\*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.

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**Title of the test:** Moss Attention Rating Scale (MARS)

Author: John Whyte, MD, PhD & Tessa Hart, PhD

Publisher: Can be downloaded at COMBI website @ http://www.tbims.org/combi/mars/index.html

**Time required to administer:** Administration takes between 5 to 10 minutes

Cost of the Test: Free

### II. Description of Test

**Type/Purpose of Test:** The MARS is an observational scale, that is designed to measure attention and other attention related behavior in populations with a TBI in a reliable and quantifiable way.

**Population:** Individuals that have a TBI or any individual that has trouble with attention.

Focus of measuremen	ıt:		
Organic systems	X Abilities	Participation/life habits	Environmental Factors

#### III. Practical Administration

**Ease of Administration:** The MARS test is administered by recalling the last three sessions the practitioner had with the individual and rates the attention during the interactions with the person. If the client was co treated during these sessions than both practitioners need to complete a MARS score form on the client.

**Clarity of Directions:** Directions are short and easy to understand so that it can be administered by many different professionals. The only special direction for the MARS is that the rater needs to complete all 22 items on the MARS for it to be validly scored. score.

**Scoring Procedures:** Scoring is easy due to the computerized excel sheet that computes raw scores on the MARS. The excel work sheet can be down loaded by following this link (<u>MARS Scoring Worksheet.xls</u>). After the raw scores have been tabulated there is a second tab on the excel worksheet that changes the raw score to a interval scale logit score that then can be used for parametric analysis.

**Examiner Qualification & Training** The MARS was developed to require minimal training to use and be used by a variety of disciplines.

IV. Technical Considerations			
Standardization: Norn	ns X Criterion Referenced	Other	

**Reliability:** The MARS rating scale shows good inter-rater reliability between disciplines. In a study that looked at the reliability of OTs and PTs rating of attention with in a 3 day period found a pearson coefficient of .64. This shows that even between disciplines there is a good reliability in scores.

**Validity:** The MARS has shown a positive correlation that it does address the facets of attention. The MARS has also shown to be a reliable one year predictive outcome measure than a lot of different psychometric tests.

Manual:	Excellent	Adequate	Poor	<u>X</u>	No Manual
The authors	decided to not	develop a manual for the MARS.	The reason for	or I	no manual is due to the fact that the MARS
was develop	ed to be usable	by a multidisciplinary backgroun	ds and to prod	luc	ce easy scores for the assessment of attention
behavior.					

## What is (are) the setting/s that you would anticipate using this assessment?

- Inpatient Rehabilitation
- Outpatient Rehabilitation
- Mental Health Setting

# Summary of strengths and weaknesses:

### Weakness:

- Therapist reflects on treatment sessions to do the evaluation.
- Therapist needs to fill out every item even if it means guessing the persons impairment.
- Needs to have more explanation on what scores mean and how they can be interpreted.
- Very new test and the validity has not been shown in many different treatment settings yet.

## Strength:

- Test is Free
- Test is quick to administer
- Shows good predictive one year outcomes for a TBI population.
- Easy to score