

7.8. Ability to select and use measures and diaries when working with children/young people

Service-level needs to collect data should be balanced against the personal preferences, needs and goals of the child/young person



- An ability to draw on knowledge that measures/scales should be used as an adjunct to assessment
- An ability to engage a child/young person in the use of measures such that this is a participative exercise (e.g. explaining how they can be useful and discussing the meaning and significance of any results)

Knowledge of commonly used measures

- An ability to draw on knowledge of measures commonly used as part of an assessment in an inpatient context
- An ability to draw on knowledge relevant to the application of a measure, e.g.
 - its psychometric properties (including norms, validity, reliability)
 - the training required in order to administer the measure
 - scoring and interpretation procedures
 - characteristics of the test that may influence its use (e.g. its length, or its user friendliness)

Ability to administer measures

- An ability to judge when a child/young person needs help to complete a scale
- An ability to take into account a child/young person's attitude to the scale, and their behaviours while completing it, when interpreting the results
- An ability to score and interpret the results of the scale using the scale manual guidelines
- An ability to interpret information from the scale in the context of assessment and evaluation information obtained from other sources

An ability to select and make use of outcome measures

- An ability to integrate outcome measurement into an assessment and any intervention
- An ability to draw on knowledge that a single measure of progress will fail to capture the complexities of a person's functioning, and that these complexities can be assessed by:



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	<ul style="list-style-type: none">■ measures focusing on a person's functioning drawn from different perspectives (e.g. the child/young person themselves, family members, professional colleagues)
	<ul style="list-style-type: none">■ measures using different technologies, e.g. global ratings, specific symptom ratings and frequency of behaviour counts■ measures that assess different symptom domains (e.g. affect, cognition and behaviour)
■	An ability to select measurement instruments that are clinically relevant and designed to detect changes in the aspects of functioning that are the targets of the intervention
■	An ability to draw on knowledge that concurrent measures are a more rigorous test of improvement than the use of retrospective ratings
■	An ability to provide clear information about how measurement information will be used and with whom it will be shared

Ability to use systematic recordings

Knowledge	
■	An ability to draw on knowledge of how systematic recording can be used to help identify the function of specific behaviours by analysing its antecedents and consequences (i.e. what leads up to the behaviour, and what happens afterwards)

Ability to integrate systematic 'diary recordings' into assessment and intervention	
■	An ability to explain the function of structured charts to children/young people, and to help them use charts to monitor their own behaviour, e.g.:
	<ul style="list-style-type: none">■ explaining and demonstrating the use of self-completed frequency charts (to record the frequency of target behaviours)■ explaining and demonstrating the use of self-completed behavioural diaries (to record problematic or desired behaviours, and their antecedents and consequences)
■	An ability to review completed frequency charts and behaviour diaries with a child/young person, to:
	<ul style="list-style-type: none">■ find out their interpretation of the data■ find out how easy it was for them to record information■ motivate them to carry out any further data collection
■	An ability to use diary and chart information to help assess the frequency of problems, degree of distress caused, antecedents and patterns of behaviour and reinforcement