

**R-PAS Guidelines for In Person Assessment with Physical Distancing**  
*Original version: March 23, 2020; Current version: October 13, 2020*

**Purpose:** We developed the current guidelines for clinicians and researchers who are able to conduct in-person psychological testing. ***These guidelines also only apply to situations in which the clinician or researcher has already decided to conduct parts of the assessment in person and in no way is this a recommendation to do so.***

R-PAS continues to monitor the spread of COVID-19 closely, following guidance from World Health Organization (WHO), the Centers for Disease Control (CDC), the American Psychological Association (APA), and various country, state, and local health departments. We offer the following guidelines for clinicians and researchers to provide assessments that require respondents to hold and interact with physical stimuli like the Rorschach. The current guidelines encompass physical distancing for in-person assessment to administer the test. We have [guidelines for remote assessment in a separate document](#). However, without additional technical developments to ensure an accurate and uniform presentation of the inkblot stimuli, completely online administration is currently infeasible.

**In-Person Assessment with Physical Distancing**

Physical distancing refers to interpersonal behaviors designed to slow the spread of a contagious disease. With respect to COVID-19, it means maintaining two meters (six feet) of distance from anyone who does not live with you and wearing a mask when in an enclosed space with people outside your home to minimize the spread of respiratory droplets or particles. We believe it is possible to conduct assessments using hand-held stimuli while practicing physical distancing. Doing so entails modifications to typical procedures that should not meaningfully affect the standardization of the administration. Our emphasis is on using the Rorschach, but the principles are similar for other types of assessment measures requiring an examiner to observe performance. For this to work, you need an office that is large enough for you to sit two meters from your client.

Of course, it is best to use telehealth methods for assessment interactions that do not require the client to be physically present with the examiner when physical distancing is in effect. These include intake interviews, and assessment discussions and feedback sessions.

Below, we first lay out the revised steps for using R-PAS. Then, we provide general guidelines for steps in the assessment process, which include COVID-19 health-related tips and considerations.

**Instructions for Using R-PAS with Physical Distancing (R-PAS PD)**

You will need to practice these guidelines to establish a procedure that consistently places two meters / six feet between you and the client. The following text also includes recent modifications by the R-PAS team to make the instructions simpler and clearer for use with clients of all ages.

**Introducing the Task**

Introduce the task as usual by saying, *“We’re ready for the inkblot [task / test / activity] now. Have you heard of it, seen it, or taken it before?”*

If the answer is “No,” say, *“You will look at some inkblots. You will just tell me what they look like to you.”*

If the answer is “Yes,” briefly discuss their experiences as usual, but then establish the correct problem-solving set by saying, *“As you know, they are inkblots. You will just tell me what they look like to you.”*

### **Arrange Seating**

Next, instead of arranging side-by-side seating, arrange seating so that you are two meters behind the client. Set your chair slightly to the right or left depending on the respondent's dominant handedness (e.g., to the right if they are right-handed). You can say something like, "For us to do this, I'll be writing down everything you say, but I will also need to see the inkblots. So, I'm going to be sitting [two meters / six feet] behind you and a little off to the side."

If not already in place, while maintaining appropriate distance, set up the cards on a table or other surface by the chair so that the respondent can pick up and hold the cards. The cards should be upside down, with Card I on top and Card X on the bottom. The bottom of each card should be oriented toward the respondent's seat. Then arrange the chairs and be seated.

### **Response Phase Instructions**

Next, say, "*Okay, now we are ready to start. The stack of cards [in front of / adjacent to] you is the inkblots. They are upside down. In a moment, I will ask you to pick up the top card and turn it over. While looking at the card, I want you to answer the question 'What might this be?' Then we will do the same for the other cards. Do you have any questions?*"

*If the answer is "No," say, "Good, let's get started then. For each card, try to tell me two ... [with pause] or maybe three different things. So try to see two or maybe three different things. When you are done, you can turn the card upside down again and place it at the bottom of the stack. Okay, pick up the first card and turn it over by turning it to the side."* Once they do, say, "*What might that be?*" [For young children, hold up two or three fingers each time you say the number.]

If the answer is "Yes," then respond to specific questions (see manual for examples).

### **Manage the RP**

This step is the same as for standard administration. Keep the respondent focused on the task and document his or her words and behaviors. If they only offer one response, prompt for another and give a reminder about wanting two or three responses (though accept just one response if they give no more). If they give four responses, ask them to stop and set the card down, then give a reminder. Give a reminder even if they spontaneously set the card down after giving that response. Politely but firmly insist on at least one response to every card. Consider underlining keywords for later clarification. Repeat or clarify instructions as needed.

### **Alert the Respondent to the End of the RP**

Once they finish Card X, let them know that was the last card. For instance, say something like, "*Okay, that was the last one.*"

### **Introduce the Clarification Phase**

Start by saying, "*Now we'll do the last step. One by one, you will pick up each card and turn it over again. Go ahead and do that now with the first card. Hold it so we can both see it.*" After a pause, continue with, "*I'll read back what you said. I want you to help me see the things you saw. Make sure you show me where you were looking. Also tell me what you see there [pointing to the inkblot on Card I] that made it look like that to you. Help me to see it too. Do you have any questions?"*

*If the answer is "No," say, "Good. Go ahead, pick up the first card and turn it over. Then I will read your first response."*

If the answer is "Yes," then respond to specific questions.

### **Manage the CP**

Unlike standard administration, you will need to let the respondent know when you no longer have questions. For instance, when you are ready to move to the next response within a card, you can say,

*“Okay, for your next response, you said...”* When you are ready to move to the next card, you can say, *“Alright. Let’s go to the next card. You can turn that one over and put it at the bottom of the stack.”*

### **Working with Children**

With the examiner being physically farther away and unable to make consistent eye contact, it will be more challenging to guide a child through the administration. Therefore, you may need to provide more frequent reminders to stay seated, as well as positive verbal feedback about their effort and cooperation. Young children may need breaks (especially between the response and clarification phases), as well as a reward system, such as stickers, for staying engaged with the task.

## **General Guidelines for Steps in the Assessment Process**

### **General Recommendations**

If you or anyone with whom you live or have been in contact with in the past 14 days are ill (e.g., fever, cough, headache, difficulty breathing, fatigue, body aches, sore throat, congestion, nausea) or have lost any sense of smell or taste, stay home and use telehealth measures as appropriate. Similarly, if your client meets any of these criteria, do not hold an in-person assessment. Talk via phone before the session to screen for symptoms and reschedule as needed. In addition to symptoms, it would be prudent to inquire if the client has recently participated in any indoor activities with people outside their home who were not wearing masks.

### **Preparing Your Office**

The CDC recommends enhancing ventilation or circulation of outdoor air (unless the outdoor air itself is hazardous) to reduce the spread of the virus by opening doors and windows and using fans. In addition, use the highest quality filter available for your heating and air conditioning system and obtain an air purifier to run in the office. Have clients wear a mask and wear one yourself. Have sanitizer available at the entrance to your office area with a large font sign directing patients to use it. Place a sign on the entrance door and on an office wall that lists WHO policies, the policies of your governing health body (e.g., CDC in the U.S.), and your personal policies. You can refer to the sign as a reminder, if needed, which can also help the policies not feel personal to the client. We prepared [a zip file](#) that contains versions of such a sign,<sup>1</sup> which for easier sanitizing, you can have laminated or printed in PVC or water-resistant paper.

Practice how you and the patient will enter the office and assessment spaces while staying distanced, as well as how you will communicate this with the client. If helpful, mark off sections of your office to designate your space and their space. You can make it less threatening-looking by using pretty, fun, or colorful duct tape. Have tissues and hand sanitizer with at least 60% alcohol nearby for you and your patients to use before and after the sessions.

**Waiting Room Advice.** If your waiting room needs to accommodate several people, ensure chairs are at least 2 meters / 6 feet apart. Have hand sanitizers at each seat along with tissues and a no-touch trash receptacle. If you have a television in your waiting room, choose a low anxiety station (not the news) such as nature shows, sitcoms, or even just music. Place [signs](#) to remind people of physical distancing and hygiene procedures.

**Disinfecting Assessment Surfaces and Test Materials.** The CDC recommends using a solution containing 60% or more of isopropyl alcohol to kill the virus. Use that to initially clean and disinfect assessment surfaces and materials, as well as materials and surfaces in the waiting room and office, including chair arms, tabletops, keyboards, touchscreens, clipboards, etc. The R-PAS developers tested the use of isopropyl alcohol to clean the inkblot cards and found it does not damage the cards and can even

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<sup>1</sup> Thank you, Kirsten Buckingham, University of Toledo doctoral student, for making these signs!

remove discoloration from older cards. You can also use it on the R-PAS administration binders and Reference Sheets. Pour a small amount on a paper towel and gently rub across all materials after each administration.

### **The Phone Call to Schedule the Assessment**

Explain your policies and procedures during the COVID-19 pandemic, which will include ventilation, masks, enhanced hygiene, and physical distancing. Tell them that you will be sending them guidelines to follow at your office and explain what they can expect during the assessment process. Explain the symptoms and risk factors that will require you to postpone meeting for at least 14 days. Assure them that you have disinfected your office, and ventilated or purified the air as appropriate. Also, let them know you arranged your office and testing procedures so that each of you can keep a safe distance. Discuss potential telehealth procedures if conducting part of the assessment using these methods.

We are in a new situation with many enforced changes to mitigate the spread of the virus; therefore, advice by the WHO, CDC, APA, and other higher authorities supersedes our advice and may change at any moment. Our top priority is the health and well-being of our clients, users, and others in our global community.

### **Questions, Ideas?**

The R-PAS Forum has a discussion category **R-PAS COVID-19 Discussion** that you can use for further R-PAS specific questions or to discuss ideas with other R-PAS users.

*Thank you to everyone who has contributed to these guidelines in one way or another!*

Joni L. Mihura, Gregory J. Meyer, and the R-PAS Team and Research and Development Group (RDG)<sup>2</sup>

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<sup>2</sup> Other members of the R-PAS Team and RDG are Donald Viglione, Philip Erdberg, Luciano Giromini, Giselle Pianowski, Maarten Vanhoyland, Anthony Bram, Cato Grønnerød, James Kleiger, Jessica Lipkind, and Corine de Ruiter.