

Needs Assessment Checklist (NAC)

Assessment Overview

Assessment Area

ICF Domain:

Activities

Subcategory:

Self-care

You Will Need

Length:

199 items – 60 minutes

Scoring:

Scores are derived by summing sub-scale items; a “percentage achieved” is also calculated for each of the 9 sub-scale’s ranging from 0-100% with higher scores indicating greater independence.

Summary

The Needs Assessment Checklist (NAC) is an interview-based assessment, measuring patient perception of independence in a range of tasks from 9 SCI-specific rehabilitation domains: activities of daily living (ADL, 29 items), skin management (14 items), bladder management (10), bowel management (7), mobility (17), wheelchair and equipment (33), community preparation (24), discharge coordination (32) and psychological issues (19).

Availability

Worksheet: Can be found [here](#).

Assessment Interpretability

Minimal Clinically Important Difference

Not established in SCI

Statistical Error

Not established in SCI

Typical Values

Not established in SCI

Measurement Properties

Validity – **Moderate** to **High**

High correlation of NAC ADL with SCIM-II:

SCIM self-care correlation: $r = 0.850$

SCIM Total correlation: $r = 0.873$

High correlation of NAC Bladder & Bowel with SCIM-II:

SCIM respiration & sphincter correlation: $r = 0.681$

SCIM Total correlation: $r = 0.754$

High correlation of NAC Mobility with SCIM-II:

SCIM mobility correlation: $r = 0.691$

SCIM total correlation: $r = 0.696$

High correlation of NAC psychological issues (mood subsection) with HADS:

HADS anxiety correlation: $r = -0.709$

HADS depression correlation: $r = -0.633$

HADS total correlation: $r = -0.726$

Moderate to **High** correlation of NAC psychological issues (full subscale) with HADS:

HADS anxiety correlation: $r = -0.501$

HADS depression correlation: $r = -0.466$

HADS total correlation: $r = -0.523$

(Berry & Kennedy 2002; $n=43$; 38 males, 5 females; mean (SD) age: 42.2 (14.6) years; complete and incomplete tetraplegia and paraplegia)

Number of studies reporting validity data: 1

Reliability – **Moderate** to **High**

Moderate to **High** Test-retest Reliability:

Overall $\alpha = 0.8238$

Subscale $\alpha = 0.694-0.904$

(Berry & Kennedy 2002; $n=43$; 38 males, 5 females; mean (SD) age: 42.2 (14.6) years; complete and incomplete tetraplegia and paraplegia)

Moderate to **High** Internal Consistency:

Overall $\alpha = 0.83$

Subscale $\alpha = 0.6729-0.9467$

(Kennedy et al. 2003; $n=192$; 147 males; 45 females; mean (SD) age: 40.7 (16.5) years, tetraplegia and incomplete SCI)

Overall $\alpha = 0.889$

All subscales $\alpha = > 0.7$

(Kennedy et al. 2012; $n=193$; 143 males, 50 females; mean age: 46.6 years; tetraplegia and paraplegia; complete and incomplete injuries)

Number of studies reporting reliability data: 3

Responsiveness

Floor/Ceiling Effect:

Not established in SCI

Effect Size:

Not established in SCI

Number of studies reporting responsiveness data: 0