Beyond the test manual of the Cognitive Competency Test (CCT)

Briana Zur

Like many other clinicians working in the field of dementia in the community, I became increasingly frustrated with the assessment tools being used to measure a person's cognition and ability to live safely. The available assessment tools, which include the Cognitive Competency Test (CCT), had many limitations. In my role as an occupational therapist on a geriatric assessment outreach team my team members, including geriatricians and geriatric psychiatrists, frequently requested the results of the CCT to aid in diagnosis and to predict functional implications in everyday life. In the climate of increased accountability within the health care system and the need for evidence-based practice, I began to question the rigor of the data underpinning the CCT.

As I began to investigate the reliability and validity of the CCT, I recognized my own lack of skill and knowledge and so as an empty-nester, I decided to embark on what had been a fantasy of mine: to return to the academic world to study and obtain a Master's degree. My goal in pursuing graduate education is to enhance my ability to make decisions regarding my practice and to be able to read and understand research publications. As my quest began, I started to read everything I could get my hands on regarding the CCT.

Description of the CCT

In 1986, Wang and Ennis addressed the need for an objective and standardized evaluation of cognitive competency and developed the CCT as an assessment tool with the intention that it would reflect the multidimensional concept of mental competency. Wang and Ennis recognized that no one test would be able to measure cognitive competency and therefore viewed the CCT as a component of an overall comprehensive battery of a mental competency evaluation (Wang & Ennis, 1986). Up until 1986, competency was only measured in a medical-legal sense or in the context of psychiatric illness and the information was gained mostly by interview. Wang and Ennis wanted to address the issue of cognitive competency as "an ability to know and to make use of knowledge" (Wang, Ennis & Copland, 1992, p. 1).

The CCT is designed as a test that "incorporates the concept of multidimensionality of cognitive skill

and adopts a practical approach by simulating daily living skills" (Wang & Ennis, 1986, p. 120). The test assesses a wide range of cognitive skills, incorporating twelve subtests that can provide information about a subject's cognitive strengths and weaknesses. These subtests can be combined to yield an Average Total Score (ATS), which is "believed to be an objective, direct, and quantifiable documentation of an individual's level of cognitive competency" (Wang et al., 1992, p. 40). The cognitive skills measured by the CCT include orientation to personal information, social intelligence, memory, reading, financial management, safety, judgment and spatial orientation. The authors of the CCT indicated that the test can also be helpful to identify areas of specific concerns that can be used to guide possible interventions.

Use of the CCT by occupational therapists

Occupational therapists are routinely asked to assess a person's ability to manage in the community and to predict a person's ability to live safely and independently in their home environment. Unpublished survey results indicate that the CCT and the MMSE (Mini Mental Status Examination) are the most commonly used assessment tools among occupational therapists in Ontario (Aronson, Barr, Kyle & O'Keeffe, 2002; Assessment tools, 2004). The CCT is the second most utilized assessment tool by occupational therapists in Canada as reported in a survey of cognitive assessments used for older adults (Douglas, Liu, Warren & Hopper, 2005). From a clinical point of view, the tool helps to provide information about how individuals will perform their daily living tasks from a cognitive perspective.

Anecdotal information suggests that some occupational therapists are not using the CCT in its entirety and some are using it to assess the cognitive component of other tasks such as driving. This non-standardized use of the CCT and its use in the assessment of skills that it was not intended to measure further affects the

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global health day to be established This year the theme of World AIDS Day is equality Tackling the inequalities surrounding HIV testing prevention care and stigma among marginalized populations is the only way to not fall behind the targets of the third sustainable development goal of ending the HIV AIDS epidemic by 2030 **The Lippincott Manual of Nursing Practice** Sandra M. Nettina,2001 In addition to comprehensive coverage of the four areas of nursing medical surgical maternal newborn pediatrics and psychiatric mental health the Seventh Edition of this classic reference book features a variety of useful updates New to this edition is an appendix of vitamins and herbs necessary for dealing with patients who treat themselves with popular dietary supplements Also unique to this edition are an increased emphasis on home care drug alerts standards of care and additional patient teaching information that includes complementary therapies Popular features including procedure guidelines nursing alerts and gerontologic alerts have been expanded New illustrations appear throughout Official Gazette of the United States Patent and Trademark Office ,2004 *Amateur Radio* ,1999 Acronyms, Initialisms and Abbreviations Dictionary Mary Rose Bonk,Phyllis Spinelli,Pamela Dear,1999-12 **Cumulated Index Medicus** ,1977

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