*This assessment review was compiled by our students and is intended to be used as a guide in assisting clinicians. We encourage you to review the evaluations and assessments for yourself to guarantee the most accurate and updated information.					
I. General Information					
Title of the test: Community Integration Measure (CIM)					
Author: Mary Ann McColl, PhD; Diane Davies, MSc; Peter Carlson, PhD; Jane Johnston, BS, BScN; Patricia Minnes, PhD					
Publisher: Unknown					
Time required to administer: 5 minutes					
Cost of the Test: Free to download and copy the PDF file https://www.maa.nsw.gov.au/default.aspx?MenuID=376#174					
II. Description of Test					
Type/Purpose of Test: The CIM is a 10-Item checklist designed to assess community integration from the client's own perspective of belonging and participating.					
Population: Developed for people with brain injury, but used successfully with other rehabilitation populations.					
Focus of measurement: Organic systems Abilities _ <u>X</u> Participation/life habits Environmental Factors					
III. Practical Administration					
Ease of Administration: Simple, can be self administered or completed via an interview (phone or face to face).					
Clarity of Directions: Directions are minimal and clear.					
Scoring Procedures: For each of the 10 items on the checklist, there are 5 response options (5= always agree, 1 = always disagree). Scores for each item are summed, giving a total score between 10 and 50. A total score of 50 represents a high level of community integration.					
Examinar Auglification 9 Training					

# **Examiner Qualification & Training –** No training or qualifications

IV. Technical Considerations					
Standardization: Norms _X_ Criterion Referenced Other					
Reliability: Internal Consistency: Cronbach's alpha=0.87					

### Validity:

- •Content Validity- Based on empirically derived model; uses client-centered language for items on community integration.
- •Criterion Validity- Correlates significantly with CIQ, r=0.32 (p<0.05)
- •Construct Validity- Discriminates between disabled and able-bodied samples (t=5.5; p<0.006).

Manual: _	Excellent	Adequate	Poor	X No manua		
What is (are) the setting/s that you would anticipate using this assessment?  Outpatient or community-based agency						
Outpatient of	or community-bas	ed agency				

## Summary of strengths and weaknesses:

#### Weakness:

•Not as well known as the CIQ , and potentially confused with it due to similarities in names.

#### Strength:

- •Wording of questions taken from qualitative research makes language and ideas very accessible
- Client-centered
- •Only takes approximately 5 minutes to complete

#### References:

Asher, I.E. (Ed). (2007). Occupational therapy assessment tools: An annotated index (3<sup>rd</sup> ed.). Bethesda, MD: AOTA Press. Law, M., Baum, C., & Dunn, W. (Ed). (2005). Measuring occupational performance: Supporting best practice in occupational therapy (2<sup>nd</sup> ed.). Thorofare, NJ: SLACK Incorporated.