

R-PAS Assessment in the Context of COVID-19

Current version: March 23, 2020

Purpose: We developed the current guidelines for clinicians and researchers who are able to conduct in-person psychological testing. However, we are currently unsure to how many people this applies. *These guidelines also only apply to situations in which the clinician or researcher has already decided to conduct parts of the assessment in person and, in no way, is a recommendation to do so.*

R-PAS has been closely monitoring the spread of COVID-19, following guidance from World Health Organization (WHO), the Centers for Disease Control (CDC), the American Psychological Association (APA), and various country, state, and local health departments. We offer the following guidelines for clinicians and researchers to provide assessments that require respondents to hold and interact with physical stimuli like the Rorschach. The current guidelines encompass social distancing for in-person assessment to administer the test. We are working to develop potential guidelines for remote assessment. However, without additional technical developments to ensure an accurate and uniform presentation of the inkblot stimuli, completely online administration is currently infeasible.

In-Person Assessment with Social Distancing

Social distancing refers to interpersonal behaviors designed to slow the spread of a contagious disease. With respect to COVID-19, it means maintaining two meters (six feet) of distance from anyone who does not live with you or who is ill. We believe it is possible to conduct assessments using hand-held stimuli while practicing social distancing. Doing so entails modifications to typical procedures that should not meaningfully affect the standardization of the administration. One modification is that both parties should put on protective vinyl gloves when entering the office. Other modifications are more instrument specific. Our emphasis is on using the Rorschach, but the principles are similar for other types of assessment measures requiring an examiner to observe performance. For this to work, you need an office that is large enough for you to sit two meters from your client.

Of course, it is best to use telehealth methods for assessment interactions that do not require the client to be physically present with the examiner when social distancing is in effect. These include intakes, and assessment discussions and feedback sessions.

Below, we first lay out the revised steps for using R-PAS. Then, we provide general guidelines for steps in the assessment process. Finally, an Appendix contains links to additional resources.

Instructions for Using R-PAS with Social Distancing (R-PAS SD)

You will need to practice these guidelines to establish a procedure that consistently places two meters / six feet between you and the client. The following text also includes recent modifications by the R-PAS team to make the instructions simpler and clearer for use with clients of all ages.

Introducing the Task

Introduce the task as usual by saying, *“We’re ready for the inkblot [task / test / activity] now. Have you heard of it, seen it, or taken it before?”*

If the answer is “No,” use slightly modified instructions to say, *“You will look at some inkblots. You will just tell me what they look like to you.”*

If the answer is “Yes,” briefly discuss their experiences as usual, but then establish the correct problem-solving set by saying, *“As you know, they are inkblots. You will just tell me what they look like to you.”*

Arrange Seating

Next, instead of arranging side-by-side seating, arrange seating so that you are two meters behind the client. Set your chair slightly to the right or left depending on the respondent's dominant handedness (e.g., to the right if they are right-handed). You can say something like, "For us to do this, I'll be writing down everything you say, but I will also need to see the inkblots. So, I'm going to be sitting [two meters / six feet] behind you and a little off to the side."

If not already in place, while maintaining appropriate distance, set up the cards on a table or other surface by the chair so that the respondent can pick up and hold the cards. The cards should be upside down, with Card I on top and Card X on the bottom. The bottom of each card should be oriented toward the respondent's seat. Then arrange the chairs and be seated.

Response Phase Instructions

Next, say, "*Okay, now we are ready to start. The stack of cards [in front of / adjacent to] you is the inkblots. They are upside down. In a moment, I will ask you to pick up each card one-by-one and turn it over. While looking at each card, I want you to answer the question 'What might this be?' Then when you are done with each card, you can turn it upside down again and place it at the bottom of the stack. Do you have any questions?*"

If the answer is "No," say, "Good, let's get started then. For each card, try to tell me two ... [with pause] or maybe three different things. So try to see two or maybe three different things. Okay, pick up the first card and turn it over by turning it to the side." Once they do, say, "What might that be?" [For young children, hold up two or three fingers each time you say the number.]

If the answer is "Yes," then respond to specific questions (see manual for examples).

Manage the RP

This step is the same as for standard administration. Keep the respondent focused on the task and document his or her words and behaviors. If they only offer one response, prompt for another and give a reminder about wanting two or three responses (though accept just one response if they give no more). If they give four responses, ask for the card back and give a reminder. Give a reminder even if they spontaneously hand back the card. Politely but firmly insist on at least one response to every card. Consider underlining keywords for later clarification.

Alert the Respondent to the End of the RP

Once they finish Card X, let them know that was the last card. For instance, say something like, "*Okay, that was the last one.*"

Introduce the Clarification Phase

"Now we'll do the last step. One by one, you will pick up each card and turn it over again. Then I'll read back what you said. I want you to help me see the things you saw. Make sure you show me where you were looking. Also tell me what you see there [pointing to the inkblot on Card I] that made it look like that to you. Help me to see it too. Do you have any questions?"

If the answer is "No," say, "Good. Go ahead and pick up the first card. Then I will read your first response."

If the answer is "Yes," then respond to specific questions.

Manage the CP

Unlike standard administration, you will need to let the respondent know when you no longer have questions. For instance, when you are ready to move to the next response within a card, you can say, "*Okay, for your next response, you said...*" When you are ready to move to the next card, you can say, "*Alright. Let's go to the next card.*"

Working with Children

When working with children, you likely will need to provide more structure, breaks, encouragement, and support to manage hyperactive behavior and help sustain focus on the task, given the typical amount of physical proximity is absent.

General Guidelines for Steps in the Assessment Process

General Recommendations

If you are ill (e.g., are sneezing or have a fever, cough, or headache) or have lost any sense of smell or taste in the past 14 days, stay home and use telehealth measures as appropriate. Similarly, if your client is ill, do not meet in person. Talk via phone before the session to screen for symptoms and reschedule as needed.

Obtain disposable rubber, latex, or nitrile gloves. Wear them while in your office and have your client do the same.

Make sure surfaces and assessment instruments are clean and sanitized before and after assessing patients. Have tissues and hand sanitizer with at least 60% alcohol nearby for you and your patients to use before and after the sessions.

Preparing Your Office

Have sanitizer and gloves available at the entrance to your office area with a large font sign directing patients to use the sanitizer and then put on a pair of the gloves. Place a sign on the entrance door and on an office wall that lists WHO policies, the policies of your governing health body (e.g., CDC in the U.S.), and your personal policies. You can refer to the sign as a reminder, if needed, which can also help the policies not feel personal to the client. We prepared [a folder](#) that contains versions of such a sign,¹ which for easier sanitizing, you can have laminated or printed in PVC or water-resistant paper.

Practice how you and the patient will enter the office and assessment spaces while staying two meters apart, as well as how you will communicate this with the client. If helpful, mark off sections of your office to designate your space and their space. You can make it less threatening-looking by using pretty, fun, or colorful duct tape.

Have tissues and hand sanitizer with at least 60% alcohol nearby for you and your patients to use before and after the sessions. For the tissues, have no-touch trash receptacles near where both you and the client sit for easy disposal.

Waiting Room Advice. If your waiting room needs to accommodate several people, ensure chairs are at least 2 meters / 6 feet apart. Have hand sanitizers at each seat along with tissues and a no-touch trash receptacle. If you have a television in your waiting room, choose a low anxiety station (not the news) such as nature shows, sitcoms, or even just music. Place [signs](#) to remind people of social distancing and hygiene procedures (e.g., with an unexpected sneeze or cough, turn your head and expel into a tissue or elbow). Place a trash receptacle at the door to be used with the gloves.

Disinfecting Assessment Surfaces and Test Materials. The CDC recommends using a solution containing 60% or more of isopropyl alcohol to kill the virus. Use that to initially clean and disinfect assessment surfaces and materials, as well as materials and surfaces in the waiting room and office, including chair arms, tabletops, keyboards, touchscreens, clipboards, etc. The R-PAS developers have tested the use of isopropyl alcohol to clean the inkblot cards and, to their surprise, it does not damage the cards and can even remove discoloration from older cards. You can also use it on the R-PAS administration binders and Reference Sheets. Pour a small amount on a paper towel and gently rub across all materials after each

¹ Thank you, Kirsten Buckingham, University of Toledo doctoral student, for making these signs!

administration. If your client accidentally sneezes or coughs without covering their mouth, to guard against expelled droplets, disinfect all surfaces within a 6-foot radius.

The Phone Call to Schedule the Assessment

Explain your policies and procedures during the COVID-19 pandemic, which will include both hygiene and social distancing. Tell them that you will be sending them guidelines to follow at your office and explain what they can expect during the assessment process. Explain that you will not meet if either of you have a cough or fever or have lost any sense of smell or taste in the past 14 days, and that you will postpone meeting for at least 14 days if they recently traveled other than by car or know they have come within 2 meters / 6 feet of someone who has COVID-19. Assure them that you will have disinfected your office and let them know that everyone entering your office puts on sanitary disposable gloves, and that you will have tissues and appropriate hand sanitizers available. Also, let them know you arranged your office and testing procedures so that you can keep a safe 2 meters / 6 feet of distance. You will ask them not to touch their phone or other objects they brought with them during the assessment. If they must take or make a phone call, they will need to discard and replace their gloves afterwards. Let them know you follow the same rules. Discuss potential telehealth procedures if conducting part of the assessment using these methods.

IN PROGRESS: Tips for Other Assessment Methods

We know some test companies provide platforms for remote, online assessment. For example, in the U.S., [Pearson](#) provides a few verbally focused cognitive tests and many self-report questionnaires for clinical use, such as the BASC-3, the family of MMPI scales, and MCMI-IV, some of which come with [special instructions for remote assessment](#). For some of the measures, the choice to administer remotely shows up after you purchase the online *scoring* version of the test. However, you must give the client instructions for how to complete the test.

For other performance-based cognitive and personality tests, the solutions are more variable given the wide variety of testing materials. Currently many neuropsychologists, psychologists, and test companies (e.g., Pearson, AAP) are working to develop remote solutions. We will update this section as we learn more information or simply provide a link to the official recommendations.

We are in a new situation with many enforced changes to mitigate the spread of the virus; therefore, advice by the WHO, CDC, APA, and other higher authorities supersedes our advice and may change at any moment. Our top priority is the health and well-being of our clients, users, and others in our global community.

Thank you to everyone who has contributed to these guidelines in one way or another!

Joni L. Mihura, Gregory J. Meyer, and the R-PAS Team and Research and Development Group (RDG)²

² Other members of the R-PAS Team and RDG are Donald Viglione, Philip Erdberg, Luciano Giromini, Giselle Pianowski, Maarten Vanhoyland, Anthony Bram, Grønnerød, James Kleiger, Jessica Lipkind, and Corine de Ruiter.

Appendix

Intakes, Feedback, and Discussion Sessions via Telehealth

APA is now offering a FREE webinar series: "Telepsychology Best Practice 101 Series."
<https://apa.content.online/catalog/product.xhtml?eid=15132>

For more general practice guidelines during a pandemic, APA provides a wealth of information, including tips for social distancing, how to manage anxiety, and information and resources for telehealth. The APA pandemic website also includes information about converting your office to telehealth such as office checklists, informed consents, and comparisons of available telehealth options:
<https://www.apa.org/practice/programs/dmhi/research-information/pandemics>

More specific to personality assessment, although it does not address the COVID-19 pandemic situation, Guideline 7 in APA's Guidelines for the Practice of Telepsychology directly addresses "Testing and Assessment."
<https://www.apa.org/practice/guidelines/telepsychology>
<https://www.apa.org/practice/programs/dmhi/research-information/pandemics>

A Note about Telehealth in Assessments: Some governing jurisdictions have specific laws about this. For example, in the United States, Maryland's law requires psychologists to "ensure that any psychological testing instruments used are designed, validated, or appropriate for use via telepsychology."

Pearson also provides guidance for conducting assessments via telehealth along with tests that can be used this way and helpful videos about how to do so.
<https://www.pearsonassessments.com/professional-assessments/digital-solutions/telepractice,%20telehealth,%20telemedicine.html>

Here is a video illustration of administering verbal response tests with verbal and nonverbal stimuli via telehealth:
<https://downloads.pearsonassessments.com/videos/telepractice/Connections-LiveSpeech-with-Branding-V2.mp4>

Telehealth guidelines already exist for parts of the assessment such as the intake and feedback, which are conversational and more like therapy sessions.

OSHA provides detailed instructions for preparing workplaces:
<https://www.osha.gov/Publications/OSHA3990.pdf>