This packet contains the user's manual and profile sheets for the Vocational Assessment Protocol (VAP), a functional skills profile of vocational-related factors intended for use in the vocational rehabilitation of persons who have acquired a traumatic brain injury. The VAP consists of nine structured rating instruments and a structural summary format. The rating instruments include two structured interviews, three clinical rating instruments, and four measures of vocational adaptability. The structural summary is intended to condense the information on strengths, critical work behaviors, and potential work problems in relation to job goals. A format for addressing referral questions, appropriateness of job goals, supervisory and support recommendations, and additional service needs is also included in the summary. The manual details the VAP's 11-step process, including: (1) gathering background information; (2) profiling clinical background information; (3) intake and assessment planning; (4) formalizing and operationalizing referral questions; (5) the intake interview; (6) initiating the evaluation; (7) identifying vocational interests and work needs; (8) situational assessment and job search; (9) situational assessment and job retention; (10) community-based job trials; and (11) developing the evaluation report and completing the structural summary. Also included is a summary of validity and reliability data. Multiple copies of blank profile sheets are attached. (Contains 10 references.) (DB)
The Vocational Assessment Protocol

USER'S MANUAL

Revised January, 1996

Dale F. Thomas, Ph.D., CRC

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Rehabilitation Research and Training Center on Improving Community-Based Rehabilitation Programs
University of Wisconsin-Stout
Menomonie, Wisconsin
Community-Based Rehabilitation Programs Involved in Validation Research Studies

Jewish Vocational Services, Cincinnati, OH
Center for Neurorehabilitation and ReEntry, Chicago, IL
Lakeshore Rehabilitation Facility, Birmingham, AL
Brain Injury Community Services, Santa Fe
Milwaukee Center for Independence, Milwaukee, WI
New Horizons of Oakland County, Bloomfield Hills, MI
Hot Springs Rehabilitation Center, Hot Springs, AR
 Courage Center, Golden Valley, MN
Evaluaction and Training Center, Fargo, ND
CNR Clinic-Community Hospital, Indianapolis, IN
Illinois Growth Enterprises, Inc., Rockford, IL
Work Skills Corporation, Brighton, MI
Curative Rehabilitation Center, Wauwatosa, WI
 Pioneer Center, McHenry, IL
Abilities of Florida, Clearwater, FL
Direct Connection, St. Cloud, MN
Sharp Work ReEntry, San Diego, CA
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3
The

Vocational Assessment Protocol

USER'S MANUAL

Revised January, 1996

Dale F. Thomas, Ph.D., CRC

Rehabilitation Research and Training Center on Improving Community-Based Rehabilitation Programs University of Wisconsin-Stout Menomonie, Wisconsin
Acknowledgments

The development of materials included in this manual was made possible by the effort of joint collaboration involving several organizations. The original research with the Vocational Assessment Protocol (VAP) was conducted by the University of Wisconsin-Stout Rehabilitation Research and Training Center (UW-Stout RRTC). Specific funding provided by the Rehabilitation Services Administration to the Midwest Regional Head Injury Center for Rehabilitation and Prevention at the Rehabilitation Institute of Chicago made further development of this instrumentation possible.

The Regional Center provided not only dollars to assist in the development of this instrument, but also invested staff resources, time, and strong encouragement to produce the manual and instrumentation that is presented herein. Midwest Regional Head Injury Center jointly sponsored three training programs to bring together staff from around the region and throughout the country to provide an adequate validation sample for research purposes. The true spirit of joint collaboration was brought about by Cynthia Sisk, Donald Olson, Mary Jane Tanquary, Robynn Kobayashi, and Laura Dunlap. They brought more energy, personal commitment, and exceptional interest in working with us to get the right people, to obtain the best input and guidance, and to make available needed opportunities that permitted us to explore the concepts underlying the Protocol, to elaborate and test them out during advisory meetings, and to assist us to focus energies and skills into developing and validating the process and instrumentation that emerged through well established field sites.

Many consumers of services to persons with traumatic brain injury (including brain injury survivors and their significant others) were also involved in this process. Using input from the Constituency Advisory Committees, consumers, and advisory members of the Midwest Regional Head Injury Center, additional refinements to training curricula as well as the Vocational Assessment Protocol were completed.

Names of organizations and individuals listed on the inside cover identify some of the persons who were involved in efforts to collect data, and provide feedback which makes the Vocational Assessment Protocol useful. Staff of the Rehabilitation Research and Training Center at the University of Wisconsin-Stout extend our full and unqualified appreciation to these individuals and organizations, and dedicate this manual to the survivors of traumatic brain injury who were involved in the validation of the instrumentation included in the Vocational Assessment Protocol.

Advisors and critics of the Vocational Assessment Protocol who helped shape the direction, content, and spirit of this instrumentation include Marilyn Spivack, James Malec, Mitch Rosenthal, Jeff Smigielski, Nancy Crewe, and Audrey Nelson. Several students conducted master’s theses and dissertations which also contributed to the body of knowledge leading to the development of the Vocational Assessment Protocol. These individuals include Bonnie Roush, Audrey Nelson, Dana Catalogna, Becky Michaels, Dena Manier, Sharon Zachow, Tom Thorsness, Geno Pichette, and John Kosciulek.

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To each of you, thank you for your contributions and making this research project workable and our product usable.

Fredrick E. Menz
Dale F. Thomas
January, 1996
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgments</td>
<td>iii</td>
</tr>
<tr>
<td>Table of Contents</td>
<td>v</td>
</tr>
<tr>
<td>List of Tables</td>
<td>vii</td>
</tr>
<tr>
<td>What is the Vocational Assessment Protocol</td>
<td>1</td>
</tr>
<tr>
<td>What the Vocational Assessment Protocol is Not</td>
<td>2</td>
</tr>
<tr>
<td>Elements of the Vocational Assessment Protocol</td>
<td>3</td>
</tr>
<tr>
<td>Background Information Interviews (Profiles)</td>
<td>3</td>
</tr>
<tr>
<td>Clinical Ratings Profiles</td>
<td>3</td>
</tr>
<tr>
<td>Vocational Adaptivity Measures</td>
<td>3</td>
</tr>
<tr>
<td>Structural Summary Section (Optimal)</td>
<td>3</td>
</tr>
<tr>
<td>The 11-Step Process</td>
<td>4</td>
</tr>
<tr>
<td>Step 1 - Gathering Background Information</td>
<td>4</td>
</tr>
<tr>
<td>Profile A—Personal Demographic Questionnaire</td>
<td>5</td>
</tr>
<tr>
<td>Profile B—Personal Demographic Interview</td>
<td>11</td>
</tr>
<tr>
<td>Step 2 - Profiling Clinical Background Information</td>
<td>16</td>
</tr>
<tr>
<td>Profile C—Physical Profile</td>
<td>17</td>
</tr>
<tr>
<td>Profile D—Social-Emotional Profile</td>
<td>21</td>
</tr>
<tr>
<td>Profile E—Neuropsychological Profile</td>
<td>25</td>
</tr>
<tr>
<td>Step 3 - Intake and Assessment Planning</td>
<td>31</td>
</tr>
<tr>
<td>Step 4 - Formalize and Operationalize Referral Questions</td>
<td>31</td>
</tr>
<tr>
<td>Step 5 - The Intake Interview</td>
<td>32</td>
</tr>
<tr>
<td>Step 6 - Initiating the Evaluation</td>
<td>33</td>
</tr>
<tr>
<td>Step 7 - Identifying Vocational Interests and Work Needs</td>
<td>34</td>
</tr>
<tr>
<td>Step 8 - Situational Assessment and Job Search</td>
<td>35</td>
</tr>
<tr>
<td>Profile F—Job Search Skills Profile</td>
<td>43</td>
</tr>
<tr>
<td>Profile G—Interviewing Skills Profile</td>
<td>43</td>
</tr>
<tr>
<td>Step 9 - Situational Assessment and Job Retention</td>
<td>54</td>
</tr>
<tr>
<td>Profile H—Critical Work Behavior Profile</td>
<td>55</td>
</tr>
<tr>
<td>Profile I—Social Adaptive Behavior Profile</td>
<td>59</td>
</tr>
<tr>
<td>Step 10 - Community-Based Job Trials</td>
<td>63</td>
</tr>
<tr>
<td>Step 11 - Develop the Evaluation Report and Complete a Structural Summary</td>
<td>65</td>
</tr>
</tbody>
</table>
Table of Contents (continued)

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishment of Reliability and Validity of the Vocational Assessment Protocol</td>
<td>66</td>
</tr>
<tr>
<td>Construct (Factorial) Validity</td>
<td>66</td>
</tr>
<tr>
<td>Reliability Analysis</td>
<td>67</td>
</tr>
<tr>
<td>Future Validation Considerations</td>
<td>68</td>
</tr>
<tr>
<td>References</td>
<td>69</td>
</tr>
</tbody>
</table>
List of Tables

Table 1. Hierarchy of Employment Approaches for Persons with Severe Disabilities

.............................................................................................................. 64
What is the Vocational Assessment Protocol?

The Vocational Assessment Protocol is a functional skills profile of vocational related factors intended for use with persons who have acquired a traumatic brain injury. It was designed for use by persons familiar with both vocational rehabilitation of persons with traumatic brain injury and traditional vocational assessment strategies and approaches.

The purpose of the Vocational Assessment Protocol is to:

1. Systematically identify work skills, assets, and strengths upon which to focus vocational rehabilitation efforts.

2. Provide a structure and protocol for examination of the most frequent cognitive, physical, and psychosocial factors likely to affect employment and community integration for persons who have acquired a traumatic brain injury.

3. Define vocational rehabilitation strategies based upon minimizing vocational barriers through the development of compensatory techniques and use of creative problem-solving strategies.

4. Define vocational barriers in a common language and similar format for use by consumers and vocational rehabilitation providers.
What the Vocational Assessment Protocol is Not

The Vocational Assessment Protocol is not an instrument designed for use as a yardstick for assessing whether or not a person is capable of entering and maintaining competitive employment. Although the functional skills, abilities, and traits assessed by this instrument tend to be predictors of employment success, the purpose of developing and validating this instrument was not to predict who will and who will not be successful, but to optimize employment and community integration outcomes for individuals who have suffered a traumatic brain injury by encouraging identification of assets and development of effective compensatory strategies.

The Vocational Assessment Protocol (VAP) presently exists in its final developmental state, having been validated on 149 subjects at 20 field sites throughout the United States. The Vocational Assessment Protocol is structured into profiles and rating scales, as well as data posting instruments that group information by its source, such as medical, neuropsychological, family information, etc. The structure of the Protocol is such that the information can be easily gathered through similar sources. For example, all information obtained from the family would be found on Profiles A or B. The information regarding neuropsychological variables would be found on Profile E—Neuropsychological Profile, etc.

The Protocol discussed in this manual incorporates a standardized process used to gather the data. As with any standardized behavior rating instrument, it is recommended that the process, procedure, and Protocol described herein be used as closely and accurately as possible. It is anticipated that the Vocational Assessment Protocol will be used in a variety of situations and that portions of the Protocol may be used by one evaluator and not by another. Please note that any assumptions, generalizations, or predictions of the reliability and usefulness of this instrument have been made on the basis of using the entire instrument in the method described in this manual.
Elements of the Vocational Assessment Protocol

The Vocational Assessment Protocol consists of nine structured rating instruments and a structural summary format designed to guide the vocational assessment process. The rating instruments include two structured interviews, three clinical rating instruments, and four measures of vocational adaptability. The Structural Summary is intended to assist the evaluator to condense the information into a meaningful summary of strengths, critical work behaviors, and potential work problems in relation to job goals. A format for addressing referral questions, appropriateness of job goals, supervisory and support recommendations, and additional service needs is also included in the Structural Summary.

Below is a summary of the instruments included in the Vocational Assessment Protocol (Thomas, 1994):

Background Information Interviews (Profiles)

A. Personal Demographic Questionnaire (PDQ)
B. Personal Demographic Interview (PDI)

Clinical Rating Profiles

C. Physical Profile
D. Social-Emotional Profile
E. Neuropsychological Profile

Vocational Adaptivity Profiles

F. Job Search Skills Profile
G. Interviewing Skills Profile
H. Critical Work Behaviors Profile
I. Social Adaptive Behaviors Profile

Structural Summary Section (Optimal)

This element of the Protocol is for use in synthesizing information. In this process, the evaluator is encouraged to:

- Detail strengths and problems found in Profiles A through I
- Summarize referral questions and address them
- Identify preferred learning styles and suggested teaching strategies
- Suggest behavior intervention strategies, supervision, and support needs
- Detail additional services suggested
The 11-Step Process

An 11-step procedure was developed as part of the preservice training for instructing professionals as to suggested approaches for using the Vocational Assessment Protocol. Although this process may be modified and in many cases steps combined, the procedure appeared to have applicability at all 20 sites where the Vocational Assessment Protocol was field tested. These processes therefore appear to represent a good approach for getting started with the Protocol. Adaptation or tailoring of the Vocational Assessment Protocol for each particular setting may be necessary after experience with the entire Vocational Assessment Protocol. For example, people with more severe disabilities may be unable to complete Profiles F and G.

Gathering Background Information

An essential part of the Vocational Assessment Protocol process is gathering and documenting background information. It is very important with any individual undergoing evaluation to document what is known about skills, abilities, and background characteristics, and it is critically important for persons who have sustained a traumatic brain injury. Profiles A and B were developed to provide a structure for collecting this information in a standardized, concise, and organized manner.
Profile A

Personal Demographic Questionnaire
Profile A—Personal Demographic Questionnaire

The Personal Demographic Questionnaire (PDQ) is a survey designed for completion by a person with a head injury or someone who knows him/her well. The PDQ was designed to provide a comprehensive analysis of important accident and pre-accident information, and perceived strengths, as well as perceived limitations and rehabilitation needs.

The Personal Demographic Questionnaire was derived in part from a research questionnaire developed by the University of Wisconsin-Stout Research and Training Center and the Wisconsin Department of Health and Social Services Task Force on Head Injury (Thomas, Czerlinsky, & Smigielski, 1987). This original questionnaire was developed using input from task force members. The task force consisted of head injury survivors, researchers, public policy officials, and a broad range of vocational rehabilitation personnel and head injury rehabilitation specialists. The Wisconsin Survey of Traumatic Head Injuries: An Assessment of Rehabilitation Needs, and Social, Economic and Personal Loss was completed by over 700 persons. Many of the items on the PDQ were derived either directly or indirectly from the information gathered in this survey, which became known as the "Wisconsin Study," and a strong basis for normative comparison exists. The PDQ contains items found to be of primary interest in vocational re-entry and integration of persons with brain trauma injuries into the community.

The Personal Demographic Questionnaire is used to document information about a person's social, vocational, educational, and personal history from the aspect of the family or a significant other, and/or a person who has sustained a serious head injury. In some cases, this information may be available from other sources.

The PDQ provides a structured format for documenting history and relevant information typically requested by service providers. This format also provides a means of collecting a uniform set of data for research purposes. Depending on the circumstances, this information may be collected by having the person with a head injury or a significant other complete the Personal Demographic Questionnaire, which can later be reviewed by an interviewer for accuracy and completeness. If desired, an interviewer may also collect this information during a face-to-face interview.

During the completion of the Personal Demographic Questionnaire, information will be collected in following areas:

A. Information on Personal, Developmental, and Pre-injury Characteristics
   • Gender
   • Birthdate
   • Date of injury
   • Current marital status
   • Ethnic background
   • Current medication, dosage, and side effects
   • Early developmental history
   • Education completed
B. Employment History and Job Goals
- Effects the brain injury may have on short-term and long-term earning potential
- Pre-injury work skills or traits that may assist in obtaining and maintaining a job
- Immediate and long-term job goals and alternatives

C. Current Living Arrangements and Sources of Support
- Current living arrangements and special needs
- Current sources of income and support

D. Causes and Consequences of Brain Injury
- Type of brain injury
- Cause of injury
- Period of time unconscious or in coma
- Length of amnesia period
- Current problems that resulted from the head injury
  - Physical problems
  - Sensory and motor problems
  - Cognitive problems
- Severity of current or recurrent problems
  - Emotional related problems
  - Social and behavioral problems
- Other significant injuries accompanying this brain injury

E. Activities of Daily Living
- Self-care and hygiene
- Community survival skills
- Home living skills
- Accuracy of the data in this questionnaire

At the conclusion of the Personal Demographic Questionnaire, it may be determined that further clarification of the person’s abilities in certain areas such as activities of daily living is necessary. Many rehabilitation programs already assess such issues in great depth but do not offer a concise summary of functioning. Most areas addressed on the PDQ provide only a sketch of functioning as opposed to detailed analysis. Evaluators are encouraged to examine any factors that may impact upon vocational or personal independence.

Gathering and posting this information will provide details of the person’s pre-injury history, as well as the capabilities and skills that he/she possessed before the injury. Summarizing this information in a few paragraphs and keeping the Personal Demographic Questionnaire for later reference is suggested. Special attention should be given to Employment History and Job Goals since this was found to be another area that respondents had difficulties with in terms of providing accurate and detailed information. When completed in an accurate and thorough manner, job history can be examined and a transferable skill analysis can be initiated.

Following the completion of the Personal Demographic Questionnaire, the Personal Demographic Interview (PDI) can be completed. This can be done on the same day, or on a
subsequent day. The order of completion of these two instruments is not as important as the fact that thorough and complete information is obtained. In some cases, the evaluator may find it more useful to complete Profile B prior to Profile A, especially if the completion of the PDI is an integral part of the intake process. The two measures assess different types of personal characteristics.
Profile B

Personal

Demographic

Interview
Profile B—Personal Demographic Interview

The Personal Demographic Interview (PDI) is a structured interview designed to assess a person’s perceptions of changes in his/her behavior, as well as a comparison of significant others’ responses to the same items. This procedure allows the interviewer to assess a person’s self-appraisal in relation to another person’s point of view and to identify potential problems insofar as variations in perceptions between the person with the head injury and his/her significant other.

The Personal Demographic Interview involves asking respondents a number of open-ended questions regarding characteristics such as ability to learn new information, memory, emotional status, alcohol and drug abuse, etc. A three-point rating scale is used to document comments of both the significant other as well as the person with the head injury. A comment section is also available to provide additional information if necessary. This process was designed to examine attitudes and to process sensitive material in the give and take of a personal interview. Although numerical ratings are posted, it is the attitude and reaction of the interviewees that are the primary foci of this process. In some cases, this interview may be able to be completed in a few minutes, and in other cases it may take an extended period of time, perhaps up to an hour. The differences in time needed to complete this process will depend on the skills of the interviewer, the agreement that already exists between the person with the head injury and his/her significant other, and his/her ability to process this type of sensitive material.

The interviewer should be aware of the fact that this interview may be perceived as threatening, and at times counseling may be necessary to disarm any defensive attitudes that begin to emerge. With experience, the interviewer will be able to process this information in a sensitive and caring manner and should be able to gain insights into the nature of the opinions of both the person with a head injury and his/her significant other regarding changes and behaviors that either or both have noticed. The PDI compares the person’s opinion of functional consequences of the injury to that of a reliable significant other in terms of:

- Learn and recall new information
- Prospective memory
- Ability to plan, carry out, and self-monitor activities
- Initiative to independently start and complete tasks
- Speed of thinking and responding and processing of information
- Emotional status
- Sensitivity to light, noise, others, etc.
- Alcohol and drug use
- Social and interpersonal skills
- Emotional tolerance to stress
- Relationship to family members and close friends
- Physical and emotional endurance
- Physical skills necessary for work, play, and self-care
- Potential for job placement or return to a former job
- Pre-injury skills and ability as related to employment
- Hobbies and spare time activities related to work potential
Sources of Additional Background Information. In order to get a good idea of the nature of pre-injury characteristics and skills, it is often necessary to examine records and information from a variety of sources. Additional sources of such valuable information may include high school, college, and technical school records and transcripts; hospital treatment and discharge summary reports; therapist summary reports; neuropsychological evaluations; work history; and chronology of specific training, including military training and experience.

Similarities and Differences in the Personal Demographic Questionnaire and Personal Demographic Interview. The Personal Demographic Interview was designed to be used solely in a face-to-face interview. Both the Personal Demographic Questionnaire (Profile A) and the Personal Demographic Interview (Profile B) will typically be completed by the same informant and reviewed by the same interviewer. Whereas the PDQ documents data from history as well as present problems, the Personal Demographic Interview will engage the person with a head injury (and when possible a significant other as well) in a dialogue to discuss the effects of the head injury on day-to-day functioning and adaptive skills.

The information accumulated from both the Personal Demographic Questionnaire and the Personal Demographic Interview is not intended to take the place of diagnostic or evaluative reports, but rather to summarize the viewpoint of the person with the head injury and/or his/her family or significant other. The most difficult information for the person with the head injury or the family member to provide frequently are the data regarding accurate estimations of coma and post-traumatic amnesia periods (requested on Profile A—The Personal Demographic Questionnaire). The remainder of the information in both profiles is typically easy to ascertain.

On both Profiles A and B, respondents are asked to provide information regarding their relationship with the person being rated, the date that information was collected, and the target job goal of the person. In some cases, this information is collected directly from the person with the head injury. Generally speaking, family members or significant others can readily supply the majority of all information requested.

Some of the evaluators in the pilot sample found it useful to present the Personal Demographic Questionnaire to the family member and have him/her return it later, while others found it necessary, in certain instances, to ask each question in the person's presence. When the family member is not available and the person must supply his/her own information, the data collected are also useful, although there is no comparison group for examination of the accuracy of self-appraisal, and in cases where individuals may not be accurate historians such information may be misleading. Typically the process of briefly reviewing the Personal Demographic Questionnaire with respondents and allowing them to complete it on their own time is the most efficient way to gather this information. It is useful to review the information that they provided in their presence, so information that otherwise would be inadvertently overlooked can be addressed. For some individuals, questions may need to be read to them. It is useful to train a paraprofessional aide, clerical worker, or intake assistant to administer the Personal Demographic Questionnaire and to respond to questions that respondents may have. This may involve explaining some of the esoteric terms described under cognitive or medical problems or other information such as what constitutes a coma or amnesia period as identified in Items 21 and 22. By contrast, the PDI should be completed in an interview and not given out to be completed independently. By having people respond spontaneously, the interviewer is more likely to solicit a more accurate and reliable opinion of both parties.
Profiling Clinical Background Information

After securing background information and reviewing information essential for future planning, this information needs to be compiled into an efficient usable format. Initial research in this area suggested that even though detailed background information is available, if it is not in a format that is easy to use, it may not be used. Roush (1989) examined evaluators’ opinions of the importance of background information such as physical and medical related data, sociologic and interpersonal skills, and neuropsychological variables. Of the various identified traits and abilities as well as functional skills examined, the majority of all evaluators reported that this was very important information for an evaluator to have readily available prior to initiating a vocational assessment. When evaluators were subsequently asked whether or not these traits, abilities, or behaviors were characteristic of a particular individual in vocational evaluation, many were unable to respond. This research implies that although there is often voluminous background information, it is difficult to access and use when developing a vocational evaluation plan or when developing compensatory strategies.

Profiles C, D, and E were developed to help the evaluator compile this information into a readily available source of data. It is suggested that the second step in the assessment process includes the completion of Profiles C, D, and E. All three profiles described in this section group data into predetermined factors that were identified on the basis of the factors structure of the data collected as established in previous research.
Physical Profile
Profile C—Physical Profile

The Physical Profile examines some of the common physical limitations encountered by persons who survive a significant brain trauma injury. This profile provides a means of identifying specific problems with physical aspects of a person’s functioning as well as an indication as to whether or not these perceived limitations may affect projected job goals.

The Physical Profile focuses upon issues related to the following physical functionings:

- Physical Capacity
  - Strength and stamina
  - Weakness/lifting limitations
  - Fatigability - endurance

- Movement Skills
  - Ambulation
  - Gross motor coordination
  - Facial muscle control
  - Range of motion/contractures
  - Paralysis/palsy

- Adroitness
  - Fine motor coordination
  - Dexterities (finger, manual, etc.)

- Sensory Perception
  - Pain perception
  - Numbness
  - Hot/cold/light touch sensation

- Sensory Systems
  - Vision system problems
  - Hearing (tinnitus, noise sensitivity)
  - Smell and taste
  - Balance/dizziness or vertigo
  - Hemi-spatial neglect

- Chemical Abuse
  - Prescription drugs
  - Alcohol
  - Street drugs
  - Other chemical abuse

- Chronic Pain Issues
  - Back or neck
  - Headaches
- General somatic complaints and fatigue
- Other pain problems
- Musculoskeletal problems

• Other Issues
- Diabetes
- Cardiovascular problems
- Respiration/breathing
- Skin conditions
- Hydrocephalus/shunting
- Swallowing
- Heterotopic ossification
- Awareness of body position in space
- Epilepsy
Profile D

Social-Emotional Profile

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Profile D—Social-Emotional Profile

The Social-Emotional Profile focuses upon issues regarding social adjustment, emotional stability, and other important variables in the person's interpersonal interactions with others in his or her environment. This profile provides a means of identifying the important characteristics associated with social interactions in a work environment. The Social-Emotional Profile was created to examine items found to be commonly related to difficulties on the job following a traumatic brain injury. Factors including social adjustment, emotional stability, activity level, chemical use, and intrusiveness in social situations are areas documented in this profile. Factors profiled include the following:

- **Social Adjustment**
  - Age appropriate maturity
  - Concern for others
  - Acceptable activity level
  - Social appropriateness/common sense
  - Accuracy of self-appraisal

- **Emotional Stability**
  - Temper/explosiveness
  - Anger expression
  - Apathetic attitude
  - Excessive complaints
  - Tolerance of minor frustrations
  - Appropriate emotions displayed

- **Intrusiveness**
  - Verbal aggressiveness
  - Physical intrusiveness/assaultiveness
  - Sexual appropriateness
  - Impulsive behavior or speech

- **Activity Level**
  - Spontaneity
  - Initiative to work
  - Isolation or withdrawal
  - Enthusiasm/drive
  - Appropriate activity level

- **Suspected Chemical Use Problems**
  - Prescription drug side effects
  - Alcohol related problems
  - Other substance abuse problems
Neuropsychological Profile
Profile E—Neuropsychological Profile

The Neuropsychological Profile focuses upon aspects of neuropsychological functioning commonly identified as potential problems for persons who sustained a significant brain trauma injury. Broad areas of neuropsychological functions are addressed, with the capability of further elaboration of problems in specific content areas within each of several behavioral domains. A wide range of variables frequently addressed by a neuropsychological examination is included within this profile.

The Neuropsychological Profile is often completed by a neuropsychologist or rehabilitation psychologist with specific training in brain injury rehabilitation. This information may also be provided by an individual familiar with neuropsychological functions who has such information available to him/her through specialty reports and through direct observations during the course of vocational assessment.

Traits typically assessed during a neuropsychological evaluation are examined with this profile as illustrated below:

- **Freedom From Distractibility**
  - Alertness
  - Vigilance
  - Attention and concentration
  - Mental calculation skills
  - Immediate verbal recall

- **Intellectual Verbal Factors**
  - General fund of information
  - Abstraction skills
  - Arithmetic reasoning
  - Vocabulary (word knowledge)
  - Common sense and social reasoning

- **Intellectual Performance Factors**
  - Visual organization skills
  - Perceptual organization and reasoning
  - Spatial relations - form perception
  - Attention to complex visual detail
  - Visual scanning skills

- **Immediate and Delayed Memory**
  - Auditory/verbal
  - Visual/nonverbal
  - Procedural/skill
  - Design or figure

- **Other Memory Skills**
- Prospective (future)
- Remote (historical)

- Communication Skills
  - Following verbal directions
  - Written expression
  - Goal directed speaking
  - Understandability of speech
  - Voice volume
  - Speaking vocabulary

- Psycho-Motor Skills
  - Simple assembly
  - Gross motor
  - Visual-perceptual-motor
  - Drawing and writing
  - Other fine motor skills

- Executive and Higher Order Skills
  - Planning and goal formation
  - Problem solving
  - Insightfulness
  - Decision making
  - Cognitive flexibility
  - Anticipation of problems
  - Self-regulation
  - Self-awareness
  - Information processing speed
  - Awareness of limitation
  - Judgment

- Other Cognitive Variables
  - Perseveration tendencies
  - Hemi-spatial neglect
  - Inattention (auditory, visual, tactile)
  - Tactile object and shape recognition
  - Mental flexibility
  - Stimulus bound behavior

- General Mental Health Issues
  - Confused thinking
  - Unusual content or form of thought
  - Self-centered or childlike behaviors
  - Disinhibition

- Affective Mental Health Issues
  - Depression, dysphoria
- Anxiety or panic feelings
- Emotionally lability
- Manic, hyperactive, or hypomanic

• Psychotic Mental Health Issues
- Auditory or visual hallucinations
- Suspicious, guarded or paranoid behavior
- Delusions or overvalued ideas

• Maladaptive Personality Variables
- Antisocial tendencies
- Pervasive behavior dyscontrol
- Passive, obsessive, or compulsive features
- Borderline or histrionic features
- Other personality disturbances

Profiles C, D, and E are organized in a similar manner as described below. Each profile requests a person with a background and knowledge in each of the particular traits and factor areas to complete the Profile in light of problem areas that may exist. A general rating is given as to whether or not a problem area appears to exist, as well as a job-specific problem rating, which assesses the particular areas identified against a specific job goal identified on the cover sheet. Raters are asked to provide general ratings for each area as to whether or not a behavior trait or functional skill (a) is within normal limits, (b) presents a minor problem, or (c) presents a notable problem. The rater is further asked to respond with a yes or no response as to whether or not a particular trait will also affect job performance on the specific job identified as the targeted goal on the face sheet.

Ratings of General and Job Goal Related Traits. Under the general rating, the three categories listed below are defined for purposes of identifying the nature and extent of the problems that appear to exist. For example, on the Physical Profile form, raters are instructed to provide a general rating for all eight physical trait categories listed starting with "physical capacity" and ending with "other issues." Raters are asked to provide a general rating of each category using the criteria listed below:

Within Normal Limits. Problems rarely occur, are of no consequence, or have been corrected by use of an aid or appliance (e.g., glasses, hearing aid). If orthotic appliances or aids are used, comments are required.

Minor Problem. Problems are evident that may affect vocational, social, or personal adjustment. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect vocational, social, or personal adjustment. These problems should be documented on the Intervention Strategies Worksheet.

The evaluator is requested to place a check mark next to each of the specific physical
traits in the case that contributed to a rating determined as not within normal limits. In some cases, a rater may also wish to comment on specific items under each trait. Some raters prefer to identify each of the specific descriptors listed under each trait as being within normal limits, having a minor problem, or notable problem. For example, on the Physical Profile form, under the general category of physical capacity, some raters may wish to list strength and stamina as within normal limits, whereas they may wish to identify a weakness or lifting limitation as being a notable problem, with a comment that because of back problems a lifting limit of 25 pounds is recommended. If the targeted job goal does not require lifting of this nature, the job specific problem category may be rated as "no" (problem), indicating that no specific problem on that job is anticipated.

**Identifying Strengths and Assets.** On Profiles C, D, and E, variables that may serve as relative strengths or assets should also be identified. After completing each profile, the rater is asked to go back through the list of the traits listed in bold that are preceded by a number (for example under physical traits, physical capacity, movement skills, etc.) and place an "S" before any variable that may be viewed as a strength or asset for consideration in vocational planning. These areas of relative strengths or assets should also be identified on the Intervention Strategies Worksheet that is at the end of Profiles C, D, and E. Evaluators are asked to elaborate on strengths and suggest how they may be used to compensate for problems, or how any particular strength area could be highlighted when discussing this individual with employers. The comment section of each profile is probably the most important portion of the profiling form, since this will identify and detail specific functional limitations or assets that may affect a person's job goals and general work productivity.

The final section for Profiles C, D, and E includes an Intervention Strategies Worksheet on the last page of each profile. Evaluators are asked to list any areas that were identified as a minor or notable problem and are advised to describe the potential impact of the problem on a targeted job goal or work in general. Specific compensatory strategies to minimize negative effects are also asked to be detailed. When Profiles C, D, and E are being completed, the problem areas and strengths should be readily identified, and the impact on potential jobs should be able to be estimated. Sometimes it is necessary to go to other sources to identify strategies to minimize negative effects and develop compensatory strategies. Team meetings and feedback sessions often can add insights to compensatory strategies that may be of value. In any case, strategies that are suggested should be thoroughly explored to determine feasibility.

The evaluator should offer concrete suggestions and interventions likely to work rather than "pie in the sky" solutions to problem areas. Suggestions should be as specific as possible and not generic. General comments such as "refer to work adjustment training to address problems in the area of verbal aggressiveness or physical intrusiveness" are not specific enough. Whenever possible, identification of specific interventions likely to be effective with an individual should be suggested. If the evaluator has been unable to identify specific interventions or compensatory strategies, other available resources should be considered. For example, referral to an applied behavior analyst to identify strategies for dealing with problems associated with social intrusiveness may be a means of developing a specific behavioral program when the evaluator is at a loss for identifying specific behavior intervention strategies.
Intake and Assessment Planning

The intake interview should be completed at the time that information for Profiles A and B is collected. It may be necessary to complete the profiles before or after the interview depending on the nature of the specific program structure. In the course of intake planning, it is wise to obtain a working commitment from the person referred for vocational assessment and to have that person identify the purpose of the vocational assessment. If an evaluation referral is unable to identify a reason to complete the assessment or is unwilling to make a commitment to follow through with the assessment, the evaluator is placed in a difficult position of planning an assessment for an individual who may be unmotivated, uncooperative, or unwilling to participate at all. See Thomas (1990, p. 114) for further details of suggestions for obtaining working commitments and gaining behavioral compliance in vocational assessment. Actively involving the person in all phases of decision making during the evaluation should not add time or effort on the part of the evaluator but requires flexibility on both sides.

Formalize and Operationalize Referral Questions

At the time of a referral, many evaluators find it useful to identify specific questions to address during the course of a vocational evaluation. When using the Vocational Assessment Protocol it is suggested that the evaluator specify such questions at the onset of an assessment and develop a prescriptive approach to address referral questions. During the course of the validation of the Vocational Assessment Protocol, it was found that revisiting the referral questions is important at some point before the evaluation is completed. For example, a referral question may be stated in a general sense such as "Does this person have the ability to return to a specific job?" or "Can you identify compensatory strategies and rehabilitation needs prior to a return to work?" After completing a background information review and completing Profiles A through E, it may be apparent that the referral questions need to be rephrased. Operationalizing the referral question in a manner that is as specific as possible will allow the evaluator to be more prescriptive in the manner that the evaluation process is designed. For example, a question from the referral source may be simply "Can John work competitively?" After reviewing background information and speaking with John, the evaluator may learn that he has a 15-year work history at the same company, which is willing to try him at his former job. The evaluator may wish to operationalize the referral question in conjunction with the referral source to read "Can John return to his former job as a punch machine operator at ABC Company, working 40 hours per week? If so, what job modifications or compensatory strategies may make a transition back to this job be more efficient?"
Step 5

The Intake Interview

During the intake interview, it is suggested that the evaluator develop an assessment hypothesis to determine the type of evaluation that will be pursued. Typically, when an evaluation unit is established to begin to assess persons with traumatic brain injury, a wide range of referrals including individuals with a minimal functional disability and those with severe and pervasive problems will be received. For this reason, it is important for evaluators to consider various types of assessments that may be necessary based upon referral questions and existing functional limitations.

The following types of prevocational assessments are suggested for consideration for use with persons who have sustained a traumatic brain injury. This listing is offered as a means of conceptualizing a type of assessment that may be required for any individual, and any one vocational assessment may include one or more of the following:

1. **Formalized testing.** Includes neuropsychological testing and specific vocational testing of achievement, aptitude, and vocational interests.

2. **Traits and abilities testing.** Includes dexterity tests and work samples that attempt to examine a particular factor or trait such as gross motor coordination or fine assembly skills.

3. **Safety evaluation.** An assessment of one's safety awareness and ability to work safely around machinery or hazardous materials. A safety evaluation, if needed, should be conducted in a simulated situation prior to placement on a job.

4. **Behavioral assessment.** An assessment of interactions with other workers and documentation of behaviors that may interfere with social adaptation or on-the-job functioning.

5. **Environment analysis.** A job analysis and a content task analysis of specific duties are usually performed. An appraisal of co-workers' behaviors and the immediate work environment is essential to consider to determine how the person will fit in with the existing environment.

6. **Functional assessment.** A description of a person's ability to perform the basic skills necessary for community integration. Factors assessed include an appraisal of social interactions, use of public transportation, and the ability to adapt to changing environments. This may include an assessment of a person's ability to access toilet facilities, obtain food, and secure medical help if necessary.
**Step 6**

Initiating the Evaluation

It is suggested that, when initiating the vocational assessment while using the Vocational Assessment Protocol, a controlled situation such as a vocational evaluation laboratory be used at the onset to assess traits such as behavioral skills and interpersonal relations, dexterity and motion skills, activities of daily living, achievement, aptitude, and motor skill related abilities. This is suggested particularly for people with significant functional limitations secondary to brain trauma injuries. Most vocational evaluation programs provide for such an environment, while some have adopted total community-based assessment approaches, which make it more difficult for dealing with individuals who have an acquired brain injury and numerous functional limitations and problem areas. Getting to know the person in a structured setting such as a vocational evaluation laboratory will help to anticipate safety problems, learning style, and interpersonal skills in a controlled environment. This will provide a good starting point from which to build further assessment strategies for the remainder of the evaluation.

**Step 7**

Identifying Vocational Interests and Work Needs

Near the beginning of the vocational evaluation, the exploration of vocational interests and work needs is an important consideration. Although the Vocational Assessment Protocol does not provide for a means of conducting vocational interest testing and work needs assessment, it requires that individuals identify specific vocational goals and encourages the development of alternative job goals, both long- and short-term. Vocational interest measures are useful for identifying areas of potential vocational involvement if specific vocational goals are not specified.

Defining Work Interests. When a person is undecided about vocational goals and vocational interest testing is not productive, it may be wise to use other means of exploring interest patterns, including examining hobbies and interests and past work histories. Encouraging the perusal of a Sunday newspaper want ad section is suggested in order to determine which specific jobs listed are of interest, to explore what the person finds important in a job, and to ask what about a given job is attractive to him/her. Asking an individual to go through a large metropolitan Sunday newspaper and to circle jobs of interest solidifies knowledge of jobs available in the community and allows him/her to explore the traits, behaviors, and skills required for specific jobs.

Occupational Exploration. Occupational exploration is often a valuable process for persons who have had limited vocational experience, as may be the case with young persons who are brain injured. One method of expanding knowledge of work is job shadowing. By asking the client to follow a person who is working at a particular job he/she is interested in for short periods of time, perhaps two half days, first-hand knowledge of job demands can be examined.
Encouraging individuals to participate in informational interviews of persons working in jobs they consider as desirable and of interest to them is a way to spark the interest of persons who lack vocational direction. Certainly some reality counseling may be necessary depending on the loftiness of one’s vocational goals, as may be the case with any young and unexperienced individual wishing to enter the labor market.

**Vocational Counseling.** Vocational counseling is an essential part of any vocational evaluation. The results of initial testing can be reviewed and discussed; job goals and alternatives can be addressed and other issues explored as a focal point of the vocational assessment process. At this point in time, the vocational decision-making process can be broadened and persons can be asked to define what they feel are important job delimiters. Job delimiters, as described by Thomas (1988), include such factors as the minimum wage that a person is willing to accept; the benefits he/she will need in a particular job; and the working hours, location, and any other factors that may limit the availability of jobs in a particular area. Certainly the individual who only wants to work in a hospital setting during day time hours with weekends off and with full benefits for $10 an hour will be more limited than the one who does not set as many restrictions or delimiters insofar as workplace, type, salary range, etc. Setting delimiters does not necessarily limit the employability of the individual or his/her capacity to secure specific employment. It can, however, give the vocational specialist ideas of what the person would like to see in an ideal job and can foster discussions as to what may be expected on an initial job placement or return-to-work trial.

**Step 8**

**Situational Assessment and Job Search**

Since the functional skills profiles included in Profiles F through I require observations in a number of structured and simulated situations, it is important to begin planning for these arrangements early in the vocational assessment process. When immediate and long-term vocational goals have been identified, potential assessment sites in controlled situations can be defined and organized, and community-based assessment or work trial sites can be explored.
Job Search Skills

Profile
Profile F—Job Search Skills Profile

The Job Search Skills Profile (JSSP) assesses variables identified as critical to independent job seeking success. Information of this nature is typically gathered either through direct observation or from a structured interview that focuses upon each of the critical factors examined by this profile.

The Job Search Skills Profile employs a means of examining job search skills, originally developed for use with the Vocational Adaptivity Scale (VAS). See Thomas (1983 & 1988) for full details. In the present version of the Vocational Assessment Protocol, the interviews and methods of collecting this information include the process and procedure described below. The Job Search Skills Profile allows the evaluator to assess whether the examinee:

- Identifies reasonably obtainable job goals
- Is able to produce typed letters for employment search
- Demonstrates knowledge of how to make initial employer contacts
- Demonstrates knowledge of how to comprehensively canvass the community to search for employment
- Is able to track job leads and employer contacts for follow-up
- Plans on spending an adequate and consistent effort in searching for employment
- Is able to provide the names, addresses, and phone numbers of personal and work references
- References can support the fact that the person possesses the skills and abilities to perform targeted job goals upon request
- Can describe disability or limitations in a functional and nonstigmatizing manner
- Has access to reliable transportation to interviews and work

Purpose. The Job Search Skills Profile is designed to provide a structured approach to evaluating a person’s knowledge of information considered essential to conducting an effective job search. The Job Search Skills Profile can be modified if necessary to help guide the interview with each person. With an interviewer’s experience, ratings can be completed during the interview; however, the interviewer may find it more convenient to complete the ratings immediately after the interview is concluded. The rating scale items in the boxes as illustrated on the following pages correspond to an item with precisely the same wording and numbering sequence on the Job Search Skills Profile sheet. As raters are learning to use this profile, they are encouraged to follow the process described below, posting the information from the shaded boxes to the profile only after all information is compiled. This is important because, in certain cases, ratings may come from more than one source, requiring the person completing a composite profile to make a final rating decision on the basis of information from several sources. The purpose of this assessment is to evaluate the person’s knowledge of only job search skills. Job interviewing skills are examined in a subsequent profile.

Procedure. This interview should be conducted in a distraction-free room and in the manner in which an actual job interview would be conducted. Making arrangements for this interview a day or more in advance is recommended. In addition to collecting information about a person’s knowledge of job search skills and strategies, this interview can serve as a means of
desensitizing the person to the fears and discomfort frequently encountered during an interview. The evaluator is encouraged to follow the Profile as written. However, clarification of points that are unclear is encouraged. If the evaluatee is unable to comprehend the questions as stated, further explanation or rephrasing in other terms may be needed. [NOTE THAT SPECIAL INSTRUCTIONS TO THE EXAMINER WILL APPEAR IN ALL CAPITAL LETTERS FOR THE INTERVIEW SECTION WHICH FollowS, AND SCRIPTED LINE TO BE READ TO EACH EXAMINEE APPEAR IN "BOLD" AND IN QUOTES AS IN THIS EXAMPLE.]

Job Search Skills Strategies. Begin by informing the evaluatee, "I have a few questions to ask you about how you intend to search for a job. Please answer these questions as accurately and honestly as you can. Let's begin." EXAMINERS SHOULD ENCOURAGE PEOPLE TO PROVIDE AS MUCH DETAIL AS IS NECESSARY TO ASSESS THE TRAITS IN QUESTION. QUESTIONS TO CLARIFY OR ELABORATE AS NECESSARY ARE ENCOURAGED.

A. "What are your immediate and long-term job goals?"

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<tr>
<th>List: Immediate Job Goals</th>
<th>Long-Term Job Goals</th>
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JSSP-1. Identifies reasonably obtainable job goals

B. "When looking for the type of job that you are interested in, you may need to type letters or other papers. Are you able to type letters, applications, or a resume, or is there someone who can do this for you?" Before rating this item, request the person to supply you with a sample of a job inquiry letter or follow-up letter. Evaluators may wish to ask the evaluatee to bring a sample of typed correspondence to this interview rather than making this an assignment that requires follow-up by the evaluator. If another person is to be used to assist in letter preparation or typing, this should be noted in the comment section.

39
JSSP-2. Is able to produce typed letters for employment

C. "Describe the steps that you would go through to find a job and contact potential employers."

JSSP-3. Demonstrates knowledge of how to make initial employer contacts

JSSP-4. Demonstrates knowledge of how to comprehensively canvas the community to search for employment

D. "How do you plan to keep track of employer contacts and job leads?"

JSSP-5. Is able to track job leads and employer contacts for follow-up

E. "How much time do you intend to spend looking for work?" Request descriptions of the number of hours per day and the days per week that will be spent looking for work. Many employment specialists will argue that it may require 30 to 40 hours per week or more to conduct an effective independent job search. If the person is receiving job leads or assistance from an employment specialist, the time involvement may vary.

JSSP-6. Plans on spending an adequate and consistent effort in searching for employment
F. "Can you tell me the names, addresses, and phone numbers of three personal and two work references?"

(Check ✓ if appropriately given)

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<tr>
<th>List: Personal References</th>
<th>Work References</th>
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<td>Name/Address/Phone</td>
<td>Name/Address/Phone</td>
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(Note: It may be necessary for these references to be contacted by telephone if a letter is not on hand supporting their recommendations of the person's work ability and character.)

JSSP-7. Is able to provide the names, addresses, and phone numbers of personal and work references upon request.

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<th>w/Normal Limits</th>
<th>Minor Problem</th>
<th>Notable Problem</th>
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JSSP-8. References can support the fact that the person possesses the skills and abilities to perform targeted job goals.

G. "Tell me about your limitations and how these may affect your work."

JSSP-9. Can describe disability or limitations in a functional and nonstigmatizing manner.

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<tr>
<th>w/Normal Limits</th>
<th>Minor Problem</th>
<th>Notable Problem</th>
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</table>
H. "Do you have reliable transportation to and from the job? Explain."

JSSP-10. Has access to reliable transportation to interview and work

End the interview by stating "I don’t have any further questions. Would you like to ask any questions of me?" At this point, review two positive items about his/her participation in this interview and offer one or two suggestions describing how the person may improve his/her job search strategy. A complete review of all items with the evaluatee is recommended after the interviewer has had the opportunity to score all items.

Use the space on the worksheet for notes and comments. Since this profile is not intended for use as a report, it may be used for anecdotal notes, comments, etc., that may or may not appear in the comment section. You therefore may wish to note first impressions or hunches about problems for future reference. It is helpful to review comments and underline important notes for future consideration. Place all confidential notes on this page and attach this to the personal records if desired.

The Job Search Skills Profile identifies not only knowledge of the types of work that the person would like to get involved with but also the means of identifying locations to search for such jobs. Means of making initial job contacts and organizing the search are also explored. If it is found that skills are deficit or lacking in these particular areas, the need for specific job-seeking skills training may need to be considered.

Skills Profiling. After the interview has been completed to obtain the necessary information, the Job Search Skills Profile (Profile F) can be completed. The actual interview may be completed by a vocational evaluator or other source and provided to the evaluator for further documentation. The information collected on the interview format can then be transferred to the Job Search Skills Profile for easy reference and review. As with the other portions of Vocational Assessment Protocol, the three-point rating system of "within normal limits," "minor problem," or "notable problem" is used along with the strategy of identifying strengths and assets. Unlike the previous sections of the Vocational Assessment Protocol, the Job Search Skills Profile identifies specific job-seeking preparatory behaviors and is not categorized into groups of related behaviors. In the factor analysis completed during the initial validation of the Vocational Assessment Protocol, the behaviors listed under job search skills all contributed to a single factor, and therefore each of the behaviors is identified separately rather than grouped under subheadings as Profiles C, D, and E have been.
Interviewing Skills Profile
Profile G—Interviewing Skills Profile

This section of the Vocational Assessment Protocol, the Interviewing Skills Profile, includes 16 variables related to a person’s ability to interview for employment. Social-adaptive and interpersonal relationship skills are examined, through direct observation or through mock or real job interviews. Below are the skills and behaviors assessed using this profile:

- Uses telephone to inquire about jobs
- Uses appropriate telephone demeanor and language
- Arrives on time, presents self adequately, and waits appropriately before the interview
- Has a well organized, neatly typed resume that reflects previous training and work experience
- Can independently fill out job application neatly and completely
- Enters the interview appropriately and demonstrates good initial impression
- Demonstrates an assertive and purposeful personal approach (e.g., eye contact, firm handshake) without being overbearing
- Expresses a general knowledge of the job and the company in which employment is sought
- Positively relates background, training, and/or work experience as a qualification for the intended job
- Avoids making negative remarks about present or former employers
- Answers open-ended general questions
- Explains employment difficulties appropriately (e.g., past employment problems or gaps in employment history)
- Deals with sensitive material or problem areas in a positive, constructive manner
- Can appropriately request information on wages and benefits
- Has the ability to keep pace and place in the interview
- Demonstrates courtesy and thanks the interviewer(s)

Purpose. The Interviewing Skills Profile (ISP) was developed to assess a person’s ability to participate in the give and take of a job interview. The process and procedures are described below.

Procedure. The first portion of this profile is used to evaluate telephone use skills in employment related matters. The interviewer should play the role of an employer while the evaluee is required to speak to him/her about possible job openings. The interviewer will then rate items A through F on the rating form. Two telephones in separate locations are necessary for this assessment. Pretending to speak on a telephone in order to complete this process may invalidate this procedure and is not advised. Experience with this technique suggests that using a confederate other than someone known to the evaluee adds more realism to this process and is likely to produce the best results.

It is essential that the person being evaluated understands the concept of a role-play prior to the time that the call is made. Do not discuss the purpose of this role-play on the telephone.

Telephone Inquiry. The examiner begins by informing the evaluee "I want to see how
well you are able to use a telephone to search for job openings," and asks him/her to "take a few minutes to think about what you want to say." OFFER A PENCIL AND PAPER and STATE: "Tell me when you are ready to make the call." Inform the evaluatee that "When you are on the telephone you should ask to speak to whomever you would normally ask for in such a telephone call, but in reality you will be speaking to me because I (or the person selected to play the role of the employer) will be acting out the role of the person that you are calling." When contacted on the phone the evaluator should make a statement such as, "Hello, this is the (ABC) Company; may I help you?" From that point on let the evaluatee set the scene for how the conversation will go. The evaluator's role must be taken very seriously in order to obtain valid estimates of telephone use skills. Make notes on each of the points below, using this information to rate items A through F.

If a person unknown to the evaluatee will be completing the rating, this person should receive the rating sheet and specific instructions from the evaluator regarding the role-play in advance.

Though it is not part of this Protocol, the evaluator may also wish to ask the person to use a telephone to call in sick for work or to inform an employer that he/she will be late for work. An employee's telephone demeanor and ability to use a telephone for this purpose may be critical to job success.

<table>
<thead>
<tr>
<th>Use of the Telephone</th>
<th>✓ if Present</th>
<th>Notes</th>
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<tbody>
<tr>
<td>A. Introduces self</td>
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<td></td>
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<tr>
<td>B. States reason for call</td>
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<tr>
<td>C. Inquires about openings and if the company is accepting applications</td>
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<tr>
<td>D. Appropriately requests a time to see interviewer for either a job interview or review of application and employment opportunities</td>
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<tr>
<td>E. Receives:</td>
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<tr>
<td>1. Name of interviewer</td>
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<td>2. Time</td>
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<td></td>
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<tr>
<td>3. Location</td>
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<td></td>
</tr>
<tr>
<td>F. Thanks interviewer</td>
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Comments:
The next portion of the Interviewing Skills Profile is intended to provide a measure of a person's job interviewing skills. These skills include both pre-interview behaviors such as those that occur while waiting for the interview as well as behaviors that occur during a community-based interview. In order to standardize the procedure, this section includes a script to follow for setting up and conducting this portion of the assessment. The introductory remarks may be changed, but the specific interview questions should not be changed. If a person is unable to understand the questions, the interviewer should then feel free to paraphrase the questions or explain the intent of the questions.

At least two people should be involved in assessing interviewing skills, both of whom will use the same form for rating behaviors. Normally a simulated interview in a controlled setting will occur first, followed by an interview with a community employer. Sites for interview assessments with employers in the community need to be developed well in advance to ensure their availability when needed. When interviewing arrangements are made with a cooperating employer, the employer should be informed that he/she will need to set aside a 20-30 minute block of time to interview each person.

NOTE: The evaluator may wish to ask that a business person from the community perform this mock interview and provide feedback. If this method is used, a thorough explanation of all rating scale items should be provided to each interviewer before he/she attempts to use the form. Explain each item to each new interviewer and be prepared to answer questions on any items that may be unclear. This will help to verify that the interviewer thoroughly understands how to rate each item and how each behavior will be assessed.

Application and Waiting for the Interview. This part of the Interviewing Skills Profile involves an evaluation of pre-interview behaviors. It is intended to assess the ability to fill out a job application form, state the reason for coming to the company, and to act appropriately while waiting for the interview. THERE ARE NO SPECIFIC QUESTIONS ASKED DURING THIS PART OF THE ASSESSMENT. This section may be filled out by the secretary or receptionist.

Procedure. The evaluatee is given the location, time, and interviewer's name. They should also be informed that they will be required to complete an application before the
interview and that a resume is required. If the person is unable to independently complete an application, arrangements should be made to pick up an application ahead of time, complete it with assistance, and bring it to the interview along with a resume. To complete this section, simply check items A-H if adequate and note any comments. Later, rate items ISP-3, ISP-4, and ISP-5 using the information in items A-H, the application, and resume as a basis for ratings.

### Waiting Room Behavior and Presentation

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<th>Notes</th>
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**A.** Arrives on time for interview

**B.** States name to secretary or receptionist

**C.** States intent of visit

**D.** Fills out application completely, accurately, and neatly

**E.** Appropriateness of:

1. **Dress**
2. **Grooming**
3. **Hygiene**

**F.** Waits appropriately

**G.** Brings resume that is well organized and neatly typed

**H.** References support the person’s work readiness

**Comments:**

**ISP-3.** Arrives on time, presents self adequately, and waits appropriately before the interview

**ISP-4.** Has a well organized, neatly typed resume that reflects previous training and work experience

**ISP-5.** Can independently fill out job application neatly and completely

**Entrance to the Interview.** To assess the behaviors associated with this part of the
interview, the interviewer should GREET THE PERSON WITH A STATEMENT SUCH AS "My name is Mr. or Mrs. (Interviewer)." ALLOW TIME FOR THE PERSON TO IDENTIFY HIM/HERSELF WITHOUT PROMPTING. ASK FOR CLARIFICATION if he/she does not state the intent of the visit or do not state that he/she has arrived for an interview as scheduled on the telephone or does not state the job for which he/she is applying.

<table>
<thead>
<tr>
<th>✓ if Adequate</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Assertively enters room</td>
<td>☐</td>
</tr>
<tr>
<td>J. Introduces self</td>
<td>☐</td>
</tr>
<tr>
<td>K. Offers firm handshake</td>
<td>☐</td>
</tr>
<tr>
<td>L. Acknowledges reason for meeting</td>
<td>☐</td>
</tr>
<tr>
<td>M. Offers appreciation for interview opportunity</td>
<td>☐</td>
</tr>
<tr>
<td>N. Sits with interviewer appropriately after introduction</td>
<td>☐</td>
</tr>
</tbody>
</table>

Comments:

ISP-6. Enters the interview appropriately and demonstrates good initial impression

ISP-7. Demonstrates an assertive and purposeful personal approach (e.g., eye contact, firm handshake) without being overbearing

Job Interview Behavior. FOR THE REMAINDER OF THE INTERVIEW, USE THE QUESTIONS AS THEY APPEAR ON THIS FORM, OR PARAPHRASE TO ELABORATE ON THE QUESTIONS IF IT IS APPARENT THAT THE PERSON DOES NOT UNDERSTAND THE QUESTIONS. THE INTERVIEWER SHOULD MAKE BRIEF NOTES USING THE SPACE BELOW EACH QUESTION. WHEN THE INTERVIEW IS COMPLETED, USE THE NOTES AS A GUIDE IN MAKING YOUR RATING ON THE INTERVIEWING SKILLS PROFILE.

If it is possible, use a videotape recorder to make a recording of the entire interview, and review the interview prior to making your ratings. Before the interview is started, either the
interviewer or another person should INFORM THE PERSON THAT THE ROLE-PLAY WILL START AS SOON AS THE PERSON KNOCKS ON THE INTERVIEWER'S DOOR. This is critical for setting the mood for the mock interview when actual employers are used. The interviewer may engage in casual conversation at the onset of the interview to put the evaluatee at ease. However, it is recommended that question "A" be presented as soon as possible. Limiting other conversation during the course of the interview or delaying such talk until the interview is officially closed is also encouraged. BEGIN THE INTERVIEW BY ASKING THE QUESTIONS IN BOLD PRINT. USE THE INFORMATION OBTAINED TO RATE THE ITEMS IN THE BOXES IMMEDIATELY AFTER THE INTERVIEW IS COMPLETED.

A. "Tell me what you know about this job."  
   "Do you know what a (name of position) does?"

B. Why are you applying for this position?"

C. "What do you know about this company?"

ISP-8. Expresses a general knowledge of the job and the company  
in which employment is sought .........................................  

ISP-9. Positively relates background, training, and/or work  
experience as qualification for the intended job .................  

D. "Do you have any prior training or work experience that may help you on this job?"

ISP-10. Avoids making negative remarks about present or  
former employers ..........................................................

E. "How did you get along with your previous employers?"
F. "What activities do (did) you enjoy in school?"

G. "What types of things do you do in your spare time?"

H. "Tell me a little about yourself."

I. "Explain any difficulties you may have had in your prior work experiences that may come up when we check your references."

J. "What are your goals for the future?"

ISP-11. Answers open-ended general questions
ISP-12. Explains employment difficulties appropriately (e.g., past employment problems or gaps in employment history)

K. "What are two of your strong points and what is one of your weak points?"

L. "Are there any special problems we should know about you that may affect your ability to perform the job?" If the person identifies a problem (e.g., disability, temper, etc.), ask "How may this problem affect you ability to work?"

ISP-13. Deals with sensitive material or problem areas in a positive, constructive manner

M. "Do you have any final questions regarding this position or the company?" Note that until this point in time, information regarding wages, benefits, etc., have purposely been omitted from the discussion, in an attempt to determine how the person will approach this issue. Whenever possible, relate information regarding the typical or actual wages and benefits for the job that he/she is considering. If this is a role-play, the interviewer will
need to be prepared to discuss hypothetical wages, fringe benefits, and duties that are reasonable considering the targeted job goal. If the interviewer does not have this information, a reasonable estimate of typical wage and benefit information should be given to the person to prepare them for this part in the interview. If the person does not request the information, the interviewer can cover this information any way or simply go on with the concluding remarks.

ISP-14. Can appropriately request information on wages and benefits .................................................................

Concluding Remarks. Conclude the interview by stating "I do not have any further questions at this time, but I have a few comments on the interview." MAKE A FEW BRIEF STATEMENTS DESCRIBING POSITIVE ASPECTS OF THE INTERVIEW, FOLLOWED BY A BRIEF COMMENT OR TWO ABOUT AN AREA TO WORK ON. END THE INTERVIEW ON A POSITIVE NOTE BY COMMENTING ON ANOTHER POSITIVE ASPECT OF THE PERSON'S INTERVIEW AND INFORM HIM/HER THAT HE/SHE IS FREE TO LEAVE.

Comments Regarding Role-Played Interviews. The interviewer should stop the role-play when the interview is completed. This can be done by announcing "The role-play is over" followed by a remark such as "You did a nice job." Allow the person a few moments to recover from the interview and save critical comments for later. If an actual employer is completing this phase of the assessment, the remarks about the interview being a role-play are not necessary. WHEN THE INTERVIEW IS COMPLETED, RATE THE ITEMS IN THE BOX BELOW.

ISP-15. Ability to keep pace and place in the interview .................................................................

ISP-16. Demonstrates courtesy and thanks the interviewer .................................................................

As was done in the Job Search Skills Profile, the information collected during the Interviewing Skills Profile will be summarized on Profile G for ease of documentation and recording. This again uses the three-point rating system of within normal limits, minor problem, or notable problem as well as the strengths and assets section and the interviewing intervention...
strategies worksheet. Again the vocational evaluator may complete this portion of the Vocational Assessment Protocol on his/her own or may have a confederate complete this information. During the course of the pilot study and the field validation of the Vocational Assessment Protocol, it was found that behaviors explored in both Profiles F and G included behaviors that were easily amenable to change.

By providing feedback and positive reinforcement to individuals, it was found that within a few training sessions, behaviors could be shaped such that job search skills could be developed and interviewing skills could be improved dramatically. Since the interviews require an individual to play a specific role, whether the interviews are mock interviews, interviews for an actual job or for a work trial in the community, the examinee is required to role play behaviors expected of a person seeking employment. The ability of the person to switch in and out of such roles may be able to be immediately evidenced or refinement or encouragement through additional role playing may be required. Generally speaking, for individuals who exhibited adequate behaviors in these areas prior to the head injury, regaining these skills is often a quick study, and problem areas can be easily identified and often easily remediated.
Step 9 requires the examinee to be placed in a real work situation, either in a supervised or sheltered area or on an actual community-based work site. It is suggested that the information included on both Profiles H and I be first observed in a controlled situation, which may involve placement in a work trial in a community-based rehabilitation center, vocational training program, or at a volunteer work site. By observing the behaviors on both of these profiles in controlled situations, a better means of preparing for a community work site situational assessment or work trial can be established.
Critical Work
Behavior
Profile
Profile H—Critical Work Behavior Profile

The Critical Work Behavior Profile assesses general work skills, supervisory relations, social adaptive behaviors, and basic skills required in a variety of jobs in the competitive labor market.

**Purpose.** The Critical Work Behavior Profile was developed from items included in the Vocational Adaptivity Scale as a means of identifying those behaviors commonly observed by work supervisors that are known to be predictors of a person's ability to maintain employment in the community-based work force. This portion of the Protocol requires no additional resources for use, but the user is advised to see the directions in the Employment Readiness Assessment manual (Thomas & McCray, 1988). Below is a listing of the behaviors assessed with this profile:

- Follows shop rules and regulations, including safety
- Quality of work
- Demonstrates knowledge of job
- Remembers work instructions
- Work productivity and work pace
- Dexterity in relation to desired job goal
- Follows through on work tasks to completion
- Punctuality at start of work and after breaks
- Attends work daily and calls with reasonable excuse for absences
- Demonstrates a practical approach to solving work problems
- Organization of work and related materials
- Looks for things to do to keep busy during slow times
- Potential to advance on the job and assume new responsibilities
- Requests assistance when needed
- Skill development in relation to job demands
- Work stamina
- Displays an appropriate awareness of surroundings and activities in the immediate vicinity
- Expresses self clearly and efficiently
- Displays the ability to be appropriately assertive and stand up for oneself
- Exhibits enthusiasm appropriately giving the impression of being motivated to work
- Demonstrates adequate grooming and hygiene
- Delays immediate desires in order to work for longer term goals
- Demonstrates a desire and/or need to work
- Reads instructions, memos, etc.
- Performs simple math on the job such as counting, estimating, solving simple problems, measuring, etc.
- Has a network of friends, relatives, and other contacts to assist in locating work and provide necessary support
- Follows supervisor's work instructions accurately
- Works independent of the supervisor after an initial training period
Both the Critical Work Behavior Profile (Profile H) and the Social Adaptive Behavior Profile (Profile I) should be used by work supervisors to provide impressions of the person's work functioning from the supervisor's perspective. A minimum of two raters should be used in this portion of the assessment. This may involve both

1. An in-house assessment using known supervisor's or instructor's comments.

2. A community-based assessment using a work site in a competitive work situation for which the person is paid a wage.

Work supervisors, whether in-house or in the community, should provide the ratings whenever possible. Comparisons can be made between different raters to arrive at a composite or overall rating. For example, ratings based on performance from the in-house work site may be substantially different from those ratings provided by employers at work sites in the community. In some cases, a work supervisor may be unable to provide a rating to certain items and a case manager or other professional may need to complete the ratings.
Profile I

Social Adaptive Behavior Profile
Profile I—Social Adaptive Behavior Profile

Similar to the Critical Work Behavior Profile, the Social Adaptive Behavior Profile may also be completed by a work supervisor or by the vocational evaluator or other rehabilitation professional. As with the Critical Work Behavior Profile, two individuals should be solicited to rate the examinee on each item, with the vocational evaluator being the final determiner of how each behavior will be rated and which of the behaviors appear to be within normal limits or which have a problem of either notable or minor proportions. A list of the behaviors assessed with this profile are listed below:

- Refrains from complaining about co-workers, supervisors, or work tasks
- Cooperates with supervisors
- Establishes appropriate relationships with supervisors
- Profits from instruction or criticism
- Demonstrates courtesy to other workers
- Maintains proper posture and distance from others during conversations
- Demonstrates appropriate volume of voice
- Displays appropriate expression of emotion
- Displays acceptable morals and ethics on the job
- Is accepted by co-workers
- Maintains a realistic opinion of achievements and abilities
- Handles minor work stress and frustrations on the job
- Demonstrates swings in mood or unpredictable behavior
- Boldness presents a problem in social situations
- Refrains from making others feel uncomfortable because of actions, physical appearance, or general conduct (e.g., inappropriate body movement, staring)
- Demonstrates an awareness and sensitivity to the feelings of others (e.g., knows when to end a conversation, when not to disturb others)
- Cooperates with co-workers
- Refrains from making others uncomfortable by awkward comments or out of context, inappropriate remarks
- Displays facial expression appropriate to the situation
- Distracts or disturbs others at work
- Offers acceptable excuses for inappropriate behaviors if necessary
- Views outcome of events as controllable and determined by actions on the job (e.g., effort expended or skills rather than merely luck)
- Attitudes of family or parents interfere with employment efforts

Research with the Vocational Assessment Protocol has found that individual raters may vary greatly when rating the same person in the same job. It was also found that agreement between raters can be improved dramatically by asking both raters to review their ratings of a person with another independent rater. If the raters are observing a person in different work settings, differences between raters may well reflect differences in behaviors rather than rater bias. In the Vocational Assessment Protocol validation study, it was not uncommon to hear evaluators report that they observed wide variations in behaviors when different types of work sites were used, as a function of type of work performed, environment, attitude towards co-
workers and supervisors, and numerous other reasons.

To ensure that the most accurate and reliable ratings are being obtained, the following steps should be followed:

1. Each supervisor should be informed as to the nature and purpose of the evaluation and instructed to rate the person on each item in relation to job performance during the evaluation period. Supervisors should be provided with a copy of both Profiles H and I before the assessment begins.

2. Ratings should be completed at the end of a predetermined evaluation period. It is important to conduct an in-person interview with the supervisor to briefly discuss the ratings, answer questions, and to obtain anecdotal information that may not appear on the rating form.

3. Repeat steps 1 and 2 with each supervisor who provides a rating.

4. Inspect each rating form to ensure that a response is made for each item. If the rater was unable to provide a response to any of the items, the person responsible for completing the profiles will be responsible for providing his/her "best guess" to these items. This may involve arranging a situation that will allow the evaluator to observe the behavior described in each item not rated.

5. Review all ratings and comments and record ratings and pertinent comments to a composite or overall rating.

Before the Critical Work Behavior Profile has been completed, it is suggested that the ratings of the behaviors be reviewed with the client, identifying two positive behaviors followed by any one of the problem areas listed.
Community-Based Job Trials

Following completion of a situational assessment in a controlled situation, it is advised that a community-based job trial be undertaken in one or more areas during the course of the vocational assessment. After the individual has received feedback regarding work behaviors and has had the opportunity to discuss this in a counseling session with the vocational evaluator, the community-based job trial can be planned. During the community-based job trial, several types of options are available. First, a continuation of the situational assessment that had been done previously in a community-based situation may be extended for a longer period of time, perhaps one to two weeks if necessary. This will allow the evaluator to have an extended opportunity to observe behaviors on the work site.

A second option would involve a separate individual placement with or without a job coach or other supports. Following the situational assessment, the person may be returned with support to his or her former employment or preferably in a situation akin to the type of work that was done in the past. Experience with the Vocational Assessment Protocol suggests that sometimes it is best to allow the person to make mistakes and refine skills before going to the job that is targeted as the primary job goal. With this strategy, work behaviors can be improved, speed increased, efficiency optimized, and the person brought closer to his/her optimal level of functioning prior to the time that the intended employer has the opportunity to view the person on the job.

A group work placement is a third option that can be used with persons who require a more structured situation or close supervision. In this approach, the individual undergoing assessment may be placed at a job site in which two or three other employees also are performing the same or similar functions within the same organization. Typically this includes a supervisor at the work site who is readily available to provide assistance, supervision, and intervention as necessary.

A fourth and more restrictive type of community-based placement involves enclave employment. In this type of arrangement, persons with disabilities work alongside other persons with disabilities in a community-based work situation, but typically the workers and the supervisor are separate from the main company workers and supervisors. Separate work space is often arranged and the supervisors for other employees within the company typically do not interact with those in the protected or enclave work environment. For more detailed information on these types of approaches, see Botterbusch (1989) or Coker (1992).

Although the previous discussion identifies what was found to be some of the more common approaches to integrating persons with disabilities into community-based employment, Table 1 lists descriptors that may be applied across various sections of similar types of employment that may be used for classification of outcomes of persons following completion of the assessment. As the reader will note, this represents a hierarchy of sorts, with the least restrictive outcomes being independent competitive employment without support, through the most restrictive type of employment that would involve placement in a long-term sheltered employment situation.
Table 1. Hierarchy of Employment Approaches for Persons With Severe Disabilities

<table>
<thead>
<tr>
<th>Employment Options</th>
<th>Support Features</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Independent Competitive</strong></td>
<td></td>
</tr>
<tr>
<td>• With no on-the-job-supports</td>
<td>Off job supports may include time-limited (usually up to 60 days) contacts provided by follow-along staff, case manager, counselor, or community support resource. Follow along may be time-limited but may occur intermittently (such as yearly follow up).</td>
</tr>
<tr>
<td>• With minimal on and off job supports and/or</td>
<td>Flexible work schedules, minor work site accommodations, or possible periodic follow-up on the job is typically sufficient. Initial instructions and peer mentoring may be used.</td>
</tr>
<tr>
<td>accommodations</td>
<td></td>
</tr>
<tr>
<td><strong>Supported Employment</strong></td>
<td></td>
</tr>
<tr>
<td>• Transitional</td>
<td>Supports on job needed for a limited time. Movement to options 1 or 2 is likely.</td>
</tr>
<tr>
<td>• Extended</td>
<td>Continuing on and off job supports for an extended time is predicted.</td>
</tr>
<tr>
<td>• Temporary</td>
<td>On and off job supports needed on an intermittent basis (when product lines are changed or when duties or work assignments change). Job coaches or work trainers may be used and work site accommodations are reasonable.</td>
</tr>
<tr>
<td>• Short-term, stabilization</td>
<td>On and off job supports needed intermittently. Support demands are likely to vary depending on work assignment but are likely to be less intensive than option 5.</td>
</tr>
<tr>
<td><strong>Protected Employment</strong></td>
<td></td>
</tr>
<tr>
<td>• Group work (temporary)</td>
<td>On-the-job support is required, but transition potential to less restrictive employment expected. Work is in presence of other persons with disabilities in a community-based setting.</td>
</tr>
<tr>
<td>• Group work (extended)</td>
<td>Ongoing on and off job supports are expected. Several other persons with disabilities work together.</td>
</tr>
<tr>
<td>• Sheltered/protected (time-limited, stabilization)</td>
<td>Work in sheltered environment. Transfer to options requiring less support is expected.</td>
</tr>
<tr>
<td>• Sheltered/protected (extended)</td>
<td>Employment in a sheltered situation is likely to be needed for an extended time.</td>
</tr>
<tr>
<td>• Sheltered/protected (indeterminant)</td>
<td>Employment in a sheltered environment is likely to be permanent.</td>
</tr>
</tbody>
</table>
Step 11

Develop the Evaluation Report and Complete a Structural Summary

Completion of the Structural Summary will engage the evaluator in a process that will address issues of concern for the individual being rated. Input from a variety of sources will be used to address referral questions and concerns. Development of a list of service needs to consider following the vocational assessment process should also be done at this time. This portion of the Vocational Assessment Protocol is included primarily for clinical use and may or may not be used on a consistent basis with all referrals. The Structural Summary report represents a means of collapsing data from all the profiles into a condensed format that includes descriptions of all identified problems as well as strategies to minimize, compensate for, or modify work tasks in order to minimize the impact of problem areas. Relative strengths and assets should be used in compensatory strategy development.

A summary of preferred learning style, preferred instructional methods, and possible behavior intervention strategies should be detailed. A list of evaluation questions is identified in the "Referral Questions Summary;" the first four are general considerations around which the Vocational Assessment Protocol is oriented while the fifth question represents important questions to be addressed during the course of vocational assessment that may have been developed on a case specific basis at the time of referral. The "Vocational Service Needs Inventory" is designed primarily for use as a means of identifying which additional service needs may need to be addressed. The purpose of this entire summary section entitled the "Structural Summary" is to provide an overview of the basic traits and behaviors assessed using the Vocational Assessment Protocol.
Establishment of Reliability and Validity of the Vocational Assessment Protocol

The manner in which the nine profiles associated with the Vocational Assessment Protocol were developed followed a test development model approach as suggested by the American Psychological Association (APA, 1985) to ensure optimal validity and reliability of all instruments. The sources of the information collected and the specific content areas were both identified through a series of interrelated research projects that examined factors affecting return to work for persons with traumatic brain injury.

The procedure that was used is described in detail in Section IV of the research report *The Vocational Assessment Protocol: Development and Validation Research* (Thomas & Menz, 1996).

Validity simply stated describes an instrument’s ability to measure what it says it measures. Content validity of a rating scale is implied if the important areas logical to the development of the instrument were included, while following rigorous research procedures. The manner in which all Vocational Assessment Protocol profiles were constructed followed a process to insure the content validity of the instrument. After initial development of rating scale items, the organization and scaling of all items were scrutinized by a panel of expert judges. The resulting rating scales were developed and organized to optimize administration and then revised if necessary using feedback from field trials. The Vocational Assessment Protocol profiles were then examined in pilot studies and finally in multi-site field studies. Where procedures did not make logical sense, or appeared awkward, directions were changed and wording corrected to better describe the process and procedure.

Face validity is assumed when the individual taking the test perceives the measure as related to the purpose for which he/she are taking it. Feedback from Vocational Assessment Protocol users at 20 sites in the field sample validation found strong agreement that the face validity of the instrument was high and acceptable to both participants and raters. Since most profiles require the rater to determine if identified problems are related to targeted job goals as well as how strength areas and the use of compensatory strategies can improve job specific performance, the relationship of the content of the instruments is clearly related to criterion measures, thus yielding strong face validity.

Construct (Factorial) Validity

One form of construct validity is examined using a factor analysis procedure to establish what is known as factorial validity. In the case of the Vocational Assessment Protocol, principal components factor analyses were computed with the data collected at the validation sites in order to estimate how much each of the profiles were actually interrelated (correlated) and whether these were underlying factors of the nature expected in the revisions following the pilot testing. Analyses were conducted with Profile B—Personal Demographic Interview, the three nonvocational profiles including Profile C—Physical Profile, Profile D—Social-Emotional Profile, and Profile E—Neuropsychological Profile. The four vocational profiles including Profile F—Job Search Skills Profile, Profile G—Interviewing Skills Profile,
Profile H—Critical Work Behavior Profile, and Profile I—Social Adaptive Behavior Profile were also examined. Each of the rating scales was factor analyzed separately.

Reliability analysis and factoring procedures were completed for each profile instrument when combined by profile type as to vocational or nonvocational. Reliability factoring was computed separately, where scaling both for general problems and for job specific problems was used. Parallel estimates were also computed based upon the actual two-point (i.e., yes, will affect job goal; no, will not affect job goal) and three-point scaling (i.e., within normal limits, minor problem, notable problem) used in clinical applications for the dichotomy used for reporting purposes. Internal consistency estimates are discussed in the Vocational Assessment Protocol: Development and Validation Research (Thomas & Menz, 1996). Factor analyses of the vocational profiles clustered around one or two factors. Most if not all items from Profiles F—Job Search Skills, Profile G—Interviewing Skills, and Profile I—Social Adaptive Behaviors loaded on single factors. Even though items were found from Profile H—Critical Work Behavior, items were represented on several factors; more than half of the items loaded on a single factor. As would be expected, fewer factors accounted for the majority of variation for the vocational profiles. Variables from the nonvocational profiles were more disbursed, and only in the case of Profile D—Social-Emotional Profile did variables suggest an underlying single factor.

Reliability Analysis

Reliability in relation to rating scales and assessment instruments classically refers to consistency of measures. Two types of reliability may wish to be examined in rating scales, one being interrater reliability and the second being internal consistency, or the interrelationship of all the variables to each other. Interrater reliability was not comprehensively examined with the profiles of the Vocational Assessment Protocol. In many cases persons having information on neuropsychological or physical variables tended to be a single individual; therefore, a second rating of these variables for comparison purposes was not attainable. In other cases, when people were placed in situations to examine telephone use skills, interviewing skills, or social adaptive and critical work behaviors, there was also frequently one person providing ratings.

In the development of all Vocational Assessment Protocol profiles, attempts were made to examine interrater reliability by showing videotapes, and having individuals rate critical work behaviors items or interview items. However, the process was quite artificial, and many of the items were unable to be rated in this manner. An actual experience of dealing with the person in a one-to-one situation appears to be the best way of gathering information for this purpose. The data collected, however, suggested several important opinions regarding training needs using the Vocational Assessment Protocol. First, by examining videotape vignettes, pairs of judges rated persons in different work related situations in relation to telephone use skills, interviewing skills, critical work behaviors, and social adaptive behaviors. By forcing consensus among raters, the interrater reliability of the groups was able to be increased from .70 to .85 (Thomas & McCray, 1988). The simple process of performing independent ratings, followed by group discussions and sharing of opinions regarding why items were rated as they were significantly improved agreement between raters. The need for further studies of interrater reliability and methods of improving rater reliability is strongly suggested as future research topics to pursue with the Vocational Assessment Protocol.
Internal consistency reliability measures were examined for all profiles. The reliability of the vocational adaptivity measures was consistently high as indicated by the high reliability estimates of profiles in this category. The social-emotional variables were also high and measure similar types of traits in regard to adaptive functioning and psychosocial abilities. Neuropsychological factors demonstrated moderate to high alpha levels implying high internal consistency reliability. Considerable variability occurred within the physical variables profiles that examined motor strength and coordination, sensory problems, and other medical issues. Although motor strength and coordination item categories demonstrated moderately high reliability, other sensory problems demonstrated wider variability, with low correlation among other medical issues as well may be expected, given the myriad of physical and/or medical problems that may exist with brain injury survivors.

Future Validation Considerations

Additional research with the Vocational Assessment Protocol is strongly suggested to continue to examine validity and reliability as well as to determine the predictive validity of the instrumentation assembled with different populations. Although it was never the purpose of the Vocational Assessment Protocol to serve as a yardstick for assessing a person’s readiness for employment, the ability of the instrument to identify areas of job related problems is an area of considerable concern which deserves additional examination and study. Additional testing of the Vocational Assessment Protocol as a case management instrument and as an effective measure for identifying factors to use in order to compensate for difficulties in work related problems is also suggested. Due to the fact that the spirit and intent of the Vocational Assessment Protocol is to stress and develop strength areas, and to identify and compensate or change barriers to targeted job goals, many behaviors are likely to show change during the assessment. This presents a dilemma for validation efforts. Does one use the behavioral ratings collected at the onset of an evaluation using the Vocational Assessment Protocol or ratings obtained following behavioral intervention or compensatory strategies implementation. Many of the behaviors examined in Profile G—Interviewing Skills Profile, for example, change dramatically following positive practice, behavior shaping, and multiple trials of simulated or actual interviews with feedback sessions. Future validation studies will be needed to address these and similar related issues.
References


The Vocational Assessment Protocol

CONTENTS

*10 each of the following:
Profile A - Personal Demographic Questionnaire
Profile B - Personal Demographic Interview
Profile C - Physical Profile
Profile D - Social-Emotional Profile
Profile E - Neuropsychological Profile
Profile F - Job Search Skills Profile
Profile G - Interviewing Skills Profile

*30 each of the following:
Profile H - Critical Work Behavior Profile
Profile I - Social Adaptive Behavior Profile

*10 each of the following:
Structural Summary

Dale F. Thomas, Ph.D., CRC

Rehabilitation Research and Training Center
on Improving Community-Based Rehabilitation Programs
University of Wisconsin-Stout
Menomonie, Wisconsin
Instructions: The Personal Demographic Questionnaire (PDQ) was designed to document information regarding a person's social, vocational, educational, and personal history from the aspect of the family or a significant other, and/or a person who has sustained a serious head injury. In some cases, this information may be available from other sources, while in other cases this questionnaire will be the sole means of documentation of this data.

The PDQ is designed to provide a structured and thorough format for documenting history and relevant information typically requested by service providers. This format also provides a means of collecting a uniform set of data for research purposes. Depending on the circumstances, this information may be collected by having the person with a head injury or a significant other complete the PDQ, which can later be reviewed by an interviewer for accuracy and completeness. If desired, an interviewer may also collect this information during a face-to-face interview.

The Personal Demographic Interview (which is identified as Profile B) was designed to be used solely in a face-to-face interview. Both the PDQ (Profile A) and the PDI (Profile B) will typically be completed by the same informant and reviewed by the same interviewer. Whereas the PDQ documents data from history as well as present problems, the PDI was designed to engage the person with a head injury (and when possible a significant other as well) in a dialogue to discuss the effects of the head injury on day to day functioning and adaptive skills.

The information accumulated in both the PDQ and the PDI are not intended to take the place of diagnostic or evaluative reports, but rather to summarize the viewpoint of the person with brain injury and/or their family or significant other.

What is your relationship to the person whom this questionnaire is about?

- Self
- Child
- Sibling
- Spouse
- Parent
- Other
### A. Information on Personal, Developmental, and Pre-injury Characteristics

1. **Gender:**
   - Male
   - Female

2. **Birthdate:**
   - Month/Day/Year
   - Current age

3. **Date of injury:**
   - Month/Day/Year
   - Age at time of injury

4. **Current Marital Status:**
   - Single
   - Married
   - Separated
   - Divorced
   - Widowed
   - Other

5. **Ethnic background:**
   - Black
   - White
   - Hispanic
   - Native American
   - Asian
   - Other
   - (Please describe)

6. **Current medication, dosage, and side effects:**

7. **Early developmental history:**
   Did you/this person have a history of prenatal or developmental problems, hyperactivity, learning problems, or adjustment problems during childhood?
   - Yes
   - No

If yes, complete the following. If no, skip to item 8.
During pregnancy, did your/this person's mother experience any of the following: (Check all that apply and explain)

- Alcohol use
- Serious illness or injury
- Prescription or nonprescription chemical use
- Premature or difficult delivery

Comments:

After birth, were any of the following problems encountered? (Please explain)

- Emergency surgical or medical intervention
- Infections, fevers, or diseases requiring hospital treatment
- Seizures

Comments:

8. Education completed: (Check all that apply in each column)

<table>
<thead>
<tr>
<th>Prior to Injury</th>
<th>Since Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular grade school classes</td>
<td></td>
</tr>
<tr>
<td>Special education classes in grade school</td>
<td></td>
</tr>
<tr>
<td>Regular high school classes</td>
<td></td>
</tr>
<tr>
<td>Special education classes in high school</td>
<td></td>
</tr>
<tr>
<td>*College</td>
<td></td>
</tr>
<tr>
<td>*Vocational/technical training</td>
<td></td>
</tr>
</tbody>
</table>

*Comment if special adaptations or accommodations were used. If a school was attended in which the primary language was not English, briefly describe how this may affect present academic skills or knowledge.

Were any grades failed or repeated?

- Yes
- No

(If yes, explain circumstances.)

Were any special instructional services needed such as: (Check all that were needed)

- Early childhood stimulation for developmental delays
- Special education due to emotional or behavioral disability
- Remedial education
Learning disability classes or instruction
Special education due to slow learning
Leave of absence from school due to serious illness, injury, or other reasons
Speech or language therapy
Visual or hearing adaptation or accommodations
(Specify)

Treatment for attention deficit hyperactivity disorder using stimulant drugs (e.g., Ritalin)
Psychiatric or psychological treatment
(Specify if inpatient or outpatient treatment was received and if treatment included medication)

Inpatient
Outpatient

Family counseling or therapy
Out of home placements for living purposes
(Briefly explain)

Were any of the following experienced during the developmental years? (Check all that apply and explain briefly)

High fever over 105 degrees
Abuse or neglect (physical, sexual, or psychological)
Alcohol or chemical abuse/dependence

Interviewer's Summary of Personal, Developmental, and Pre-injury Characteristics Information
B. Employment History and Job Goals

<table>
<thead>
<tr>
<th>Job Title and Duties</th>
<th>Employment Dates</th>
<th>Reason for Leaving</th>
<th>Starting and Ending Pay</th>
<th>Hours per Week</th>
</tr>
</thead>
</table>

(Include an additional page if necessary)
9. What potential effects do you anticipate the brain injury will have on short-term earning potential over the next two years? (check one)

No effect .................................................. Substantial reduction .......................................... Mild reduction .............................................. Severe reduction ..............................................

What potential effects do you anticipate the brain injury will have or has had on long-term earning potential? (Check one)

No effect .................................................. Substantial reduction .......................................... Mild reduction .............................................. Severe reduction ..............................................

10. What is your opinion of the probability of maintaining a regular job? (Check one)

Excellent .................................................. Poor .............................................................

Good .......................................................... None ..........................................................

Fair ..........................................................

11. List pre-injury work skills or traits that may assist in obtaining and maintaining a job.

Please list present immediate and long-term job goals and alternative for each:

Immediate_________________________ Alternative_________________________

Long-term_________________________ Alternative_________________________
C. Current Living Arrangements and Sources of Support

12. Describe current living arrangements and any special needs:

13. Is this current living arrangement appropriate?
   Yes .............................................. □
   No .............................................. □
   (If no, please comment.)

14. Who is responsible for primary care? (Check one)

   Self .............................................. □
   Parent .......................................... □
   Son/daughter .................................. □
   Spouse .......................................... □
   Friend .......................................... □
   Attendant ...................................... □
   Facility (hospital, nursing home, etc.) ........ □
   Other .......................................... □
   (Specify) ________________________________

15. Check all current sources of income and support:

   No source of income is received ................ □
   Self-employment income ......................... □
   Savings ........................................... □
   Workers' Compensation Benefits ............... □
   Litigation settlement ................................ □
   Public Assistance or Aid to Families with Dependent Children (AFDC) ...... □
   Supplemental Security Income (SSI) ............. □
   Veterans' benefits ................................ □
   Unemployment Compensation ..................... □
   Pension or retirement funds ...................... □
   Social Security Disability Insurance (SSDI) ..... □
   Other ............................................ □
   (Please explain) _____________________________

If another person handles the finances, list name, address, and phone number as well as the nature of their relationship (e.g., parent, guardian, attorney).

   (Name) ........................................
   (Address) ....................................
   (Phone) ......................................
   (Relationship) ..............................
D. Causes and Consequences of Brain Injury

16. Type of brain injury: (Check one)

- Closed head injury (brain injured but not penetrated by sharp object)
- Open head injury (brain injured by penetration of object through skull)
- Other injury - not related to external force trauma (e.g., tumor or aneurysm)
- Uncertain

17. Cause of the injury: (Check one)

Vehicle Accident:

- Automobile (car, truck) accident
  - with seat belt
- Motorcycle accident with helmet
- Bicycle accident with helmet
- Hit by car (pedestrian)

Non-Vehicle Accident:

- Sports accident
- Gunshot
- Assault
- Fall
- Other
- (Please describe)

If this was an accident, was the injured person in any way responsible?

- Yes
- No

Please use the space below to describe details of how the accident occurred and resulting injuries.

18. Was the person’s skull fractured by an accident?

- Yes
- No
- Not applicable

Comments:
19. Was this alcohol or drug related? (Check one)

Yes .................................................. ❑ No .................................................. ❑

If Yes, was the injured person using alcohol or drugs?

Yes .................................................. ❑ No .................................................. ❑

If yes, describe how alcohol was involved.

20. How many head injuries with loss of consciousness were experienced, including the present one? (Check one)

One .................................................. ❑ Two .................................................. ❑

Three or more ...................................... ❑ Don't know or unsure ...................................

Describe previous head injuries.

21. Period of time unconscious or in coma (if you do not know put a ? in the space):

Number of days in coma ................................................................. Source of information .................................................................

Comments:

22. Length of the amnesia period (the time after regaining consciousness for which one is unable to remember ongoing events). If none, mark 0; if you do not know place a ? in the space.

Days with amnesia .................................................................

Comments:

23. Current problems which resulted from the head injury: (Check all that apply)

Physical Problems:

Balance (dizziness) ................................................................. Spinal cord injury .................................................................

Lifting ................................................................................. Weakness ................................................................................

Walking ................................................................................. Other ...................................................................................

(Please list)...........................................................................
Sensory and Motor Problems:

<table>
<thead>
<tr>
<th></th>
<th>Coordination</th>
<th>Pain perception</th>
<th>Seizures</th>
<th>Other (Please list)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visual</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smell</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taste</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Cognitive Problems:

<table>
<thead>
<tr>
<th></th>
<th>Attention</th>
<th>Communication</th>
<th>Organizing and planning ability</th>
<th>Other (Please list)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Memory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reading</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Writing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visual-spatial (e.g., map reading, route finding, driving skills, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

24. Severity of current or recurrent problems: (Check appropriate column for each problem)

Emotional Related Problems:

<table>
<thead>
<tr>
<th></th>
<th>No Problem</th>
<th>Mild</th>
<th>Significant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol or substance abuse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frustration</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boredom</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loneliness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anger</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paranoid or suspiciousness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auditory hallucinations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visual hallucinations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behaviorally out of control</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

24. Severity of current or recurrent problems: (Check appropriate column for each problem)
Social and Behavioral Problems: (Check all that apply)

- Aggressive - nonassaultive
- Poor judgement
- Immature
- Impulsive
- Socially awkward or uncomfortable (lost sense of humor or sensitivity to feelings of others)
- Aggressive - assaultive
- Irritable
- Socially isolated/withdrawn
- Abandoned/rejected by friends
- Other (Specify)

25. Other significant injuries accompanying this brain injury: (Check all that apply)

- Face
- Neck
- Back
- Chest
- Right arm
- Left arm
- Right leg
- Left leg
- Internal
- Not applicable
- Other (Specify)

26. Check the statement that best describes the current mobility needs of the person with a head injury at this time. (Check one)

- Walks independently
- Uses crutches/walker/cane
- Uses standard wheelchair
- Uses electric wheelchair
- Battery operated cart
- Confined to bed
- Other (Specify)
### E. Activities of Daily Living

27. Person's current level of independence: (Check one column for each activity)

<table>
<thead>
<tr>
<th>Activity</th>
<th>No Problem</th>
<th>Needs Assistance or Supervision</th>
<th>Totally Dependent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Self-Care and Hygiene:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects clothing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dresses self</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bathes self</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grooming</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Community Survival Skills:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Makes change for $5.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finds way in neighborhood</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drives a car</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uses public transportation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crosses streets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General safety awareness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arranges own appointments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Home Living Skills:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleans the house</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Takes care of minor injuries</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obtains medical help if needed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uses telephone</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shops for groceries</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manages own finances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prepares own meals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washes dishes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

79
28. Accuracy of the information in this questionnaire: (Check one)

Poor: many guesses .......................... [ ]  Good: few guesses .......................... [ ]
Fair: several guesses .......................... [ ]  Very accurate .......................... [ ]

Intervener's Summary of Activities of Daily Living

Intervener's Comments on Severity of Injuries and Present Functional Impairments
Instructions: This Profile should be completed by the interviewer in the presence of the individual with the brain injury. Use your own judgment as to how to phrase or rephrase questions in order to obtain the best response. A family member or significant other will need to respond to the same questions in order to compare answers. The interviewer may wish the family member or significant other and the person with the head injury to review the PDI prior to the actual interview.

Read each of the statements below and indicate if any changes have occurred since the time of the head injury. Check the box that best describes how this person has changed. Comment wherever necessary.

A. Observed Changes in Behavior

<table>
<thead>
<tr>
<th>About the Same or Better Than Before the Injury</th>
<th>Minor Change for the Worse</th>
<th>Significantly Changed for the Worse</th>
</tr>
</thead>
</table>

1. Ability to learn and recall new information.

   Person’s response ................................................................. | | | |
   Significant other’s response ................................................. | | | |

2. Memory for things that need to be done routinely or in the future.

   Person’s response ................................................................. | | | |
   Significant other’s response ................................................. | | | |
<table>
<thead>
<tr>
<th></th>
<th>About the Same or Better Than Before the Injury</th>
<th>Minor Change for the Worse</th>
<th>Significantly Changed for the Worse</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.</td>
<td>Ability to plan activities, carry them out and self-monitor.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Initiative to start tasks independently and complete them.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Speed of thinking when responding to questions or general reaction to novel situations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Sensitivity (to others, to noise, to light, etc.).</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Alcohol and drug use.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Social and interpersonal skills.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Person’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Significant other’s response</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>About the Same or Better Than Before the Injury</td>
<td>Minor Change for the Worse</td>
<td>Significantly Changed for the Worse</td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------------------</td>
<td>----------------------------</td>
<td>-----------------------------------</td>
</tr>
</tbody>
</table>
Directions: Please provide any information that you feel may be of use to the rehabilitation counselor in employment planning.

15. Describe any pre-injury skills or abilities that may provide suggestions for future employment.

16. Describe hobbies or spare time activities that may assist in identifying work interests.

17. Accuracy of the answers from this interview: (Check one)

<table>
<thead>
<tr>
<th>Poor: many guesses</th>
<th>Good: few guesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fair: several guesses</td>
<td>Very accurate</td>
</tr>
</tbody>
</table>

List Any Concerns You Have Regarding Future Work or Independent Living Needs Described in This Interview.
B. Sources of Background Information

Hospital or clinic where emergency or acute medical services were provided at the time of injury.

(Name of primary care doctor)

(Facility)

(Address)

(City/State/Zip)

Secondary or tertiary treatment or rehabilitation hospital.

(Name of primary care doctor)

(Facility)

(Address)

(City/State/Zip)

Facility or clinic providing postacute rehabilitation or neurobehavioral services.

(Name of primary care doctor)

(Facility)

(Address)

(City/State/Zip)

List names and addresses where additional information may be available such as the high school, technical school or college, state vocational rehabilitation agency, or private rehabilitation facility.
Physical Profile

for use with the

Vocational Assessment Protocol

<table>
<thead>
<tr>
<th>Individual's Name:</th>
<th>Date Profile Completed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rater's Name:</td>
<td>Rater's Title:</td>
</tr>
<tr>
<td>Targeted Job Goal:</td>
<td></td>
</tr>
</tbody>
</table>

Instructions to the Rater

The Physical Profile should be completed by a physician or rehabilitation nurse, if available, or by a vocational evaluator or other professional familiar with the individual's physical and medical condition. The Profile is intended as an aid to rehabilitation planning and should not be used as a replacement for a standard physical examination.

Ratings of Physical Traits. Rate each category of traits first in terms of a "general rating" and again in relation to the "job specific problem." The job goal is listed above. If no job goal has been identified, simply provide a "general rating." Record your estimation of the extent of functional impairment or limitation by checking the appropriate box to the right of the eight physical trait statements using the rating scale below.

Within Normal Limits. Problems rarely occur, are of no consequence, or have been corrected by use of an aid or appliance (e.g., glasses, hearing aid). If orthotic appliances or aids are used, please comment.

Minor Problem. Problems are evident that may affect vocational, social, or personal adjustment. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect vocational, social, or personal adjustment. These problems should be documented on the Intervention Strategies Worksheet.

Place a check mark (√) next to each of the specific physical traits that contributed to any rating not within normal limits (the rater may wish to also comment on specific items under each trait if such specific information is available).

Strengths and Assets. After completing the entire Physical Profile, go back through the list of eight traits and place an "S" before any variable(s) that may be viewed as a strength or asset for the individual in his/her vocational planning. Be sure to describe these relative strengths or assets on the Intervention Strategies Worksheet.

Intervention Strategies. Complete the section entitled Intervention Strategies, following the directions provided.

Other Comments. Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any of the ratings or comments and edit the Profile as appropriate.
Physical Profile

Ratings: Provide a general rating for all eight physical traits and an estimate of whether the trait may affect performance on job listed as a targeted goal on page 1. Place a check mark (√) next to each specific trait that contributed to any rating not within normal limits. Also place an "S" before any variable(s) that may be viewed as a strength or asset.

1. Physical Capacity          General Rating          Job Specific Problem?
   Strength and stamina          w/Normal Limits  Minor Problem  Notable Problem  Yes  No
   Weakness/lifting limitations
   Fatiguability - endurance

2. Movement Skills          General Rating          Job Specific Problem?
   Ambulation
   Gross motor coordination
   Facial muscle control
   Range of motion/contractures
   Paralysis/palsy

3. Adroitness          General Rating          Job Specific Problem?
   Fine motor coordination
   Dexterities (finger, manual, etc.)

4. Sensory Perception          General Rating          Job Specific Problem?
   Pain perception
   Numbness
   Hot/cold/light touch sensation

Dale F. Thomas, Ph.D.
January, 1996

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### 5. Sensory Systems

- Vision system problems
- Hearing (tinnitus, noise sensitivity)
- Smell and taste
- Balance/dizziness or vertigo
- Hemi-spatial neglect

#### Comments:

<table>
<thead>
<tr>
<th>General Rating</th>
<th>Job Specific Problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="check-mark" alt="Normal Limits" /></td>
<td><img src="yes-mark" alt="Yes" /></td>
</tr>
<tr>
<td><img src="check-mark" alt="Minor Problem" /></td>
<td></td>
</tr>
<tr>
<td><img src="check-mark" alt="Notable Problem" /></td>
<td></td>
</tr>
</tbody>
</table>

### 6. Chemical Abuse

- Prescription drugs
- Alcohol
- Street drugs
- Other chemical abuse

#### Comments:

<table>
<thead>
<tr>
<th>General Rating</th>
<th>Job Specific Problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="check-mark" alt="Normal Limits" /></td>
<td><img src="yes-mark" alt="Yes" /></td>
</tr>
<tr>
<td><img src="check-mark" alt="Minor Problem" /></td>
<td></td>
</tr>
<tr>
<td><img src="check-mark" alt="Notable Problem" /></td>
<td></td>
</tr>
</tbody>
</table>

### 7. Chronic Pain Issues

- Back or neck
- Headaches
- General somatic complaints and fatigue
- Other pain problems
- Musculoskeletal problems

#### Comments:

<table>
<thead>
<tr>
<th>General Rating</th>
<th>Job Specific Problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="check-mark" alt="Normal Limits" /></td>
<td><img src="yes-mark" alt="Yes" /></td>
</tr>
<tr>
<td><img src="check-mark" alt="Minor Problem" /></td>
<td></td>
</tr>
<tr>
<td><img src="check-mark" alt="Notable Problem" /></td>
<td></td>
</tr>
</tbody>
</table>

### 8. Other Issues

- Diabetes
- Cardiovascular problems
- Respiration/breathing
- Skin conditions
- Hydrocephalus/shunting
- Swallowing
- Heterotopic ossification
- Awareness of body position in space
- Epilepsy

#### Comments:

<table>
<thead>
<tr>
<th>General Rating</th>
<th>Job Specific Problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="check-mark" alt="Normal Limits" /></td>
<td><img src="yes-mark" alt="Yes" /></td>
</tr>
<tr>
<td><img src="check-mark" alt="Minor Problem" /></td>
<td></td>
</tr>
<tr>
<td><img src="check-mark" alt="Notable Problem" /></td>
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Intervention Strategies. List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.

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</table>
Social-Emotional Profile

for use with the

Vocational Assessment Protocol

Individual's Name: Date Profile Completed:
Rater's Name: Rater's Title:
Targeted Job Goal:

Instructions to the Rater

The Social-Emotional Profile is to be completed by a vocational evaluator, case manager, rehabilitation specialist, or social worker based on their knowledge of the individual. The Profile is intended for use by personnel who will be working with the individual to plan his/her vocational rehabilitation activities.

Ratings of Social-Emotional Traits. Rate each category of traits first in terms of a "general rating" and again in relation to the "job specific problem." The job goal is listed above. If no job goal has been identified, simply provide a "general rating." Record your estimate of the extent of functional impairment or limitation by checking the appropriate box to the right of the five social-emotional trait statements using the rating scale below.

Within Normal Limits. Problems rarely occur or are of little consequence. Please comment on any unusual behaviors or circumstances important to work and social functioning.

Minor Problem. Problems are evident that may affect vocational, social, or personal adjustment. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect vocational, social, or personal adjustment. These problems should be documented on the Intervention Strategies Worksheet.

Place a check mark (✓) next to each specific social-emotional trait that contributed to any rating not within normal limits (the rater may wish to also comment on specific items under each trait if such specific information is available).

Strengths and Assets. After completing the entire Social-Emotional Profile, go back through the list of five traits and place an "S" before any variable(s) that may be viewed as a strength or asset for the individual in his/her vocational planning. Be sure to describe these relative strengths or assets on the Intervention Strategies Worksheet.

Intervention Strategies. Complete the section entitled Intervention Strategies, following the directions provided.

Other Comments. Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any of the ratings or comments and edit the Profile as appropriate.
Social-Emotional Profile

Ratings: Provide a general rating for all five traits and an estimate of whether the trait may affect performance on job listed as a targeted goal on page 1. Place a check mark (✓) next to each specific trait that contributed to any rating not within normal limits. Also place an "S" before any variable(s) that may be viewed as a strength or asset.

1. Social Adjustment
   - Age appropriate maturity
   - Concern for others
   - Acceptable activity level
   - Social appropriateness/common sense
   - Accuracy of self-appraisal

2. Emotional Stability
   - Temper/explosiveness
   - Anger expression
   - Apathetic attitude
   - Excessive complaints
   - Tolerance of minor frustrations
   - Appropriate emotions displayed

3. Intrusiveness
   - Verbal aggressiveness
   - Physical intrusiveness/assaultiveness
   - Sexual appropriateness
   - Impulsive behavior or speech

General Rating

Job Specific Problem?

Comments:
4. Activity Level

- Spontaneity
- Initiative to work
- Isolation or withdrawal
- Enthusiasm/drive
- Appropriate activity level

Comments:

5. Suspected Chemical Use

- Prescription drug side effects
- Alcohol related problems
- Other substance abuse problems

Other Comments:
Intervention Strategies Worksheet
for Social-Emotional Profile

Strengths and Assets. Summarize factors of relevance to vocational planning.

Intervention Strategies. List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.

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</table>
Instructions to the Rater

The Neuropsychological Profile is to be completed by a neuropsychologist, or, if a neuropsychologist is unavailable, a vocational evaluator or rehabilitation specialist with access to neuropsychological information may be able to supply the information. The Profile is intended for use by personnel who will work with the individual to plan vocational rehabilitation activities. The Profile is not intended to be a replacement or substitute for a neuropsychological evaluation.

Ratings of Neuropsychological Traits. Rate each category of traits first in terms of a "general rating" and again in relation to "job specific problems." The job goal is listed above. If no job goal has been identified, simply provide a "general rating." Record your estimation of the extent of functional impairment or limitation by checking the appropriate box to the right of the 13 neuropsychological trait statements using the rating scale below.

Within Normal Limits. Problems rarely occur, are of no consequence, or have been corrected by use of an aid or appliance. If orthotics or aids are used, please comment and describe their use.

Minor Problem. Problems are evident that may affect vocational, social, or personal adjustment. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect vocational, social, or personal adjustment. These problems should be documented on the Intervention Strategies Worksheet.

Place a check mark (✓) next to each specific neuropsychological trait that contributed to any rating not within normal limits (the rater may wish to also comment on specific items under each trait if such specific information is available).

Strengths and Assets. After completing the entire Neuropsychological Profile, go back through the list of 13 traits and place an "S" before any variable(s) that may be viewed as a strength or asset for the individual in his/her vocational planning. Be sure to describe these relative strengths or assets on the Intervention Strategies Worksheet.

Intervention Strategies. Complete the section entitled Intervention Strategies, following the directions provided.

Other Comments. Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any ratings or comments and edit the Protocol as appropriate.
Neuropsychological Profile

Ratings: Provide a general rating for all 13 traits and an estimate of whether the trait may affect performance on job listed as a targeted goal on page 1. Place a check mark (✓) next to each specific trait that contributed to any rating not within normal limits. Also place an "S" before any variable(s) that may be viewed as a strength or asset.

General Rating | Job Specific Problem?
--- | ---

1. Freedom From Distractibility

Alertness
Vigilance
Attention and concentration
Mental calculation skills
Immediate verbal recall

2. Intellectual Verbal Factors

General fund of information
Abstraction skills
Arithmetic reasoning
Vocabulary (word knowledge)
Common sense and social reasoning

3. Intellectual Performance Factors

Visual organization skills
Perceptual organization and reasoning
Spatial relations - form perception
Attention to complex visual detail
Visual scanning skills

Comments:

Dale F. Thomas, Ph.D.
January 1996
4. Immediate and Delayed Memory

Auditory/verbal
Visual/nonverbal
Procedural/skill
Design or figure

5. Other Memory Skills

Prospective (future)
Remote (historical)

6. Communication Skills

Following verbal directions
Written expression
Goal directed speaking
Understandability of speech
Voice volume
Speaking vocabulary

7. Psycho-Motor Skills

Simple assembly
Gross motor
Visual-perceptual-motor
Drawing and writing
Other fine motor skills
8. Executive and Higher Order Skills

- Planning and goal formation
- Problem solving
- Insightfulness
- Decision making
- Cognitive flexibility
- Anticipation of problems
- Self-regulation
- Self-awareness
- Information processing speed
- Awareness of limitations
- Judgment

9. Other Cognitive Variables

- Perseveration tendencies
- Hemi-spatial neglect
- Inattention (auditory, visual, tactile)
- Tactile object and shape recognition
- Mental flexibility
- Stimulus bound behavior

10. General Mental Health Issues

- Confused thinking
- Unusual content or form of thought
- Self-centered or childlike behaviors
- Disinhibition

General Rating

Job Specific Problem?

- Yes
- No

Comments:
11. Affective Mental Health Issues

- Depression, dysphoria
- Anxiety or panic feelings
- Emotionally labile (moody)
- Manic, hyperactive, or hypomaniac

Comments:

12. Psychotic Mental Health Issues

- Auditory or visual hallucinations
- Suspicious, guarded or paranoid behavior
- Delusions or overvalued ideas

Comments:

13. Maladaptive Personality Variables

- Antisocial tendencies
- Pervasive behavior dyscontrol
- Passive, obsessive, or compulsive features
- Borderline or histrionic features
- Other personality disturbances

Other Comments:
**Intervention Strategies Worksheet**
for Neuropsychological Profile

**Strengths and Assets:** Summarize factors of relevance to vocational planning.

**Intervention Strategies.** List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.

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</table>
Job Search Skills Profile

for use with the

Vocational Assessment Protocol

<table>
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<tr>
<th>Individual’s Name:</th>
<th>Date Profile Completed:</th>
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<tbody>
<tr>
<td>Rater’s Name:</td>
<td>Rater’s Title:</td>
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<tr>
<td>Targeted Job Goal:</td>
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</table>

Instructions to the Rater

The Job Search Skills Profile can be completed by a vocational evaluator or other professional with direct knowledge of an individual’s observed skills.

Rating of Skills. Record your estimation of the extent of functional impairment or limitation by checking the appropriate box to the right of the 10 job search skills statements using the rating scale below.

Within Normal Limits. Problems are not observed or the person is adequate in relation to the behavior described.

Minor Problem. Problems are evident that may affect the job search process. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect one’s job search process. These problems should be documented on the Intervention Strategies Worksheet.

Strengths and Assets. After completing the entire Job Search Skills Profile, go back through the list of 10 items and place an "S" before any variable(s) that may be viewed as a strength or asset for the individual. Be sure to include relative strengths or assets on the Intervention Strategies Worksheet.

Intervention Strategies. Complete the section entitled Intervention Strategies, following the directions provided.

Other Comments. Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any of the ratings or comments and edit the Profile as appropriate.

The Vocational Assessment Protocol User’s Manual contains the data collection instruments and scripted directions intended for use with Profile F.
Job Search Skills Profile

1. Identifies reasonably obtainable job goals ..........................................
   Comments:

2. Is able to produce typed letters for employment search ......................
   Comments:

3. Demonstrates knowledge of how to make initial employer contacts .......

4. Demonstrates knowledge of how to comprehensively canvas the community to search for employment ..........................
   Comments:

5. Is able to track job leads and employer contacts for follow-up ...........
   Comments:

6. Plans on spending an adequate and consistent effort in searching for employment ..................................................
   Comments:

7. Is able to provide the names, addresses, and phone numbers of personal and work references upon request ......................

8. References can support the fact that the person possesses the skills and abilities to perform targeted job goals ..........................
   Comments:

101

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Dale F. Thomas, Ph.D.
Research and Training Center
University of Wisconsin-Stout
9. Can describe disability or limitations in a functional and nonstigmatizing manner

Comments:

10. Has access to reliable transportation to interviews and work

Comments:
Intervention Strategies Worksheet
for Job Search Skills Profile

**Strengths and Assets.** Summarize factors of relevance to vocational planning.

Intervention Strategies. List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.

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</table>
Interviewing Skills Profile

for use with the

Vocational Assessment Protocol

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<th>Individual's Name:</th>
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</tr>
</tbody>
</table>

Instructions to the Rater

The Interviewing Skills Profile can be completed by a vocational evaluator or other professional with direct knowledge of the individual's interviewing skills.

Ratings of Skills. Record your estimation of the extent of functional impairment or limitation by checking the appropriate box to the right of the 16 interviewing skills statements using the rating scale below.

Within Normal Limits. Problems rarely occur, are of no consequence, or behavior described is adequate.

Minor Problem. Problems are evident that may affect job interviewing performance. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect one's job interview performance. These problems should be documented on the Intervention Strategies Worksheet.

Strengths and Assets. After completing the entire Interviewing Skills Profile, go back through the list of 16 items and place an "S" before any variable(s) that may be viewed as a strength or asset for the individual. Be sure to include relative strengths or assets on the Intervention Strategies Worksheet.

Intervention Strategies. Complete the section entitled Intervention Strategies, following the directions provided.

Other Comments. Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any of the ratings or comments and edit the Profile as appropriate.

1 The Vocational Assessment Protocol User's Manual contains the collection instruments and scripted directions intended for use with Profile G.
Interviewing Skills Profile

1. Uses telephone to inquire about jobs

2. Uses appropriate telephone demeanor and language

Comments:

3. Arrives on time, presents self adequately, and waits appropriately before the interview

4. Has a well organized, neatly typed resume that reflects previous training and work experience

5. Can independently fill out job application neatly and completely

Comments:

6. Enters the interview appropriately and demonstrates good initial impression

7. Demonstrates an assertive and purposeful personal approach (e.g., eye contact, firm handshake) without being overbearing

Comments:

8. Expresses a general knowledge of the job and the company in which employment is sought

Comments:

9. Positively relates background, training, and/or work experience as a qualification for the intended job

Comments:
10. Avoids making negative remarks about present or former employers.

Comments:

11. Answers open-ended general questions.

Comments:

12. Explains employment difficulties appropriately (e.g., past employment problems or gaps in employment history).

Comments:

13. Deals with sensitive material or problem areas in a positive, constructive manner.

Comments:

14. Can appropriately request information on wages and benefits.

Comments:

15. Has ability to keep pace and place in the interview.

16. Demonstrates courtesy and thanks the interviewer(s).

Comments:
Strengths and Assets. Summarize factors of relevance to vocational planning.

<table>
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<tr>
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Intervention Strategies. List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.
Critical Work Behavior Profile

for use with the
Vocational Assessment Protocol

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</table>

**Instructions to the Rater**

The Critical Work Behavior Profile can be completed by a vocational evaluator, work supervisor, case manager, or other professional with direct knowledge of an individual's skills as listed on the Profile.

**Ratings of Behaviors.** Rate the individual on each of the 28 skill statements in relation to community-based employment by checking the appropriate box to the right of the statements using the rating scale below.

- **Within Normal Limits.** Problems rarely occur, are of no consequence, or the behavior listed is adequate.

- **Minor Problem.** Problems are evident that may affect job performance. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

- **Notable Problem.** Moderate to significant problems exist that are likely to affect one's job performance. These problems should be documented on the Intervention Strategies Worksheet.

**Strengths and Assets.** After completing the entire Critical Work Behavior Profile, go back through the list of 28 items and place an "S" before any variable(s) which may be viewed as a strength or asset for the individual. Be sure to include relative strengths or assets on the Intervention Strategies Worksheet.

**Intervention Strategies.** Complete the section entitled Intervention Strategies, following the directions provided.

**Other Comments.** Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any of the ratings or comments and edit the Protocol as appropriate.
## Critical Work Behavior Profile

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1.</td>
<td>Follows shop rules and regulations, including safety</td>
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<tr>
<td>2.</td>
<td>Quality of work</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Demonstrates knowledge of job</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Remembers work instructions</td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Work productivity and work pace</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Dexterity in relation to desired job goal</td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Follows through on work tasks to completion</td>
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<tr>
<td>8.</td>
<td>Punctuality at start of work and after breaks</td>
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<tr>
<td>9.</td>
<td>Attends work daily and calls with reasonable excuse for absences</td>
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<tr>
<td>10.</td>
<td>Demonstrates a practical approach to solving work problems</td>
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<tr>
<td>11.</td>
<td>Organization of work and related materials</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Looks for things to do to keep busy during slow times</td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
<td></td>
<td></td>
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<tr>
<td>13.</td>
<td>Potential to advance on the job and assume new responsibilities</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>Requests assistance when needed</td>
<td></td>
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<tr>
<td>15.</td>
<td>Skill development in relation to job demands</td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>Work stamina</td>
<td></td>
</tr>
<tr>
<td><strong>Comments:</strong></td>
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</tbody>
</table>

### General Rating

- **Minor Problem**
- **Notable Problem**
- **Normal Limits**

---

**Dale F. Thomas, Ph.D.**

January, 1996
17. Displays an appropriate awareness of surroundings and activities in the immediate vicinity.

18. Expresses self clearly and efficiently.

19. Displays the ability to be appropriately assertive and stand up for oneself.

20. Exhibits enthusiasm appropriately giving the impression of being motivated to work.

Comments:

21. Demonstrates adequate grooming and hygiene.

22. Delays immediate desires in order to work for longer term goals.

23. Demonstrates a desire and/or need to work.

Comments:

24. Reads instructions, memos, etc.

25. Performs simple math on the job such as counting, estimating, solving simple problems, measuring, etc.

Comments:

26. Has a network of friends, relatives, and other contacts to assist in locating work and provide necessary support.

27. Follows supervisor's work instructions accurately.

28. Works independent of the supervisor after an initial training period.

Comments:
Intervention Strategies Worksheet
for Critical Work Behavior Profile

Strengths and Assets. Summarize factors of relevance to vocational planning.

Intervention Strategies. List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.

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Social Adaptive Behavior Profile

for use with the

Vocational Assessment Protocol

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</table>

Instructions to the Rater

The Social Adaptive Behavior Profile should be completed by a vocational evaluator, work supervisor, case manager, or other professional with direct knowledge of an individual's work related and social behaviors as listed on the Profile.

Ratings of Behaviors. Rate the individual on each of the 24 statements in relation to community-based employment by checking the box to the right of the statements using the rating scale below.

Within Normal Limits. Problems rarely occur, or are of no consequence.

Minor Problem. Problems are evident that may affect vocational, social, or personal adjustment. Consequences that need to be addressed in a rehabilitation plan should be briefly described on the Intervention Strategies Worksheet.

Notable Problem. Moderate to significant problems exist that are likely to affect vocational, social, or personal adjustment. These problems should be documented on the Intervention Strategies Worksheet.

Strengths and Assets. After completing the entire Social Adaptive Behavior Profile, go back through the list of 24 items and place an "S" before any variable(s) that may be viewed as a strength or asset for the individual. Be sure to include relative strengths or assets on the Intervention Strategies Worksheet.

Intervention Strategies. Complete the section entitled Intervention Strategies, following the directions provided.

Other Comments. Review information with the consumer to determine if any problems were overlooked or if he/she disagrees with any of the ratings or comments and edit the Profile as appropriate.
### Social Adaptive Behavior Profile

1. Refrains from complaining about co-workers, supervisors, or work tasks
   - **General Rating:** Notable
   - **Comments:**

2. Cooperates with supervisors
   - **General Rating:** Minor
   - **Comments:**

3. Establishes appropriate relationships with supervisors
   - **General Rating:** Minor
   - **Comments:**

4. Profits from instruction or criticism
   - **General Rating:** Minor
   - **Comments:**

5. Demonstrates respect for the authority of supervisors
   - **General Rating:** Notable
   - **Comments:**

6. Demonstrates courtesy to other workers
   - **General Rating:** Minor
   - **Comments:**

7. Maintains proper posture and distance from others during conversations
   - **General Rating:** Minor
   - **Comments:**

8. Demonstrates appropriate volume of voice
   - **General Rating:** Minor
   - **Comments:**

9. Displays appropriate expression of emotion
   - **General Rating:** Minor
   - **Comments:**

10. Displays acceptable morals and ethics on the job
    - **General Rating:** Minor
    - **Comments:**

11. Is accepted by co-workers
    - **General Rating:** Minor
    - **Comments:**

12. Maintains a realistic opinion of achievements and abilities
    - **General Rating:** Minor
    - **Comments:**

13. Handles minor work stress and frustrations on the job
    - **General Rating:** Minor
    - **Comments:**

14. Demonstrate swings in mood unpredictable behavior
    - **General Rating:** Minor
    - **Comments:**

15. Boldness presents a problem in social situations
    - **General Rating:** Major
    - **Comments:**

---

**Dale F. Thomas, Ph.D.**
January, 1996

Research and Training Center
University of Wisconsin-Stout
16. Refrains from making others feel uncomfortable because of actions, physical appearance, or general conduct (e.g., inappropriate body movement, staring).

Comments:

17. Demonstrates an awareness and sensitivity to the feelings of others (e.g., knows when to end a conversation, when not to disturb others).

Comments:

18. Cooperates with co-workers.

Comments:

19. Refrains from making others uncomfortable by awkward comments or out-of-context, inappropriate remarks.

Comments:

20. Displays facial expression appropriate to the situation.

21. Distracts or disturbs others at work.

Comments:

22. Offers acceptable excuses for inappropriate behaviors if necessary.

23. Views outcome of events as controllable and determined by actions on the job (e.g., effort expended or skills rather than merely luck).

24. Attitudes of family or parents interfere with employment efforts.

Comments:
Intervention Strategies Worksheet
for Social Adaptive Behavior Profile

Strengths and Assets. Summarize factors of relevance to vocational planning.

Intervention Strategies. List any areas identified as a minor or notable problem. Describe potential impact on the targeted job goal or work in general as well as strategies to minimize negative effects.

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This report contains highlights of the various work related behaviors in a format that follows the structure of the Vocational Assessment Protocol. Please see Profiles A through I if any content area requires further detail. The first portion of this summary will summarize personal characteristics and work related information and the latter portion will examine these factors in relation to job goals and rehabilitation needs.

Background

Vocational and Personal Goals

Strengths and Assets

Preferred Learning Style and Teaching Strategies

Behavior Intervention Strategies
### Summary of Profiled Barriers to Employment and Potential Interventions

#### A. Personal Demographic Questionnaire (PDQ)

#### B. Personal Demographic Interview (PDI)

#### C. Physical Profile

<table>
<thead>
<tr>
<th>Description of Problem</th>
<th>Strategies to Minimize or Compensate for Problem or Modify Work Tasks</th>
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#### D. Social-Emotional Profile

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E. Neuropsychological Profile

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F. Job Search Skills Profile

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G. Interviewing Skills Profile

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### H. Critical Work Behavior Profile

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### I. Social Adaptive Behavior Profile

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#### Recommendations

Based on this structured summary of the Vocational Assessment Protocol for this individual, the following recommendations are offered for immediate consideration:
REFERRAL QUESTION SUMMARY

for use with the

Vocational Assessment Protocol

In light of the findings of this assessment, please address the following issues as well as other questions listed in number five (5) that this assessment addressed:

1. Are immediate and long-term goals and alternatives realistic? If not, state why. If job goals are realistic, identify what may be done to remediate identified problems that may cause work-related problems. If the problems are unable to be rectified or if job goals are unrealistic, consider further evaluation or suggestions for identification of alternate goals.

2. What type of employment situation would appear to be of most benefit at present? Specify any support systems or special considerations that are needed, and opinion as to future potential.

3. Would the provision of further training enhance employability or capability to function more independently or to perform skills at a higher skill level than the person currently aspires? If yes, please explain.

4. If specific questions regarding adaptability to a job exist because of behavioral problems, skill deficits, or other reasons, clearly state the problem, estimate the likelihood for change, and state specific steps that could be taken to promote a positive change. Consider ways of modifying job duties or the work environment, if appropriate, or consider other compensatory measure.

5. List other evaluation questions and comments here, and briefly discuss additional vocational service needs using the following page as a guide.
Instructions For Use

The Vocational Service Needs Inventory was designed to be used as an optional checklist to the VAP. After reviewing the VAP Structural Summary and completing the Referral Question Summary, the evaluator may wish to use this to check the services that may need further exploration. This checklist is intended for use simply as a planning guide.

Check (X) any service needs listed below that may need further exploration.

**Medical Related Services**

- Pre-employment physical
- Therapy: OT, PT, Speech
- Physical restoration
- Medication management

**Assessments**

- Vocational evaluation
- Community-based situational assessment
- Neuropsychological consultation
- Vocational interest or aptitude testing

**Psychotherapeutic or Counseling Services**

- Psychotherapy or crisis intervention
- Vocational guidance
- Case management

**Job Site Services**

- Employer education
- Client advocacy
- Job site assessment
- Post employment follow-up
- Job site intervention
- Post employment job upgrading
- Return to work trial

- Alcohol and drug treatment
- Prosthetic appliances
- Other

- Psychiatric evaluation
- Alcohol and drug assessment
- Employment interview assessment
- Other

- Alcohol/chemical dependency treatment
- Other

- Transportation to work
- Mobility training
- Job coaching
- Rehabilitation technology evaluation
- Work site accommodations
- Other
### Preparation for Work Services

- Occupation exploration
- Work adjustment
- Work hardening
- Vocational training
- Transitional sheltered employment
- Apprenticeship-traineeship-internship
- Job-seeking-skills class
- Job club
- Job shadowing
- Subsidized employment

### Miscellaneous Other Needs

- Special wage certificate
- Other

### Interview Training

- Interview training
- Informational interview
- Telephone inquiry interview
- Application review
- Job interview
- Job matching
- Job placement
- Selective job placement
- Work permit
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