I. General Information

Title of the test: Arnadottir OT-ADL Neurobehavioral Evaluation (A-ONE)

Author: Guorun Arnadottir

Publisher: Mosby Company

Time required to administer: 25 minutes on average with reduced time with experience

Cost of the Test: $37.97 to $117.92 to buy the textbook that it is in (The Brain and Behavior: Assessing Cortical Dysfunction Through Activities of Daily Living by Guorun Arnadottir). Costs involved to complete 3 day training on evaluation.

II. Description of Test

Type/Purpose of Test: To detect neurobehavioral dysfunctions as well as the functional levels of CNS damaged patients via an ADL assessment. It primarily addresses ADL performance including dressing, grooming and hygiene, transfer behavior and mobility, feeding, and communication, and their relation to brain structure and function. Part II is used to convert the results from Part I to reveal information regarding dysfunctions within the CNS.

Population: People with CNS dysfunctions of cortical origin, especially where neurobehavioral deficits are suspected. The causes of such dysfunction are diverse and include the following: vascular disorders, metabolic disorders, head injuries, infections, toxins, brain tumors, and degeneration of the nervous system.

Focus of measurement:
_x__ Organic systems _x__ Abilities   ___ Participation/life habits   ___ Environmental Factors

III. Practical Administration

Ease of Administration: It is a fairly simple test especially when you are familiar with it. It uses a rating scale to determine their level of function. There may be some gray areas that may be difficult to evaluate and it may somewhat fatigue the client if they have low endurance that may require breaks.

Clarity of Directions: The directions give you a list of specific things to look for. It is an organized way to figure out cognitive deficits in patients through doing ADLs. It is a very handy tool when you take the certification course.

Scoring Procedures: You interpret how they do in an area on a scale of 1-4 using two different rating scales. The independence score interprets it as 4 being independent, 3 independent but with supervision, 2 needs verbal assistance to complete activity, 1 needs physical assistance, 0 unable to perform, completely dependent on assistance. The neurobehavioral score interprets it as 0 no neurobehavioral impairments observed, 1 patient is able to perform without additional information, but some neurobehavioral impairment can be observed, 2 able to perform with additional verbal assistance with some neurobehavioral impairment during performance, 3 able to perform with demonstration or minimal to moderate physical assistance, and 4 unable to perform due to neurobehavioral impairment, needs maximum physical assistance. At the end, you total all the scores and write a percentage.

There score should be based on two or three ADL observation. This allows therapist to test suspected problems they see from one session to the next.

Examiner Qualification & Training: should be a licensed occupational therapist, must attend a training course. You cannot administer this test unless you are certified, which involves a 3 day course.

IV. Technical Considerations

Standardization: __x__ Norms ____ Criterion Referenced ____ Other _____

Reliability: interrater reliability was .84

Validity: according to the opinion of three experts in occupational therapy and neurology, they deemed it valid

Manual: ____ Excellent __x__ Adequate ____ Poor

What is (are) the setting/s that you would anticipate using this assessment? Places that they do ADLs and treat CNS damage so in adult rehab, skilled nursing facilities, hospitals

Summary of strengths and weaknesses:
Weakness: Therapists must be trained thoroughly to use it properly and attend a training seminar to be completely familiar with it. The reliability is conditioned upon these requirements.
May require travel to get to the training.
Training is not widely available around the US
It is limited to assessing a select population, specifically CNS disorders.

Strength: The extent of neurobehavioral areas that it covers in all the sections.
It analyzes 5 specific independence areas.
It is good that it has a normative score for comparison.
It could be pretty useful for a therapist who is trained in it to get consistent scores for a good source of documentation.
You do not have to complete the test in one session so if fatigue is an issue it would be good to break up
Has a good checklist to check different neurobehavioral deficits
Would be helpful even if you were not certified to identify deficits
It can be done during a routine ADL session and does not involve using more treatment time to administer the test