

**COUNTY LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
Psychological Testing Unit**

Quality Assurance: The Clinical Evaluation

Evaluator's Name: _____ Date of Eval: _____ Test Report? Y N

Reviewing Psychologist Name: _____ Date of Review: _____ Total Score _____

Beneficiary's Name: _____ Beneficiary's Age: _____

DIRECTIONS FOR THE REVIEWER: Circle the number that best describes the psychological report where "4" is high and "1" is low.

REFERRAL QUESTIONS ARE SPECIFIC AND UNIQUE	4	3	2	1
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- Specific referral questions are listed
- Referral questions are unique to this beneficiary

ASSESSMENTS ARE SPECIFIC AND UNIQUE	4	3	2	1
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- Methods are appropriate and sufficient to address the referral questions
- Conditions effecting the reliability and validity of the data are considered
- Quantitative procedures are appropriately scored and data presented in tabular form
- Diagnoses are documented, behaviorally-based, and consistent with DSM-V or ICD-10 Code criteria

DATA ARE APPROPRIATELY INTERPRETED	4	3	2	1
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- Data address the referral questions
- Interpretations of data are empirically and logically sound
- Inconsistencies in the data are noted and discussed
- Alternative interpretations of the data are considered

CONCLUSIONS INTEGRATE DATA FROM MULTIPLE SOURCES	4	3	2	1
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- Arise from consistent patterns of data found throughout the evaluation
- Integrate data from all sources, e.g., history, significant others, observed behavior, self-report and quantitative measures
- Integrate beneficiary's cognitive, perceptual-motor, emotional and social-adaptive behavior
- Incorporate current behavioral science to generate a coherent psychological explanation of the beneficiary's behavior

REPORT IS UNIQUE TO THIS BENEFICIARY**4 3 2 1**

- Is organized around the beneficiary, not around the tests
- Provides reader with a sense of the beneficiary as a whole person, a good “word-picture”
- Interprets data consistent with the beneficiary’s developmental level, ethnic and cultural background, and, unique needs and abilities
- Describes beneficiary’s unique inner world, motivation, needs, and, coping skills

REPORT IS RESPECTFUL OF THE BENEFICIARY**4 3 2 1**

- Addresses beneficiary’s strengths as well as weaknesses; does not “pathologize” beneficiary
- Compares beneficiary’s behavior with that of others in a constructive way
- Is written in language that is easy to understand
- Protects privacy of beneficiary’s family

RECOMMENDATIONS ARE CONSISTENT WITH THE FINDINGS**4 3 2 1**

- Address the referral questions
- Follow logically from conclusions
- Are consistent with behavioral science
- Are appropriately comprehensive

RECOMMENDATIONS ARE USEFUL TO THE BENEFICIARY**4 3 2 1**

- Address the beneficiary’s unique needs
- Are practical and can be implemented given the beneficiary’s situation
- Are prioritized in terms of urgency
- Specify treatment/intervention resources

A D D I T I O N A L C O M M E N T S