


Test Review: The Earning Capacity Assessment Form—2nd Edition

Rehabilitation Counseling Bulletin
 57(1) 57–59
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 DOI: 10.1177/0034355213496168
rcb.sagepub.com


Shahnasarian, M. (2010). *Earning Capacity Assessment Form—2nd Edition Professional Manual*. Lutz, FL: Psychological Assessment Resources. ECAF-2 Introductory Kit (includes professional manual and 25 rating forms): \$90.00.

Purpose and Nature of the Test

The Earning Capacity Assessment Form—2nd Edition (ECAF-2) is a 14-item rating form that is designed to provide a systematic way for vocational experts to assess the loss of earning capacity, particularly in forensic cases where a claim is being made for such damages. Although the ECAF-2 is not intended to be a “definitive measure to assess a claim of loss of earning capacity,” it aims to “facilitate the synthesis of information for the purpose of framing analysis” (Shahnasarian, 2010, p. 19). According to the manual, the ECAF-2 “promotes objectivity, standardization, and systematic consideration of factors pertinent to evaluating such claims” (p. 3) and is most effective when used alongside a thorough clinical interview, review of records, and in addition to various methodologies such as the RAPEL method (Weed, 1999) and the Labor Market Access/Wage Loss model (Field & Field, 2001). The ECAF-2 is especially useful in cases where future wage loss must be determined, such as in pediatric cases or in cases where the individual has just entered the workforce. It can be used to assess the earning capacity of individuals at any age and any stage of their career.

The ECAF-2 is appropriate for use with individuals who “(a) possess an earning capacity, (b) contend their earning capacity has eroded due to an event that may prompt or is prompting litigation, and (c) are pursuing a claim of loss of earning capacity” (p. 5). It is neither necessary that the individual being evaluated is currently working nor is it necessary that he or she has ever worked. However, the individual must have possessed an earning capacity, which prevents use of the ECAF-2 in certain populations, for example, people with preexisting disabilities that prevented them from working. The ECAF-2 takes into account premorbid as well as postincident factors that could have a bearing on earning capacity, and thus it is important that the evaluator has access to both types of information prior to using the ECAF-2.

Practical Applications

The ECAF-2 consists of a user’s manual and a pencil-and-paper rating form. The evaluator is responsible for filling out the form on behalf of the individual he or she is

evaluating, using his or her own clinical judgment after reviewing all pertinent information. At the heart of the ECAF-2 is the rating of both “Inhibitor” and “Driver” items. “Inhibitor” items are those factors that could adversely affect the individual’s vocational rehabilitation such as the individual’s prognosis and ability to apply prior skills, whereas “Driver” items are those factors that could mitigate the individual’s vocational problems, such as the individual’s career motivation and stability of his or her career development. Each item, whether considered an “Inhibitor” or a “Driver,” is rated using a hierarchical sequence of four statements that are assigned a number from zero to three. The first statement corresponds to factors that would correlate to vocationally high functioning (zero), while the statements following correspond with progressively poorer vocational functioning (numbers one to three). The user is also given the option to choose “insufficient basis to assess” or “not pertinent” for each item being rated if the information required to evaluate a specific item is missing or an item is not applicable to the individual’s situation.

There are nine inhibitor items that are rated in the ECAF-2. The “phase of career development” item assesses the individual’s ability to progress in his or her career and the normal phases of career development (Super, 1957) such as growth, exploration, establishment, maintenance, or withdrawal. It is important to assess the individual’s age, vocational accomplishments, and level of career maturity when assessing this item. The “subject-specific issues” item assesses any personal barriers and the effect these have on the individual’s career. Examples of subject-specific issues include childcare responsibilities, a criminal record, or chemical dependency. The “ability to apply prior skills” assesses if the individual has any transferrable skills, and “future career development prospects” assesses future employability, taking into account factors such as labor market trends and accommodations. These factors are accounted for based on research through the U.S. Department of Labor, Bureau of Labor Statistics’ (2012) *Occupational Outlook Handbook’s* projections of positive and negative trends for employment as well as knowledge of necessary accommodations based on the individual’s disability. “Prognosis” is used to assess whether or not the individual’s impairment(s) is/are stable, if there could be a relapse, or if his

or her medical condition could be progressively degenerative. In the case that the individual is unable to assume past employment, the "need and capacity for retraining" assesses if retraining would enable the individual to return to premorbid earning levels. "Preexisting vocational handicaps" assess any premorbid medical, psychological, or social issue(s) the individual had prior to the event in question. Finally, the assessment of "acquired vocational handicaps" and "vocational adjustment issues" determines to what level either will affect the individual's future employment.

There are five driver items that are assessed in the ECAF-2. When assessing "stability of career development," it is important to assess the number of past jobs the individual has held, the length of time he or she spent in each job, any advancements or demotions, earning history, and the individual's opportunity to be rehired by past employers. "Work propensity" assesses the individual's work ethic and takes into account if he or she generally worked full-time, part-time, or only sporadically. Also assessed is the individual's "demonstrated earnings history" and "career motivation," which assesses an individual's motivation to succeed. The last driver item assesses "cognition" to determine if it is intact or if there are deficits.

The rating form also includes an Inhibitor and Driver Profile, which is a space to graph the results of the rating of each item to provide a visual of both inhibiting and driver factors. The final part of the rating form is the Impairment to Earning Capacity Rating Scale which is a summary of all of the information assessed. The rating scale ranges from 0% which corresponds to no loss or impairment of earning capacity, to 100% which corresponds to a catastrophic loss of earning capacity. A mild loss is considered to be 1% to 20%, a moderate loss 21% to 50%, a severe loss 51% to 80%, and an extremely severe loss 81% to 99%. This scale allows the evaluator to choose a single percentage of loss of earning capacity (e.g., 25%), a range of scores (such as 25%—50%), or a qualitative descriptor (none, mild, moderate, severe, extremely severe, or catastrophic) that best describes the individual's lost earning capacity.

The ECAF-2 user's guide provides guidelines on how the scores for each individual item may foreshadow a certain score on the rating scale, although there are no direct rules or correlations. Generally, a score of zero on either an inhibitor or driver item means that the item is going to be beneficial in helping the individual obtain "optimal earning capacity." A score of two or three generally indicates that the item will hinder the individual's earning capacity.

The manual states that the qualifications to administer the ECAF-2 include "Advanced training and years of clinical experience in many areas—including medical and psychosocial aspects of rehabilitation, vocational rehabilitation, career development, standardized testing, and the forensic process" which are "essential to the responsible and valid interpretation of the ECAF-2" (p. 5).

Technical Aspects

The ECAF-2 professional manual reports the results of testing on the reliability and validity of the ECAF-2 conducted by the author. The inhibitor items had a test-retest reliability of .76 to .96, and the driver items had a test-retest reliability of .70 to .80. The impairment to earning capacity rating scale's test-retest reliability was found to be .85 to .90. Interrater agreement was also measured for the ECAF-2, and it was found to be between 57% and 100%. Interrater agreement was at or above 70% on 10 items of the form. Contrary to many traditional "testing" measures, the ECAF-2 is completed by the evaluator and not the individual in question. Thus, it was not "normed" on any particular population but rather was developed based on input and an agreed-upon protocol from a team of experts.

In addition to reliability, the validity of the ECAF-2 was also measured. An expert review of the items was conducted and "Vocational rehabilitation experts agreed or strongly agreed that the ECAF-2 facilitated analysis of loss of earning capacity assessments in 74.5% of the 70 cases" (p. 36). The internal consistency was found to be .82, which is moderate to strong.

Conclusion

The ECAF-2 is a tool to assist the vocational expert in assessing loss of earning capacity in an individual who has experienced an injury with resulting disability and/or some type of adverse life event. When assessing earning capacity, it is important to consider an individual's work history, loss of opportunity, transferrable skills, and industry, among other factors (Weed & Field, 2001). The use of the inhibitor and driver item profiles helps the expert to examine pertinent areas of premorbid and postincident functioning. The advantage of using the ECAF-2 is being able to demonstrate a systematic way of assessing loss in earning capacity. A potential disadvantage is that there is no exact scoring system that will give users a specific number corresponding to earning capacity despite the use of numbers zero to three to "score" each item. This may lead the vocational expert to expect that a composite score can be calculated which corresponds to a scale of some sort. Perhaps changing the numbers to letters may help prevent the user from expecting some sort of formula for earning capacity. Shahnasarian (2004) addressed this issue when introducing the ECAF, stating that "It is important to note that no parametric relationship between ECAF factors, or among rating statements within an ECAF factor, has been established" (p. 45). In addition, it would be useful if the professional manual addressed the scoring system in more detail than is currently provided. The user must take caution not to rely on the ECAF-2 as the sole piece of information when determining earning capacity, as it must be used in conjunction

with all other relevant information and resources available. The vocational expert must also endeavor to obtain all relevant data to minimize "insufficient basis to assess" or "not pertinent" choices when ranking "Driver" and "Inhibitor" items. The more of these choices, the likelihood of a credible process is diminished. Although the user still ends up with a somewhat subjective result due to his or her reliance on clinical judgment when completing the ECAF-2, factual data from the evaluatee's medical, rehabilitation, and work history provide a defensible foundation for the expert's decision-making process. The ECAF-2 can be a useful instrument for inclusion in the expert's process of assessing loss of earning capacity.

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