

Relationship Between Education, Years Experience, and Clinical Competence In Depression Rating Skills

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Background: The increasing rate of failed trials and recent evidence on the relationship between interview quality and signal detection points to the need to insure the quality of clinical assessments in clinical trials. In addition to better training methodologies, efforts have been made to insure raters have a minimum number of years experience with the measures, and proper educational background. However, one recent study found that years experience per se was not related to better agreement with expert scores of a videotaped interview, although amount of prior training was. The current study examines the relationship between years experience and educational background and clinical competence as measured by observing raters administering the scale.

Method: 84 raters participating in two separate training programs (HAM-D=45, MADRS=39) were observed in real time conducting a clinical interview. Raters clinical skills (e.g., appropriate neutrality, adequate follow-up, adherence, clarification) were measured using the Rater Applied Performance Scale (RAPS; Lipsitz et al, 2004). Raters also completed an on-line didactic tutorial on scoring conventions prior to being observed.

Results: Years of experience with scale was not significantly correlated with ratings of clinical proficiency, $r=.167$, $p=.198$. In addition, pretest scores on didactic knowledge of conventions did not correlate significantly with clinical skills, $r=.081$, $p=.461$, suggesting these may be separate skill sets. Other variables that did not correlate significantly with clinical skill in administering the rating scale were years of clinical experience with psychiatric patients, and years of clinical experience with depressed patients. Number of years as a rater in clinical trials and number of depression trials as a

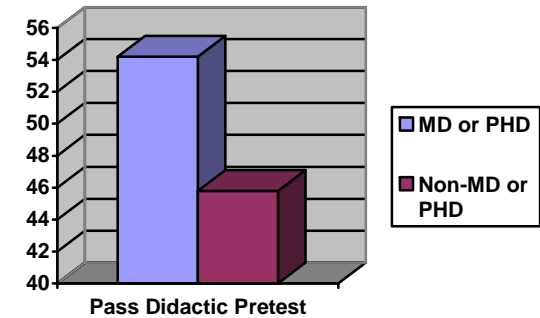
rater was significantly correlated with clinical skill in administering the rating scale ($p=.016$ and $p=.033$ respectively). The percentage of MDs or PhDs passing the initial test of clinical skills (i.e., rated on average good or excellent) approached significance compared to raters with other degrees, 54.2% vs 45.8%, $p=.051$, however the percentage passing the pretest for didactic knowledge did not, 51.9% vs 48.1%, $p=.146$.

Conclusions: Similar to earlier findings, years experience alone is not related to clinical skill in administering the scale. Raters with advanced degrees showed a tendency towards better pre-training clinical skills in administering the scales, but not on pre-training conceptual understanding of conventions.

Table 1. Correlation Between Clinical Proficiency on RAPS Scale and Demographic Variables (N=84)

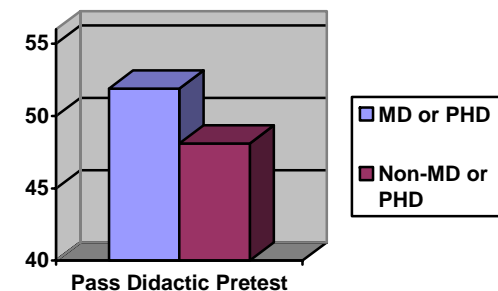
	r	p Value
Years Administering Scale	.167	.198
Years Clinical Experience with Depressed Patients	.056	.744
Years Clinical Experience with Any Psych Patients	.016	.923
Test on Conceptual Knowledge	.081	.461
Years as a Rater in Clinical Trials	.395	.016
Number of Depression Trials as a Rater	.352	.033

Figure 1. Percent Passing Pretest on Clinical Skill by Education



$\chi^2(1)=3.825$, $p=.051$

Figure 2. Percent Passing Pretest on Conceptual Knowledge by Education



$\chi^2(1)=2.115$, $p=.146$

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