

Psychological Assessment

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Reliability & Validity

Psychological Assessment has limited capabilities for prediction of future behavior – There is no test that is 100% accurate in predicting future functioning but there are some that are helpful in determining current functioning.

Assessment for psychological functioning is typically based on a professional clinical interview. Objective measures of personality functioning and measures of neuropsychological functioning can increase the validity and reliability of the clinical interview.

Clinical Interview

Using psychological testing measures alone is not a good idea. Objective assessment needs additional analysis to address motivation, consistency in responses and reliability of the information.

Combined with the clinical interview, the objective assessment measures will provide a more accurate interpretation of current functioning. Current functioning is highly related with future functioning but not 100%.

Clinical Assessment

A current assessment of depressed feelings that is identified in the clinical interview should also produce an accurate objective measure of depressed symptoms on the measures of personality. The clinical interview will assess how these symptoms of depression are affecting the functioning of the individual. Many individuals manage their work and personal functioning even when there are depressive symptoms present. Similar to Type A personality, there are many who are Type A and function well in their work and personal settings.

Protocol for Security Assessment for Mental Health

Clinical Interview

Personality Measures

Neuropsychological Screening

Determination of Mental Health Stability

Clinical Interview

Education/Work Hx

Family/Support Systems

Past/Current Psychosocial Functioning

Grief/loss/challenges/expectations

Experienced Professional Interview Takes
into account the assessment of:

voice intonations/rate of speech/non-verbal
messages such as facial
expressions/posture/gestures

Personality Measure

MMPI-2

Most used, most research data

high reliability and validity for
psychological measures

Has been used with security assessment

Peace Officer Clearance

Assessment of Fit for Duty by FAA

Assessment of NRC workers

MMPI-2

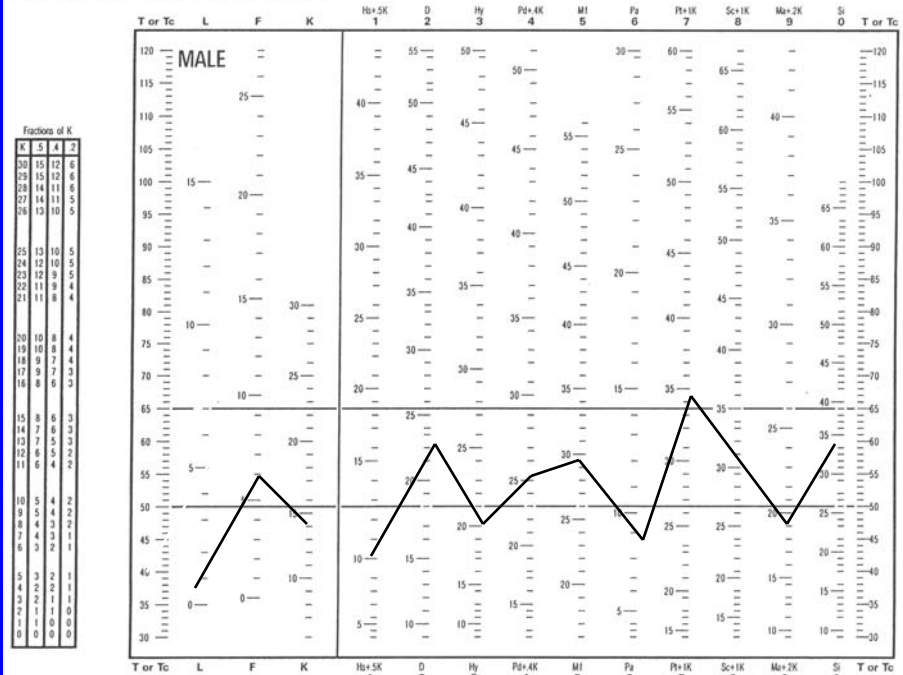
MMPI-2™ Minnesota Multiphasic Personality Inventory-2™

Profile for Basic Scales

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Name _____
 Address _____
 Occupation _____ Date Tested ____/____/____
 Education _____ Age _____ Marital Status _____
 Referred By _____
 MMPI-2 Code _____

Scorer's Initials _____



- LEGEND**
- L Lie
 - F Infrequency
 - K Correction
 - Hs Hypochondriasis
 - D Depression
 - Hy Conversion Hysteria
 - Pd Psychopathic Deviate
 - Mf Masculinity-Femininity
 - Pa Paranoia
 - Pt Psychasthenia
 - Sc Schizophrenia
 - Ma Hypomania
 - Si Social Introversion

Raw Score _____
 ? Raw Score _____
 K to be Added _____
 Raw Score with K _____

NCS®
 Product Number
 24001

MMPI-2

MMPI-2[™] Minnesota Multiphasic Personality Inventory - 2[™]

Profile for Basic Scales

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Name _____

Address _____

Occupation _____ Date Tested ____/____/____

Education _____ Age _____ Marital Status _____

Referred By _____

MMPI-2 Code _____

Scorer's Initials _____

Factors of K	1	2	3	4	5	6	7	8	9
26	15	12	8	6	4	3	2	1	1
25	16	12	8	6	4	3	2	1	1
24	17	12	8	6	4	3	2	1	1
23	18	11	7	5	3	2	1	1	1
22	19	11	7	5	3	2	1	1	1
21	20	10	6	4	2	1	1	1	1
20	21	10	6	4	2	1	1	1	1
19	22	9	5	3	2	1	1	1	1
18	23	9	5	3	2	1	1	1	1
17	24	8	4	2	1	1	1	1	1
16	25	8	4	2	1	1	1	1	1
15	26	7	3	2	1	1	1	1	1
14	27	6	2	1	1	1	1	1	1
13	28	6	2	1	1	1	1	1	1
12	29	5	1	1	1	1	1	1	1
11	30	5	1	1	1	1	1	1	1
10	31	4	1	1	1	1	1	1	1
9	32	4	1	1	1	1	1	1	1
8	33	3	1	1	1	1	1	1	1
7	34	3	1	1	1	1	1	1	1
6	35	2	1	1	1	1	1	1	1
5	36	2	1	1	1	1	1	1	1
4	37	1	1	1	1	1	1	1	1
3	38	1	1	1	1	1	1	1	1
2	39	1	1	1	1	1	1	1	1
1	40	1	1	1	1	1	1	1	1

Raw Score _____

? Raw Score _____

K to be Added _____

Raw Score with K _____

LEGEND

- L Lie
- F Infrequency
- K Correction
- Ma Hypochondriasis
- D Depression
- Hy Conversion Hysteria
- Pd Psychopathic Deviate
- Mf Masculinity-Femininity
- Pa Paranoia
- Pt Psychasthenia
- Sc Schizophrenia
- Ma Hypomania
- Si Social Introversion

Product Number
24001

Repeatable Battery for Neuropsychological Screening (R-BANS)



R-BANS

Measures

The RBANS is used in various populations and reliably assesses individual neurocognitive domains in a rapid, efficient manner.

RBANS

The Repeatable Battery for the Assessment of Neuropsychological Status (RBANS) was initially designed as a screening tool for the assessment of dementia ([Randolph, 1998](#)). Since its inception, however, it has gained popularity for use with other populations due to its many advantages, including its short administration time, co-normed index scores, inclusion of a summary score, and alternate forms. Recent research has supported the clinical application of the RBANS as a neuropsychological screening tool within various populations, including multiple sclerosis ([Beatty, 2004](#)) and cerebrovascular disorders ([Larson et al., 2003](#);

RBANS

Immediate Memory Index

Visuospatial/Constructional Index

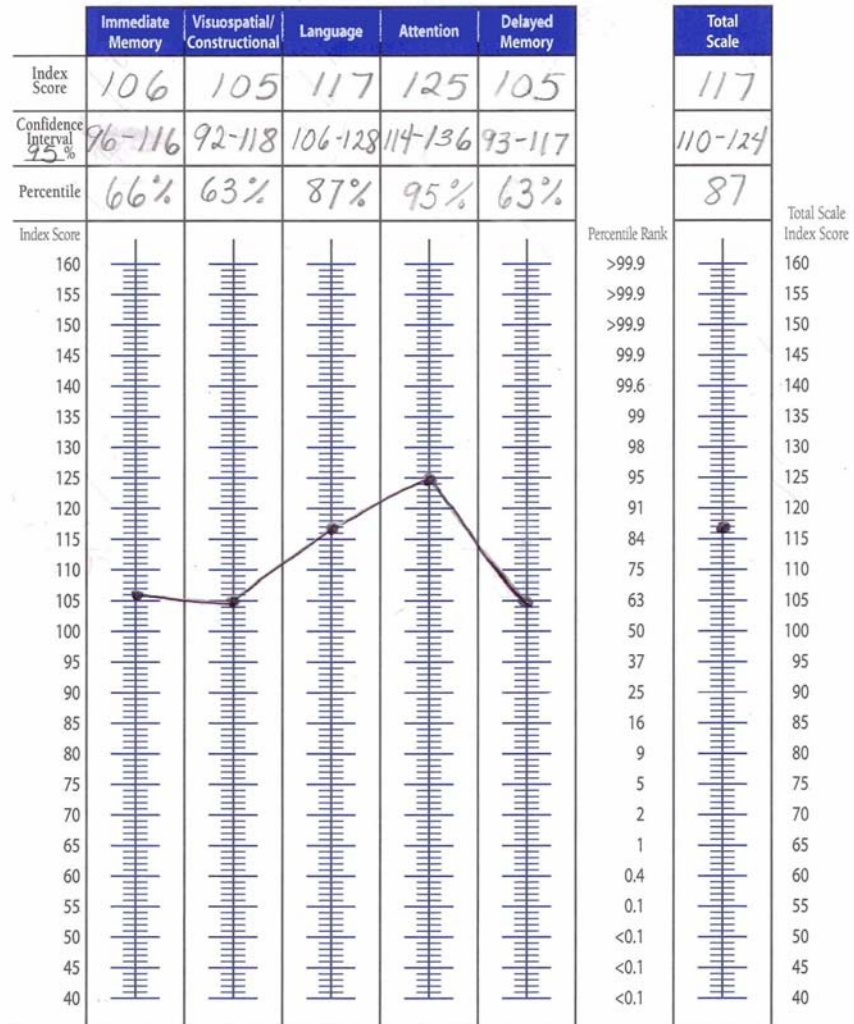
Language Index

Attention Index

Delayed Memory Index

Has good internal reliability (ie alpha coefficients); has good convergent validity (relationship between raw scores and comparable neuropsychological measures).

RBANS



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RBANS

	Immediate Memory	Visuospatial/Constructional	Language	Attention	Delayed Memory	Total Scale	
Index Score	120	121	117	122	119	131	
Confidence Interval 95%	110-130	108-134	106-128	111-133	107-131	124-138	
Percentile	91%	92%	87%	93%	90%	98%	
Index Score						Percentile Rank	Total Scale Index Score
160						>99.9	160
155						>99.9	155
150						>99.9	150
145						99.9	145
140						99.6	140
135						99	135
130						98	130
125						95	125
120						91	120
115						84	115
110						75	110
105						63	105
100						50	100
95						37	95
90						25	90
85						16	85
80						9	80
75						5	75
70						2	70
65						1	65
60						0.4	60
55						0.1	55
50						<0.1	50
45						<0.1	45
40						<0.1	40

RBANS

Advantages for Security Screening

Easy to Administer.

Adds cognitive component to mental health assessment.

Difficult to try and influence results and adds validity and reliability to the assessment.

Summary

There is no test or assessment that can accurately predict 100% of future behavior

There are psychological evaluations that are designed to assess for consistency of information and when combined with clinical interview and objective measures, it provides an additional layer of screening.

There is a possibility it may result in false positives. This will likely be the result of a misunderstanding of the directions or deliberate intention to answer a certain way. Additional measures can be added when this occurs.