

Name of Tool	The Comprehensive Assessment of Psychopathic Personality Symptom Rating Scale (CAPP SRS)
Category	Responsivity Issues (Validated)
Author / Publisher	Cooke, Hart, Logan and Michie
Year	2004

### Description

- The CAPP SRS (originally named the CAPP IRS) is a measure of psychopathic disorder (PPD), based on the Comprehensive Assessment of Personality conceptual model of PPD ([Cooke et al., 2012](#)). It is an expert observer symptom rating scale suitable for use in clinical and forensic settings ([Cooke and Logan, 2015](#); [Cooke and Logan, 2018](#)).
- The CAPP SRS consists of 33 symptoms grouped across six domains. Seven-point scale ratings are given for each symptom ([Florez et al., 2018](#)).
- The CAPP SRS uses information derived from file review, a detailed clinical interview (CAPP SRS Clinical Interview) and information obtained from an informant using the CAPP SRS Informant Report ([Cooke and Logan, 2015](#); [Cooke and Logan, 2018](#); Cooke et al., under review).

### Age Appropriateness

18+

### Assessor Qualifications

Assessor should have experience and training in administering and interpreting assessments of personality disorder. In addition, assessor should have training in the application of the CAPP SRS.

CAPP SRS training is suitable for experienced practitioners in the fields of psychiatry and psychology who are already trained in the assessment of psychopathy and who use structured assessments of personality disorder in their work with clients or research participants in forensic hospital or correctional settings (Cooke et al., 2004).

### Strengths

- The CAPP SRS provides a detailed and idiographic description of psychopathic traits that are known to be linked to violence risk. Symptoms of PPD are allocated to one of six domains of basic personality functioning i.e., self, attachment, behavioural, cognitive, dominance and emotional. The comprehensive nature of the measure provides the foundation for detailed and nuanced diagnostic and risk formulations of the individual case ([Cooke and Logan, 2015](#); [Cooke and Logan, 2018](#)).
- The tool specifically focuses on the domain of personality pathology rather than mixing the domains of personality pathology with criminal or anti-social behaviours; it is thus less tautological than other measures of PPD ([Cooke and Sellbom, 2019](#); [Skeem and Cooke, 2010](#)).

- Prototypicality studies reveal striking consistency in which symptoms are regarded as most central or diagnostic of PPD ([Cooke, 2018](#)).

### Empirical Grounding

- Concept maps are a means to explicitly lay out knowledge about a particular topic in a form that is simple and graphical. The concept map was developed based on reviews of the clinical and research literatures looking at existing diagnostic criteria and detailed clinical and research descriptions of psychopathic personality disorder (PPD). Detailed interviews were also undertaken with subject matter experts (SMEs): clinicians working closely with patients with PPD ([Cooke, 2018](#)). To ensure complete coverage of the construct domains, the map also included some symptoms that were controversial and not identified by SMEs or in the research literature. Symptoms that were virtually synonymous were grouped together to give a set of 33 symptoms ([Cooke, 2018](#); Cooke, Hart and Michie, under review).

### Inter-Rater Reliability

#### a) UK Research

No empirical research at present.

#### b) International Research

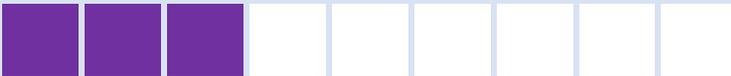
- A Masters of Arts dissertation tested the inter-rater reliability of the CAPP in a sample of 30 incarcerated youth. The total CAPP scores had an excellent overall IRR of 0.91. The domain IRR scores ranged from good to excellent (ICC=0.69 to 0.86). The rating of 0.69 is believed to be due to fair ICCs of .50 and below for some of the self-domain symptoms: self-centred, sense of entitlement, sense of invulnerability and unstable self-concept. This suggests that items may be more difficult for raters to assess consistently ([McCormick, 2004](#)).

- [De Page, Mercenier and Titeca \(2018\)](#) tested the CAPP-IRS (the former name for the CAPP-SRS) in a sample of 72 male forensic patients with a primary diagnosis of schizophrenia spectrum disorders. The CAPP-IRS showed good inter-rater reliability.

- [Sea \(2018\)](#) utilised a Korean translation of the CAPP SRS in a sample of correctional offenders in South Korea. The inter-rater reliability scores were very high for almost all of the symptoms, ranging from .82 to .90. Concurrently validity was also demonstrated, with K-CAPP-SRS total scores correlating highly with total scores on the Korean translation of the PCL-R.

- Using a Norwegian research version of the CAPP-IRS (now the CAPP-SRS) on eighty male inmates, [Sandvik and colleagues \(2012\)](#) found that the inter-rater reliability

	<p>ranged from good to excellent. The Total score yielded an ICC of .97. The domains gave the following results: attachment, IC=.89; behavioural, ICC=.76; cognitive, ICC=.74; dominance, ICC=.92; emotional, ICC=.88; self, ICC=.87.</p> <ul style="list-style-type: none"> <li>• Using a sample of patients in a forensic unit in Denmark, <a href="#">Pedersen et al. (2010)</a> found that IRR for the CAPP ranged from fair/good through to excellent. The total ICC was .56. The domains varied: attachment, ICC=.89; behavioural, ICC=.76; cognitive, ICC=.74; dominance, ICC=.92; emotional, ICC=.88; self, ICC=.87.</li> <li>• <a href="#">McCuish and colleagues (2019)</a> tested the inter-rater reliability of the CAPP-IRS. IRR was excellent for the total scores (IICC=.0.91) and adequate to excellent for domain scores (0.69-0.86).</li> <li>• Inter-rater reliability for the CAPP-IRS was found to be excellent for total scores (ICC=0.91) and range from adequate to excellent for domain scores (ICC=0.69-0.86) in a study involving adolescents from the Incarcerated Serious Violent Youth Offender study (<a href="#">McCuish, Hannibal and Corrado, 2019</a>).</li> </ul>
--	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Validation History	
General Predictive Accuracy	
a) UK Research	<ul style="list-style-type: none"> <li>• Cooke and colleagues (under review) reported on a seven site study 315 adult male correctional offenders and secure hospital patients in Scotland and England and found that the CAPP SRS had good measurement precision and good external validity with respect to scores on an older test of PPD, the Hare Psychopathy Checklist-Revised (Hare, 1991, 2003).</li> </ul>
b) International Research	<ul style="list-style-type: none"> <li>• The CAPP SRS was applied in a sample of 204 Spanish prisoners and was a found to 'robust and solid method' to evaluate psychopathy in a correctional setting (<a href="#">Florez et al., 2018</a>).</li> <li>• <a href="#">Pedersen et al. (2010)</a> - the CAPP achieved moderate accuracy (AUC) in predicting violent (.70) and non-violent (.71) recidivism in a 5-year follow-up with forensic psychiatric patients, similar to the predictive accuracy observed for the PCL:SV.</li> </ul>

Validation History	
Applicability: Females	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
a) UK Research	<ul style="list-style-type: none"> <li>• A doctoral thesis by <a href="#">Kreis (2009)</a> looked at the CAPP in sample of women offenders (n=20) using semi-structured interviews and self-report. The conclusion was reached that at a symptom level prototypical psychopathic women and men and are very similar; although important gender differences do exist, particularly in the expression of symptoms. The CAPP was found to capture psychopathy well across the female gender.</li> <li>• <a href="#">Kreis and Cooke (2012)</a> applied the CAPP-IRS to two case studies of female offenders. It showed promise for use with women, allowing for greater exploration of nuances in traits. The authors caution, however, that it is still under validation and there are no norms available for using the CAPP-IRS with females.</li> </ul>
b) International Research	<ul style="list-style-type: none"> <li>• <a href="#">Pauli and colleagues (2018)</a> administered questionnaires to correctional officers in Sweden who rate male or female psychopathy to test whether the CAPP-IRS symptoms were applicable across both genders. Most of the CAPP symptoms were rated as highly or moderately typical of both female and male psychopathy; although female participants in the study rated 'Domineering' as significantly more typical of psychopathy than the male officers did. Although the study downed that CAPP symptoms are relatively gender-neutral, there were some differences in how psychopathy symptoms were described between the genders: psychopathic men were described as reckless, uncaring, self-aggrandising, emotional expressive and garrulous; whereas women were described as more detached and lacking pleasure.</li> </ul>

Validation History	
Applicability: Ethnic Minorities	<input type="checkbox"/>
a) UK Research	No empirical research at present.
b) International Research	No empirical research at present.

**Validation History**

Applicability: Mental Disorders	
It has been used with individuals with learning disabilities in practice settings (Cooke, 2019, personal communication).	
a) UK Research	No empirical research at present.
b) International Research	<ul style="list-style-type: none"> <li>The CAPP-IRS was applied to a sample of 72 male forensic patients with a primary diagnosis of schizophrenia spectrum disorders. It was found that in this sample the CAPP-IRS had closer association with clinical features. Moreover, there appeared to be a larger overlap between CAPP-IRS and schizophrenia symptoms than there was with the PCL-R (<a href="#">De Page, Mercenier and Titeca, 2018</a>).</li> </ul>

Contribution to Risk Practice
<ul style="list-style-type: none"> <li>The motivation for constructing the CAPP conceptual model was to aid clinical evaluation through the development of new measures of PPD symptoms. The CAPP concept map has been translated into more than 25 languages. The CAPP SRS has been field tested in a range of settings (prisons, hospitals and secure units) in a number of countries (e.g., UK, Spain, Denmark, Belgium, Norway and Korea) (<a href="#">Cooke, 2018</a>).</li> <li>The CAPP SRS could be useful when measuring changes in the severity of symptoms over time. The fact that it can measure change makes it appropriate for risk management and is generally more acceptable to clients than other measures of PPD.</li> <li>The CAPP SRS supports the proper assessment of PPD. It provides both the structure and process for carrying out one of the most challenging tasks in forensic practice (<a href="#">Cooke and Logan, 2018</a>).</li> <li>The timeframe for using the CAPP SRS is flexible, ranging from short-term (3, 6 or 12 months) or longer-term (2 or 5 years or even lifetime) (Cooke et al., under review).</li> <li>An advantage of the CAPP-IRS is that it covers a wider range of symptoms than other tools intended for the assessment of psychopathy (e.g. PCL:YV). Further to this, it allows for symptoms to be broken down into their component parts to allow for greater exploration of their nuances (<a href="#">Dawson et al., 2012</a>; <a href="#">Kreis and Cooke, 2012</a>; <a href="#">McCuish et al., 2019</a>).</li> <li>In a study with 87 officers who rate psychopathy, it was found that the majority of CAPP symptoms (28 out of 33) were rated as highly or moderately typical of psychopathy. There remaining five symptoms were rated by practitioners as not typical of psychopathy: lacks pleasure, lacks perservance, lacks concentration, unstable self-concept and lacks planfulness (<a href="#">Pauli et al., 2018</a>).</li> </ul>

Other Considerations
<ul style="list-style-type: none"> <li>The CAPP SRS was originally named the CAPP Institutional Rating Scale or CAPP IRS. The name was recently changed to better reflect the nature and intended uses of the test in community as well as institutional environments.</li> <li><a href="#">Dawson and colleagues (2012)</a> found that there were both strengths and challenges to using the CAPP-IRS. The format of rating items on the CAPP-IRS requires assessors to gather and consider a broader range of information. This is beneficial in providing a more comprehensive overview of cases; however, it also increases the time and effort involved in an assessment.</li> </ul>

- It is recommended that interviewers are initially paired to accommodate the extent of information collected as part of a CAPP assessment. It is also recommended that interviewers consistently debrief each other after interviews to ensure the correct information is gathered ([McCormick, 2004](#))
- A study by [Kreis and colleagues \(2012\)](#) employed 132 international mental health professionals to rate the symptoms of the CAPP in terms of their representativeness of psychopathy. The content validity of the CAPP was found to be good, with the majority of symptoms being highly representative of psychopathy in sensitivity and specificity. The items with the lowest prototypicality ratings were lacks concentration, lacks pleasure and unstable self-concept.
- Construct validity for the CAPP SRS was found to be good, with it discriminating between three psychopathic traits without relying on the assessment of criminal behaviour ([Florez et al., 2018](#)).
- The internal consistency of the CAPP-IRS (now CAPP SRS) was found to be good, except for the Cognition and Emotional Domains ([De Page, Mercenier and Titeca, 2018](#)).
- Convergent validity is evident between the PCL-R and the CAPP-IRS (now CAPP SRS), supporting that they assess the same underlying psychopathy construct ([Sandvik et al., 2012](#)).
- Practitioners should note that this is a clinical tool that assesses the construct of PPD and is therefore not a risk assessment instrument. It assesses constructs that have relevance for risk formulation and risk management.
- The CAPP SRS assessment is currently under-going validation in many countries.
- The CAPP comprises a family of tests. The current version, the Symptom Rating Scale (CAPP SRS) is designed for use in secure treatment settings (e.g. forensic psychiatric hospital).
- The family of instruments will include; (1) Informant Rating Scale and (2) Clinical Interview.
- The CAPP is potentially useful in a variety of settings (e.g. correctional, forensic psychiatric, civil psychiatric, community and family ), rather than being optimised for use in a single setting.
- For more information, visit the following website: <http://capp-network.no>.