



FUNCTIONAL ASSESSMENT NON-COGNITIVE MENTAL ABILITIES RELEVANT TO WORK ACTIVITIES

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HOW SSA THINKS ABOUT EVIDENCE

Mental Impairments as a Case
Study

OUTLINE

- SSA and evidence (types and evaluation)
- Mental demands of work
- How SSA uses functional evidence to assess mental demands of work
 - Listings
 - Residual functional capacity (RFC)
- Approaches to measuring non-cognitive mental abilities relevant to work activities



TYPES OF EVIDENCE FOR SSA

- Objective medical evidence
- Medical opinion
- Other medical evidence
- Non-medical evidence
- Prior administrative medical findings

All are relevant but vary in a hierarchy of value



OBJECTIVE MEDICAL EVIDENCE

- Signs, such as structured mental status exam
- Laboratory test results
- Medical performance test results
- Imaging study results
- Psychological test results



MEDICAL OPINION - A STATEMENT FROM MEDICAL SOURCE ON:

- Impairment-related limitations & restrictions
- Ability to perform physical demands of work
- Ability to perform mental demands of work
- Ability to use special senses for work demands
- Ability to adapt to environmental conditions



EVALUATING THE EVIDENCE

- Relevance (impairments, limitations, duration)
- Completeness and Sufficiency to make a determination
- Consistency (internal and among sources)



MENTAL DEMANDS OF WORK

Cognitive demands

- Understand and remember information
- Maintain concentration, persistence, & pace
- Carry out instructions



MORE MENTAL DEMANDS OF WORK

Non-cognitive demands

- Carry out instructions
- Interact appropriately w/others, such as co-workers, supervisors, members of the public
- Respond appropriately to feedback or changes in work-related circumstances or conditions
- Adapt to the requirements of work



OCCUPATIONAL REQUIREMENTS SURVEY

COGNITIVE ELEMENTS

- Adaptability – respond to changes in work
- Pace and maintaining work flow
- Personal interactions
- Making decisions
- Reviewing the elements of work



USING EVIDENCE TO MAKE A DETERMINATION OF DISABILITY

Once technical criteria are met and there is a severe medically determined impairment

- Meet a Listing (step 3a)
- Equal a Listing (step 3b)
- Residual functional capacity including vocational factors
 - Ability to perform past work (step 4)
 - Ability to perform any job in economy (step 5)



LISTINGS OF MENTAL IMPAIRMENT

A, B and/or C criteria are required

- A criteria characterize the presence of a severe mental impairment
- B criteria characterize functional limitations
- C criteria characterize functional limitations in individuals with longstanding impairments who depend on treatment and supports



MENTAL IMPAIRMENT STANDARDS: FUNCTIONAL CRITERIA

B Criteria

- Understand, remember or apply information
- Interact with others
- Maintain concentration, persistence and pace
- Adapt or manage oneself

C Criteria

For those with 2 + years of impairment – need for structured settings and marginal adjustment



ACTIVITIES OF DAILY LIVING

- Basic and instrumental ADLs
 - Dressing, feeding, toileting, transferring
 - Managing money, preparing food, using transport
- Very relevant to assessing functioning and limitations
- Higher level information used to assess the more granular B criteria and C criteria



ASSESSING THE CRITERIA ON AN ORDINAL SCALE

- Extreme – severity inconsistent with any gainful activity
- Marked – “more than moderate but less than extreme”
- Moderate
- Mild
- No limitation



MEET OR EQUAL: LISTINGS OF MENTAL IMPAIRMENT

- One B criterion assessed as extreme
- Two B criteria assessed as marked
- C criteria are met

If these criteria are not met or equaled, the case is assessed for residual functional capacity (RFC):

What you can still do even though impaired



MENTAL DEMANDS OF WORK: RFC

Cognitive demands

- Understand and remember information
- Maintain concentration, persistence, & pace
- Carry out instructions



MORE MENTAL DEMANDS OF WORK

Non-cognitive demands

- Carry out instructions
- Interact appropriately w/others, such as co-workers, supervisors, members of the public
- Respond appropriately to feedback or changes in work-related circumstances or conditions
- Adapt to the requirements of work



MENTAL FUNCTIONING IN OTHER CATEGORIES OF IMPAIRMENTS

- HIV-AIDS
- Cardiovascular impairments
- Neurological impairments

The same B criteria and mental demands of work are considered in determination



PSYCHIATRIC REVIEW TECHNIQUE FORM

PRTF

RATING OF FUNCTIONAL LIMITATIONS

A. "B" Criteria of the Listings

Indicate to what degree the following functional limitations (which are found in paragraph B of listings 12.02-12.04, 12.06-12.08 and 12.10 and paragraph D of 12.05) exist as a result of the individual's mental disorder(s).

NOTE: Item 4 below is more than a measure of frequency and duration. See 12.00C4 and also read carefully the instructions for this section.

Specify the listing(s) (i.e., 12.02 through 12.10) under which the items below are being rated _____

FUNCTIONAL LIMITATION	DEGREE OF LIMITATION					
	None	Mild	Moderate	Marked*	Extreme*	
1. Restriction of Activities of Daily Living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insufficient Evidence <input type="checkbox"/>
2. Difficulties in Maintaining Social Functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insufficient Evidence <input type="checkbox"/>
3. Difficulties in Maintaining Concentration, Persistence, or Pace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insufficient Evidence <input type="checkbox"/>
4. Episodes of Decompensation, Each of Extended Duration	<input type="checkbox"/>		One or Two <input type="checkbox"/>	Three* <input type="checkbox"/>	Four* or More <input type="checkbox"/>	Insufficient Evidence <input type="checkbox"/>

*Degree of limitation that satisfies the functional criterion.



STANDARD MEASURES OF MEDICAL EVIDENCE FOR MENTAL FUNCTIONING

- Cognitive demands of work
- Non-cognitive demands of work

The former are more numerous than the latter.



NON-COGNITIVE DEMANDS OF WORK

- Activities of daily living – Katz ADL scale
- Global Assessment of Functioning (GAF)
 - Good psychometrics for research
 - Less adequate in general practice
- Social & Occupational Function Scale (SOFAS)
- MIRECC GAF – 3 dimensions (symptoms, social interaction, and work or school)

All require training and calibrating



HOW TO DEAL WITH SELF-REPORT?

- Other than mental status performance measures and basic activities of daily living, most of these measures ultimately rely on self-report and observations of others, usually **not** medical professionals
- Medical and non-medical opinion evidence
- Evidence of validity (IOM Report on Psychological Testing)
 - Symptom validity test results
 - Internal data consistency
 - Other corroborative evidence
 - Discussion of test norms relevant to individual



MAKING SELF-REPORT MORE VALUABLE

- Theory-driven approach to measurement
- Item response theory (IRT)
- Computer assisted testing (CAT)
- Internal consistency tests

Setting the stage for looking at the SSA – NIH Work Disability Functional Assessment Battery (WD–FAB)

