Moss Attention Rating Scale

Subject’s name ____________________   ID#________________

Person doing rating _______________ Discipline: OT / PT / Sp / Nursing (circle) Other: _________

Complete the ratings based on two of the following three days of observations:

__________,______  ____________,______  ____________,______

*Note: If you have worked with the patient all three days, base your ratings on the second & third day.

Write the 2 dates on which your ratings are based on here. __________&____________.

Did any of the observations you made over the 2 days involve co-treatment with another rater?  
Y / N (circle)

Using the number key below, please indicate to what degree each descriptor applies to the person you are rating. If any of your sessions during the 2 days were done in co-treatment with another rater, please note this above, and please make sure that you don’t discuss the rating scale at all with your co-rater until both of you have filled it out independently.

Please don’t leave any items blank. If you are not sure how to answer, just make your best guess.

1 = Definitely false
2 = False, for the most part
3 = Sometimes true, sometimes false
4 = True, for the most part
5 = Definitely true

1. ______ Is restless or fidgety when unoccupied
2. ______ Sustains conversation without interjecting irrelevant or off-topic comments
3. ______ Persists at a task or conversation for several minutes without stopping or “drifting off”
4. ______ Stops performing a task when given something else to do or to think about
5. ______ Misses materials needed for tasks even though they are within sight and reach
6. ______ Performance is best early in the day or after a rest
7. ______ Initiates communication with others
8. ______ Fails to return to a task after an interruption unless prompted to do so
9. ______ Looks toward people approaching
10. ______ Persists with an activity or response after being told to stop
11. ______ Has no difficulty stopping one task or step in order to begin the next one
12. ______ Attends to nearby conversations rather than the current task or conversation
13. ______ Tends not to initiate tasks which are within his/her capabilities
14. ______ Speed or accuracy deteriorates over several minutes on a task, but improves after a break
15. ______ Performance of comparable activities is inconsistent from one day to the next
16. ______ Fails to notice situations affecting current performance, e.g., wheelchair hitting against table
1 = Definitely false
2 = False, for the most part
3 = Sometimes true, sometimes false
4 = True, for the most part
5 = Definitely true

17. ________ Perseverates on previous topics of conversation or previous actions
18. ________ Detects errors in his/ her own performance
19. ________ Initiates activity (whether appropriate or not) without cuing
20. ________ Reacts to objects being directed toward him /her
21. ________ Performs better on tasks when directions are given slowly
22. ________ Begins to touch or manipulate nearby objects not related to task