing information to empower the lives of people with severe intellectual disability. The website contains short video clips, information sheets, reports and option to purchase educational DVDs. |

| Child Mind Institute (US) <http://fcon_1000.projects.nitrc.org/indi/cmi_healthy_brain_network/assessments/master-list.html> |
| --- |
| Provides brief information regarding a range of assessment tools. |

| Health in Wales (UK) <http://www.wales.nhs.uk/> |
| --- |
| Report titled ‘*Autism spectrum disorders. A guide for people working with older adults*’.  Provides information regarding strategies for making one’s service and practice more ‘autism-friendly’, in addition to helpful links and further reading.  <http://www.wales.nhs.uk/documents/110127asdolderadultsen.pdf> |

| Institute of Applied Behaviour Analysis (US) <http://www.iaba.com/> |
| --- |
| Resources related to applied behaviour analysis. |

| Kansas Institute for Positive Behaviour Support (US) <http://kipbs.org/> |
| --- |
| Resources related to positive behaviour support. |

| National Autistic Society (UK) <https://www.autism.org.uk/about/behaviour.aspx> |
| --- |
| Provides practical information and tips regarding autism spectrum disorder and behaviours of concern. |

| National Institute for Health and Clinical Excellence (UK) <https://www.nice.org.uk/> |
| --- |
| The organisation provides national guidance and advice to improve health and social care. Contains several reports and guidelines regarding disability and behaviour. For example:  ‘*Challenging behaviour and learning disabilities: Prevention and interventions for people with learning disabilities whose behaviour challenges*’ (2015) - <https://www.nice.org.uk/guidance/ng11> |

| Office of Professional Practice, Health and Human Services Victoria (AUS) [https://www.dhhs.vic.gov.au/office-professional-practice - senior-practitioner-disability](https://www.dhhs.vic.gov.au/office-professional-practice#senior-practitioner-disability) |
| --- |
| Contains relevant resources regarding behaviour support practice and restrictive practices.  The *Positive Practices Framework* is of particular interest. This practice model for behaviour support brings together current research, knowledge, legislation and practice strategies. The framework is available from:  <https://providers.dhhs.vic.gov.au/positive-practice-framework-word> |

| Positive Behavioural Intervention & Supports (US) <https://www.pbis.org/> |
| --- |
| The organisation supports schools and other agencies to implement a multi-tiered approach to social, emotional and behaviour support. Contains policy documents, presentations and handouts from training events, and videos to support training. |

| Positive Partnerships (AUS) <http://www.positivepartnerships.com.au/resources> |
| --- |
| The resources section of this website contains practical tools for teachers, families and other team members. The resources have been designed to provide a starting point for information gathering and planning to improve outcomes at home and in school for children with autism spectrum disorder. |

| Royal College of Psychiatrists (UK) <https://www.rcpsych.ac.uk/> |
| --- |
| Clinical and service guidelines for supporting children, young people and adults with intellectual disabilities at risk of restrictive practices:  Challenging behaviour: A unified approach - <https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr144.pdf?sfvrsn=73e437e8_2>  Update to the ‘Challenging behaviour – A unified approach - <https://www.rcpsych.ac.uk/docs/default-source/members/faculties/intellectual-disability/id-resources-fr-id-08.pdf?sfvrsn=83850b2c_>  Policies regarding mental health and intellectual disability  Enabling people with mild intellectual disability and mental health problems to access healthcare services - <https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr175.pdf?sfvrsn=3d2e3ade_2> |

| Scope (AUS) <https://www.scopeaust.org.au/> |
| --- |
| Report titled ‘Building the Foundation for Effective Communication’.  Provides information regarding resources for speech pathologists and other related professionals regarding communication assessments appropriate for people with behaviours of concern.  <https://www.scopeaust.org.au/wp-content/uploads/2015/01/Building-the-Foundations_report-2011.pdf> |

| Scottish Government (UK) <https://www.gov.scot/> |
| --- |
| Contains a relevant resource titled ‘*The Scottish strategy for autism – Menu of interventions*’, which provides a guide to acceptable interventions and supports for people with autism spectrum disorder. The resource can be downloaded directly from:  [https://www.gov.scot/publications/scottish-strategy-autism-menu-interventions/ - res438221](https://www.gov.scot/publications/scottish-strategy-autism-menu-interventions/#res438221) |

| Society for the Study of Behavioural Phenotypes (UK) <https://ssbp.org.uk/> |
| --- |
| Website contains dedicated phenotype fact sheets regarding several genetic disorders such as Angelman syndrome, Fragile X syndrome and Williams syndrome. |

| Therapeutic Guidelines (AUS) <https://www.tg.org.au/> |
| --- |
| An independent organisation that publishes therapeutic guidelines on a range of health issues including disability. |