APPENDIX A

The following pages contain the forms of the seven surveys used in the CBP.

Overt Behaviour Scale®
(2005. Research version)

Challenging behaviours
Behaviours can be challenging or problematic if they are disruptive, make the client or other people uncomfortable, or go against the rules of community living. Such behaviours lead to an experience of distress or can disrupt things like social relationships and continuance of services. They can also result in significant financial cost to the service system.

What is this questionnaire for?
This questionnaire is designed to clarify the types of observable behaviours that can occur following acquired brain injury (ABI). This can help to show how behaviours may have changed over time and can inform decisions related to clinical interventions. This scale can also be used to measure the frequency of challenging behaviours and the impact that they have on people living and/or working with the client (including family members and service providers).

What does this questionnaire measure?
There are 9 types of behaviour that can be scored on this scale; they are:
- Verbal aggression
- Physical aggression – against objects, against self, against other people
- Inappropriate sexual behaviour
- Perseveration / repetitive behaviour
- Wandering / absconding
- Inappropriate social behaviour
- Adynamia / lack of initiation

It enables you to score the severity, frequency, and impact of each behaviour.

How to use this questionnaire
For each of the 9 types of behaviour there is a heading (e.g., verbal aggression) and a relevant subscale. If your client exhibits no sign of a behaviour, mark the "no" box and go to the next behaviour.

If your client does show this type of behaviour you need to complete the subscale. Here you can indicate more clearly what sort of behaviour occurs. Under each heading there are a number of behaviour descriptions with realistic examples that correspond to increasing levels of severity (shouting is low severity, threats are more severe). Tick each of the types of behaviour observed and rate how frequently they occur and the impact that they have.

* Rate a behaviour only once. If a behaviour appears to fit 2 subscales, use the single most appropriate subscale.

Timeframe
This scale represents behaviour that has occurred over the most recent 3 months.

More information
Developmental and psychometric information regarding the OBS has been published in ..............

Complete instructions, ‘frequently asked questions’, and scoring advice have been published in .................
How to rate behaviours using OBS

**Tick each level that is a problem**
For each type of behaviour there are a number of descriptions with examples that illustrate different levels of severity. Select the level(s) with a description or example that best represents the sorts of behaviour(s) that you have observed by placing a tick (4) in this column.

Remember, these behaviours are only examples; if you have seen behaviours that are similar, but are not exactly the same, then tick this description.

**Frequency**
Rate how frequently the behaviour occurs using a number from 1 to 5 with the following definitions:

1 = less often than once per month
2 = once a month or more
3 = once a week or more
4 = once a day
5 = multiple times each day

**Impact (distress or disruption)**
'Impact' means the amount of emotional distress and/or practical disruption that a challenging behaviour causes. For example, 'impact' refers to your experience of stress, worry, concern, or fear as a result of the behaviour. But 'impact' can also refer to practical difficulties including carer burnout or injury, needing additional staff, altered procedures, dealing with complaints from families or other residents, or having to acquire additional supports such as psychiatrists, police, or ABI consultants. Disruption often translates into additional costs.

Rate how much this behaviour impacts upon yourself and/or other people by using a number from 1 to 5 and the following definitions:

1 = no impact
2 = minor impact
3 = moderate impact
4 = severe impact
5 = extremely severe impact

<table>
<thead>
<tr>
<th>VERBAL AGGRESSION</th>
<th>Severity</th>
<th>Levels</th>
<th>Frequency (rate 1...5)</th>
<th>Impact (rate 1...5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the client shown any verbal aggression?</td>
<td>NO ☐ (go to next behaviour)</td>
<td>TICK each level that is a problem (4)</td>
<td>1 = &lt; 1/month</td>
<td>1 = no impact</td>
</tr>
<tr>
<td></td>
<td>YES ☑ (rate the subscale below)</td>
<td></td>
<td>2 = 1/month or more</td>
<td>2 = minor</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3 = 1/week or more</td>
<td>3 = moderate</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4 = 1/day</td>
<td>4 = severe</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5 = multiple daily</td>
<td>5 = extreme</td>
</tr>
</tbody>
</table>

1 Makes loud noises, shouts angrily, is clearly not directed at some other person (e.g., “bloody hell”)

2 Makes mild personal insults clearly directed at some other person but does not include swearing/offensive sexual comments (e.g., “You are stupid,” “idiot.”).

3 Swearing, use of foul language, moderate threats clearly directed at others or self (e.g., “F--- off you bastard!”).

4 Makes clear threats of violence directed towards others or self (e.g., “I'm going to kill you!” or “I'm going to finish myself!”) or requests help to control self (i.e., expresses anxieties that they will engage in aggressive act beyond own control unless someone make some immediate intervention). This includes suicidal threats.

<table>
<thead>
<tr>
<th>PHYSICAL AGGRESSION</th>
<th>Severity</th>
<th>Levels</th>
<th>Frequency (rate 1...5)</th>
<th>Impact (rate 1...5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the client shown any physical aggression?</td>
<td>NO ☐ (go to next behaviour)</td>
<td>TICK each level that is a problem (4)</td>
<td>1 = &lt; 1/month</td>
<td>1 = no impact</td>
</tr>
<tr>
<td></td>
<td>YES ☑ (rate the subscale below)</td>
<td></td>
<td>2 = 1/month or more</td>
<td>2 = minor</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3 = 1/week or more</td>
<td>3 = moderate</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4 = 1/day</td>
<td>4 = severe</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5 = multiple daily</td>
<td>5 = extreme</td>
</tr>
</tbody>
</table>

**Physical aggression against objects**
Slams doors, scatters clothing, makes a mess in clear response to some antecedent. 1

Throws objects down (without some other person at risk of being hit by the object), kicks furniture without breaking it, marks the wall. 2

Breaks objects, smashes windows. 3

Sets fire, throws objects dangerously (i.e., some other person is at risk of being hit by the object(s) thrown but is not actually hit). 4

If the object thrown does hit someone score this as Physical aggression against other people.

**Physical acts against self**
Picks or scratches skin, hits self, pulls hair (with no or minor injury only). 1

Bangs head, hits floor into objects, throws self onto floor or into objects (hurts self without serious injury). 2

Inflicts small cuts or bruises, minor burns to self. 3

Multirates self, causes deep cuts, bites that bleed, internal injury, fracture, loss of consciousness, loss of teeth. This includes suicide attempts. 4

**Physical aggression against other people**
Makes threatening gesture that is clearly directed towards some other person, swings at people, grabs at clothes. 1

Strikes, kicks, pushes, pulls hair (without significant injury) to person(s) aggression directed at. 2

Attacks others, causing mild-moderate physical injury (bruises, spray, whips) to person(s) aggression directed at. 3

Causes severe physical injury (broken bones, deep lacerations, internal injury) to person(s) aggression directed at. 4

37 ACI Challenging Behaviour Project: Adults
### INAPPROPRIATE SEXUAL BEHAVIOUR

<table>
<thead>
<tr>
<th>Has the client shown any inappropriate sexual behaviour?</th>
<th>Severity</th>
<th>Levels</th>
<th>Frequency (rate 1...5)</th>
<th>Impact (rate 1...5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO ( \beta ) (go to next behaviour)</td>
<td>1</td>
<td>Tick each level that is a problem (4)</td>
<td>1 = no impact</td>
<td></td>
</tr>
<tr>
<td>YES ( \beta ) (rate the subscale below)</td>
<td></td>
<td></td>
<td>2 = minor</td>
<td></td>
</tr>
</tbody>
</table>

- **Sexual talk**
  - Comments of a sexual nature (e.g., “I’ve got a big dick.”, “I want to make babies with you.”, “You’ve got nice tits.”, “I could give you a good time.”) where comments may be face-to-face or in the form of phone calls or letters.
  - Explicit accounts of sexual activities (e.g., “When I am with a woman I like to . . .”).

- **Touching (non genital)**
  - Touching other people who do not want to be touched (but contact does not involve genitals). For example kissing hand or arm, putting arm around shoulder, putting someone’s knee, rubbing or caressing arm or leg or back.
  - Also includes touching clothing (e.g., lifting skirts).

- **Exhibitionism**
  - “Flashing”, exhibiting genitals, undressing in public.
  - Failing to dress (e.g., Walking about house without clothes on when residents could be or are present. Answering door when naked).

- **Masturbation**
  - Masturbation in a public or shared setting when other people are in the area (e.g., masturbating in a car in a public carpark where passers by may see; masturbating in a common area in a supported residential setting.).

- **Touching (genital)**
  - Touching (or making attempts to touch) other people’s breasts, buttocks, or genitals (e.g., groping staff who walk by, fondling breasts of support workers, pulling other’s hands toward own groin).

- **Coercive sexual behaviour, Rape**
  - Attempt to forcibly undoess another person.
  - Use of threat to obtain sex.
  - Sexual penetration of another person who has not consented.

*Victim details can be noted here* (The legal consequences of inappropriate sexual behaviour can differ depending on the sex and age of the victim.)

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### PERSEVERATION / REPETITIVE BEHAVIOUR

<table>
<thead>
<tr>
<th>Has the client shown any perseverative behaviour?</th>
<th>Severity</th>
<th>Levels</th>
<th>Frequency (rate 1...5)</th>
<th>Impact (rate 1...5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO ( \beta ) (go to next behaviour)</td>
<td>1</td>
<td>Tick each level that is a problem (4)</td>
<td>1 = no impact</td>
<td></td>
</tr>
<tr>
<td>YES ( \beta ) (rate the subscale below)</td>
<td></td>
<td></td>
<td>2 = minor</td>
<td></td>
</tr>
</tbody>
</table>

- Engages in prolonged continuation and repetition of a behaviour that has not resulted in physical harm (e.g., continued, persistent tapping, writing same letter over and over, unrolling entire toilet roll, asking the same question repeatedly. “Do you watch the Bill?” “Will you marry me?”)

- Engages in prolonged continuation and repetition of a behaviour that has resulted in minor physical harm (e.g., continued, persistent touching, rubbing, or scratching leading to skin irritation; remaining in shower until skin is shriveled).

- Engages in prolonged continuation and repetition of a behaviour that has resulted in serious harm (e.g., continued, persistent eye rubbing; riding an exercise bike and only stopping upon exhaustion).

### WANDERING / ABSCONDING

<table>
<thead>
<tr>
<th>Has the client shown any wandering/absconding?</th>
<th>Severity</th>
<th>Levels</th>
<th>Frequency (rate 1...5)</th>
<th>Impact (rate 1...5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO ( \beta ) (go to next behaviour)</td>
<td>1</td>
<td>Tick each level that is a problem (4)</td>
<td>1 = no impact</td>
<td></td>
</tr>
<tr>
<td>YES ( \beta ) (rate the subscale below)</td>
<td></td>
<td></td>
<td>2 = minor</td>
<td></td>
</tr>
</tbody>
</table>

- Going into areas that are prohibited but where there no or low risk of harm (e.g., entering other resident’s rooms, staff areas, kitchen).

- Leaving the familiar, safe, environment when there is a good risk of becoming lost or seriously harmed (e.g., nursing home resident attempting to return to family home, walking onto freeways, needing to be located/recovered by police).

- Escapes secure premises (e.g., through a doorway left open, by using security door codes, by climbing over fence).
  - May physically resist attempts to stop such escape (e.g., wrestles with or pushes staff who attempt to stop or restrain them).
## Inappropriate Social Behaviour

<table>
<thead>
<tr>
<th>Severity</th>
<th>Levels</th>
<th>Frequency</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tick each level that is a problem</td>
<td>(rate 1 ... 5)</td>
<td>(rate 1 ... 5)</td>
</tr>
<tr>
<td>NO</td>
<td>p</td>
<td>1 = no impact</td>
<td>2 = minor</td>
</tr>
<tr>
<td>YES</td>
<td>p</td>
<td>3 = moderate</td>
<td>4 = severe</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 = extreme</td>
<td></td>
</tr>
</tbody>
</table>

### Socially awkward
- Inappropriate laughter.
- Failure to monitor personal hygiene (e.g., does not shower regularly).
- Excessive apologising or thanking.
- Standing too close to strangers.
- Failure to pick up on nonverbal cues (that others are bored, the joke was not funny, the conversation is over).

### Nuisance / annoyed
- Interrupts other people's conversations.
- Actively does things to seek attention (e.g., spills food, rings buzzer, "Nurse, can you come here?")
- Inconsiderate of other people (e.g., hogging TV channel or remote control)
- Nagging, impatient (e.g., always wanting something else to be done; can not tolerate waiting for supermarket queues)
- "Butts in" to other people's affairs. (e.g., advising management on how to improve residence, reporting on other clients' activities.)

### Noncompliant / oppositional
- Responds "no" to prompts to do things. Refuses to discuss problem behaviours with staff.
- Will not follow toilet or shower routines. Refuses to take medication.
- Rejects or dismisses service providers who are helpful with home care.
- Intentional lying that is not due to poor memory (e.g., denying drug use or stealing: fabricating stories to cover tracks)
- Will not (as opposed to Can not) follow rules. (e.g., leaving without telling someone where s/he is going)

### Petty crime or Unlawful behaviour
- Driving while under influence.
- Fraud (e.g., writing dishonoured cheques).
- Stealing (e.g., steals cigarettes from other residents, steals clothes or food from shops; materials from building sites)

### Presents a danger/risk to self or others
- Lights fires inappropriately. (e.g., smoking in room, burning rubbish in bin, starting bonfire near gas cylinder)
- Crosses road without evaluating traffic. Wheeled wheelchair in middle of road.
- Climbs ladders when perception and / or balance impaired.
- Excessive use of alcohol, cigarettes, or other substances where that is the key behaviour leading to risk or actual harm to self or others.
- Uses provision of sex to gain access to goods (such as money, cigarettes, drinks) or services.

### Adynia / Lack of Initiation

**Explanation**
This behaviour is different from the others because it is a lack of overt behaviour. Adynia behaviour is characterised by a lack of motivation, initiative, or interest in day-to-day activities.

The person has difficulty getting tasks started.

For example, they may not wash, eat, or drink, shower or groom themselves without prompting from others. They may sit on the couch all day, not initiate social conversation or attend social activities without someone taking them. The person may engage in activities if someone else prompts them.

### Adynia / Lack of Initiation

<table>
<thead>
<tr>
<th>Severity</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>i.e., Amount of prompting required</td>
<td>(rate 1 ... 5)</td>
</tr>
<tr>
<td>1= less than once/day</td>
<td>1 = no impact</td>
</tr>
<tr>
<td>2= approx. once/day</td>
<td>2 = minor</td>
</tr>
<tr>
<td>3= more than twice/day</td>
<td>3 = moderate</td>
</tr>
<tr>
<td>4= many times/day</td>
<td>4 = severe</td>
</tr>
<tr>
<td>5=all tasks, everyday</td>
<td>5 = extreme</td>
</tr>
</tbody>
</table>

### Examples
- Once asked to "wash the dishes", the person may then commence and complete the task.
- Some people need more prompts: they might only wash dishes and then need another prompt for cutlery: "okay, you’ve finished the plates, what about the cutlery?"
- In several cases, a person may not eat despite having a meal placed in front of them or fail to wash himself or herself even if standing under the shower. They would require constant prompts such as "put some soap on the washer, soap up your arms, now rinse etc."
Patient Name___________________________________  
Rater___________________________________  
Date Completed___________________________________

Disability Rating Scale (DRS)

### Arousability, Awareness, & Responsivity

<table>
<thead>
<tr>
<th>Eye Opening</th>
<th>Communication Ability</th>
<th>Motor Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 Spontaneous</td>
<td>0 Oriented</td>
<td>0 Obeying</td>
</tr>
<tr>
<td>1 To Speech</td>
<td>1 Confused</td>
<td>1 Localizing</td>
</tr>
<tr>
<td>2 To Pain</td>
<td>2 Inappropriate</td>
<td>2 Withdrawing</td>
</tr>
<tr>
<td>3 None</td>
<td>3 Incomprehensible</td>
<td>3 Flexing</td>
</tr>
<tr>
<td></td>
<td>4 None</td>
<td>4 Extending</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 None</td>
</tr>
</tbody>
</table>

### Cognitive Ability for Self Care Activities

**Knows how and when to feed, toilet or groom self**

<table>
<thead>
<tr>
<th>Feeding</th>
<th>Toiling</th>
<th>Grooming</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.0 Complete</td>
<td>0.0 Complete</td>
<td>0.0 Complete</td>
</tr>
<tr>
<td>0.5</td>
<td>0.5</td>
<td>0.5</td>
</tr>
<tr>
<td>1.0 Partial</td>
<td>1.0 Partial</td>
<td>1.0 Partial</td>
</tr>
<tr>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>2.0 Minimal</td>
<td>2.0 Minimal</td>
<td>2.0 Minimal</td>
</tr>
<tr>
<td>2.5</td>
<td>2.5</td>
<td>2.5</td>
</tr>
<tr>
<td>3.0 None</td>
<td>3.0 None</td>
<td>3.0 None</td>
</tr>
</tbody>
</table>

### Dependence on Others

**Level of Functioning**

**Physical & cognitive disability**

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.5</th>
<th>1.0</th>
<th>1.5</th>
<th>2.0</th>
<th>2.5</th>
<th>3.0</th>
<th>3.5</th>
<th>4.0</th>
<th>4.5</th>
<th>5.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete Independent</td>
<td></td>
<td>Independent in special environment</td>
<td></td>
<td>Mildly Dependent-Limited assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Person in home</td>
<td></td>
<td></td>
<td></td>
<td>Non-resident helper</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Psychosocial Adaptability

**Employability**

As full time worker, homemaker, student

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.5</th>
<th>1.0</th>
<th>1.5</th>
<th>2.0</th>
<th>2.5</th>
<th>3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Restricted</td>
<td></td>
<td>Selected jobs, competitive</td>
<td></td>
<td>Sheltered workshop, Noncompet.</td>
<td></td>
<td>Not Employable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.0</th>
<th>4.5</th>
<th>5.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistance with all major activities, all times</td>
<td></td>
<td>24 hour nursing care</td>
</tr>
</tbody>
</table>

**Total Score (sum all scores) ________**

Revised 2/99 Santa Clara Valley Medical Center
Summary of rating instructions:

1. Rate each scale in order from 1 to 12.
2. Do not include information rated in an earlier item except for item 10 which is an overall rating.
3. Rate the MOST SEVERE problem that occurred during the previous 2 weeks.
4. All scales follow the format:
   0 = No problem
   1 = minor problem requiring no action
   2 = mild problem but definitely present
   3 = moderately severe problem
   4 = severe to very severe problem

Rate Scale 9 if not known.

1. **Active Disturbance of Social Behaviour** e.g. aggressive, disruptive or agitated behaviour, uncompromising, resistive, or disulful behaviour.
   
2. **Severe problems** e.g. persistent and/or frequent destructive acts with major adverse consequences, incapacitation from alcohol/drug problems.
   
3. **Problems associated with hallucinations or delusions** or confabulations which are rated at Scale 1.
   
4. **Self directed injury**.
   
5. **Scales follow the format**
   
6. **Problems associated with hallucinations or delusions or confabulations**.
   
7. **Problems with depressive symptoms**.
   
8. **Other mental and behavioural problems**.
   
9. **Problems with relationships**.
   
10. **Problems with living conditions**.

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# HoNOS-ABI

**Health of the Nation Outcome Scales for Acquired Brain Injury**

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**Severe** problems identified in the relationship by the patient and/or other carers.

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**Glossary**

- **Harm**
- **Benevolent**
- **Active**
- **Leisure**
- **Social**
- **Relationship**
- **Safety**
- **Cognitive**
- **Communication**
- **Cultural**
- **Language**
- **Activities of daily living**
- **Social participation**
- **Occupational therapy**
- **Physical medicine**
- **Rehabilitation**

keeping any disability rated at Scale 10 to the lowest level possible and minimising any risk, and supportive of self-help, the patient is satisfied with their accommodation.

1. Accommodation is reasonably acceptable with only minor or transient problems related primarily to the patient's preferences rather than any significant problems or risks associated with their environment (e.g., poor access, not preferred option, doesn't like food).

2. Basic needs are met but significant problems with one or more aspects of the accommodation and/or regime (e.g., lack of proper adaptation to optimum function relating, for instance to stairs, lifts or other problems or access), may be associated with risk to patient (e.g., of injury) which would be otherwise reduced.

3. Distressing/multiple problems with accommodation, e.g. some basic necessities absent (e.g. unsatisfactory and/or unreliable heating, lack of proper cooking facilities, inadequate sanitation), clear elements of risk to the patient resulting from aspects of the physical environment.

4. Accommodation is unacceptable, e.g. lack of basic necessities, patient is at risk of eviction, or “roofless”, or living conditions are otherwise intolerable making patient’s problems worse and/or placing them at high risk of injury.

12. Problems with activities.

- Rate the overall level of problems with the quality of the day-time environment. Is there help to cope with disabilities, and opportunities for maintaining or improving occupational and recreational skills and activities? Consider factors such as stigma, lack of qualified staff, lack of funding, lack of access to supportive facilities e.g. staffing and equipment of day centres, social clubs etc.

- Rate the level of functional disability level, rated at Scale 10, if the patient refuses to take part, or is too antisocial to take part, in activities which are necessary/valuable, rated at appropriate scale.

NB: Rate the patient’s usual situation. If in acute ward, rate activities during period before admission. If in rehabilitation unit and close to discharge, rate confirmed discharge arrangements.

0: Patient’s day-time environment is acceptable, helpful in keeping any disability rated at Scale 10 to the lowest level possible and maximising autonomy

1: Minor or temporary problems e.g. good facilities available but not always at appropriate times for the patient's problems worse or patient refuses services offered

2: Limited choice of activities; e.g. insufficient carer or professional support, useful day setting available but for very limited hours.

3: Mislaid deficiency in skills and support required to help optimise activity level and autonomy. Little opportunity to use skills or to develop new ones; unskilled care difficult to access

4: Lack of any effective opportunity for day-time activities makes the patient’s problems worse or patient refuses services offered which might improve their situation

Amended from HoNOS 65+ by Simon Fleminger on behalf of the UK Psychiatrists Brain Injury Group June 1999

Comments
- In particular on any difficulties with the rating scale

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Care and Needs Scale (CANS) – 25 May 2004

<table>
<thead>
<tr>
<th>Group A: CANS Levels 8, 7, 6 or 5: Requires nursing care, assistance and/or surveillance 24 hours per day.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needs contact for occupational activities, interpersonal relationships and/or living skills.</td>
</tr>
<tr>
<td>Level</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>1</td>
</tr>
</tbody>
</table>

Group B: CANS Levels 4, 3 or 2: Requires assistance, supervision, direction and/or cueing for basic ADLs

- Personal hygiene/toileting
- Bathing/dressing
- Simple food preparation

Group C: CANS Levels 5, 4, 3 or 2: Requires assistance, supervision, direction and/or cueing for instrumental ADLs and/or social participation

- Shopping
- Housework/home maintenance
- Medication use
- Money management
- Everyday devices (e.g., telephone, television)
- Transport and outdoor surfaces
- Parenting skills
- Interpersonal relationships
- Leisure and recreation/leisure
- Employment/school

Group D: CANS Levels 4, 3 or 2: Requires support

- Informational supports (e.g., advice)
- Emotional supports

Group E: CANS Level 1: Fully independent

- Lives fully independently, with or without physical or other aids (e.g., handrails, diary notebooks), and allowing for the usual kinds of informational and emotional supports the average person uses in everyday living

---

**HoNOS-ABI Score Sheet**

<table>
<thead>
<tr>
<th>Rate 9 if not known or Not applicable</th>
<th>Circle the score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Disturbance of Social Behaviour</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Self directed injury</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problem Drinking or Drug use</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Cognitive Problems</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Physical illness or disability problems</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problems with hallucinations / delusions / confabulation</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problems with depressive symptoms</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Other mental and behavioural problems</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problems with relationships</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problems with activities of daily living</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problems with living conditions</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>Problems with activities</td>
<td>0 1 2 3 4</td>
</tr>
</tbody>
</table>

Date: ___________________________  
Name: ___________________________  
Age: ___________________________  
Date of Injury: ___________________________  
MRN: ___________________________  

Section 1: Type of care and support needed  
Section 2: Length of time that can be left alone

---

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ACI Challenging Behaviour Project: Adults 42
## BACKGROUND INTERVIEW

1. What is the person’s current occupation?:

2. What are his/her work duties at present?:

3. What was his/her job at the time of the injury?:

4. What were his/her work duties in that job?:

5. How many jobs has he/she had since the injury (not including work trials or voluntary work)?:

6. What are/were his/her leisure interests, recreation, hobbies, and club membership, at present and at time of injury?:

   **6A. AT TIME OF INJURY**

   **6B. AT PRESENT**

7. What is/was his/her weekly program of work, leisure/recreational activities at present and at time of injury?:

   **7A. AT TIME OF INJURY**

   **7B. AT PRESENT**

8. a) What is his/her marital status at present?:

   b) What was it at the time of the injury?:

9. a) Who is in his/her circle of close friends at present?:

   b) Who was in his/her circle of close friends at the time of the injury?:

10. a) Who does he/she live with at present?:

    b) Who did he/she live with at the time of the injury?:

---

**Table:**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Sex: _ / _</th>
<th>ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: / /</td>
<td>Date of injury: / /</td>
<td>DoB: / /</td>
</tr>
<tr>
<td>Cause of injury:</td>
<td>Duration of coma:</td>
<td>Duration of PTA</td>
</tr>
</tbody>
</table>
### WORK AND LEISURE

1. Current work: How do you rate work (or study), or the type of work (study)?
   
   *If a student, answer the question in this section in terms of changes in studies*
   
   - **Very good:** ................................................................. 4
   - **A little difficulty:** Works (studies) less than average hours per week, OR work duties (studies) are easy/light ones............................................................... 3
   - **Definite difficulty:** Works casually, OR has some help from others in doing some work (study) ............ 2
   - **A lot of difficulty:** Unemployed, OR in rehabilitation, OR in a supported work program, OR do volunteer work, OR receives remedial assistance in studies ................................. 1
   - **Very poor:** Unable to work (study) at present ................................................................. 0

2. Work skills: How do you rate work (study) skills?
   
   - **Very good:** ................................................................. 4
   - **A little difficulty:** For example, has to put in a lot of effort to get good results, gets tired easily, loses concentration ................................................................. 3
   - **Definite difficulty:** For example, sometimes makes mistakes................................................. 2
   - **A lot of difficulty:** For example, he or she is slow, work is of poor quality ............................ 1
   - **Very poor:** For example, needs constant supervision and/or reminders .................................. 0

3. Leisure: How do you rate the number or type of leisure activities or interests?
   
   - **Very good:** ................................................................. 4
   - **A little difficulty:** Has leisure activities and interests, but does not do them often ................. 3
   - **Definite difficulty:** Definite difficulties in developing and doing leisure activities and interests ..... 2
   - **A lot of difficulty:** A lot of difficulty developing and doing leisure activities and interests .......... 1
   - **Very poor:** Does not have any leisure activities or interests at present .................................. 0

4. Organising activities: How do you rate the way he/she organises work and leisure activities?
   
   - **Very good:** ................................................................. 4
   - **A little difficulty:** For example, needs prompts or supports from others............................... 3
   - **Definite difficulty:** Fairly dependent on other people to organise activities, e.g. others suggest what to do and how to go about it’................................................................. 2
   - **A lot of difficulty:** Needs other people to do the organising, e.g. making arrangements, providing transport................................................................. 1
   - **Very poor:** Dependent on other people to suggest and organise activities at present.............. 0

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### RELATIONSHIPS

#### 5. Spouse or partner: Does he/she have a partner or spouse?

**a) If yes, how do you rate the relationship?**

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td>A little difficulty</td>
<td>Not good, but still able to get along together, and if it broke down has the skills to form new relationship</td>
</tr>
<tr>
<td>Definite difficulty</td>
<td>Definite difficulties, but has the skills to form and also probably maintain a new relationship</td>
</tr>
<tr>
<td>A lot of difficulty</td>
<td>Might have the skills to form a new relationship</td>
</tr>
<tr>
<td>Very poor</td>
<td>Relationship is extremely limited (e.g., partner is a primary caretaker) and does not have the skills to form a new relationship</td>
</tr>
</tbody>
</table>

**b) If no, how do you rate the ability to form and maintain such a relationship?**

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td>A little difficulty</td>
<td>Has the skills to form and maintain a new relationship</td>
</tr>
<tr>
<td>Definite difficulty</td>
<td>Has the skills to form and also probably maintain a new relationship</td>
</tr>
<tr>
<td>A lot of difficulty</td>
<td>Might have the skills to form a new relationship</td>
</tr>
<tr>
<td>Very poor</td>
<td>Does not have the skills to form a new relationship</td>
</tr>
</tbody>
</table>

#### 6. Family: How do you rate the relationships with other family members?

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td>A little difficulty</td>
<td>Not good, but still able to get along together</td>
</tr>
<tr>
<td>Definite difficulty</td>
<td>Definite difficulties, but still sees family</td>
</tr>
<tr>
<td>A lot of difficulty</td>
<td>A lot of difficulties getting along with some family members</td>
</tr>
<tr>
<td>Very poor</td>
<td>Relationship is extremely limited and there has been breakdown</td>
</tr>
</tbody>
</table>

#### 7. Friends and other people: How do you rate the relationships with other people outside family (such as close friends, work mates, neighbours)?

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td>A little difficulty</td>
<td>Not good, but has close friends, makes new friends, and gets along with work mates and neighbours</td>
</tr>
<tr>
<td>Definite difficulty</td>
<td>Definite difficulties, but still sees some friends once a month or more and can make new friends</td>
</tr>
<tr>
<td>A lot of difficulty</td>
<td>Only sees a few friends (or other people outside family), and does not make new friends easily</td>
</tr>
<tr>
<td>Very poor</td>
<td>Does not see any friends (or other people outside the family)</td>
</tr>
</tbody>
</table>

#### 8. Communication: How do you rate the communication skills (that is, talk with other people and understand what others say)?

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td>A little difficulty</td>
<td>For example, rambles and get off the point, talk is sometimes inappropriate, has some trouble finding the words to express himself/herself</td>
</tr>
<tr>
<td>Definite difficulty</td>
<td>For example, difficulties thinking of things to say, joining in talk with groups of people, only talks about himself/herself</td>
</tr>
<tr>
<td>A lot of difficulty</td>
<td>For example, has trouble understanding what people say</td>
</tr>
<tr>
<td>Very poor</td>
<td>Communication is almost impossible</td>
</tr>
</tbody>
</table>
### LIVING SKILLS

#### 9. Social Skills: HOW DO YOU RATE THE SOCIAL SKILLS AND BEHAVIOUR IN PUBLIC?
- **Very good:** For example, is awkward with other people, does not worry about what other people think or want.
- **A little difficulty:** For example, can act in a silly way, is not as tactful or sensitive to other people’s needs.
- **Definite difficulty:** For example, dependent on other people, is socially withdrawn, has difficulty interacting appropriately with other people.
- **A lot of difficulty:** For example, has temper outbursts in public, requires supervision when with other people.
- **Very poor:** For example, has temper outbursts in public, requires supervision when with other people.

#### 10. Personal habits: HOW DO YOU RATE THE PERSONAL HABITS (E.G. HIS/HER CARE IN CLEANLINESS, DRESSING AND TIDINESS)?
- **Very good:**
- **A little difficulty:** For example, does not take much care.
- **Definite difficulty:** Attends to own hygiene, dress and tidiness, but has definite difficulties in this area; needs supervision.
- **A lot of difficulty:** Needs prompts, reminders or advice from others, but responds to these; needs stand-by assistance.
- **Very poor:** Needs prompts, reminders or advice from others, but is unwilling to respond to these; needs hands-on assistance.

#### 11. Community travel: HOW DO YOU RATE THE USE OF TRANSPORT AND TRAVEL AROUND THE COMMUNITY?
- **Very good:**
- **A little difficulty:** Unable to use some forms of transport (e.g. driving a car) but can still get around in the community by using other forms of transport without help.
- **Definite difficulty:** Definite difficulty using transport, but after training can travel around the community on his/her own.
- **A lot of difficulty:** Needs assistance to plan use of transport, but with such help can travel around the community on his/her own.
- **Very poor:** Is unable to go out into the community on his/her own.

#### 12. Accommodation: HOW DO YOU RATE THE LIVING SITUATION?
- **Very good:**
- **A little difficulty:** Lives in the community, but emotional or social supports provided by other people, such as family, friends or neighbours. Could not be left alone without supports for a two-week period.
- **Definite difficulty:** Lives in the community, but could not be left alone for a weekend unless someone checked that everything was OK.
- **A lot of difficulty:** Lives in the community but in supported accommodation, such as a group home, boarding house, transitional living unit, in family home but requires daily supervision or assistance.
- **Very poor:** Needs care, which may be at home requiring extensive, daily supervision or care OR in a facility, e.g., a nursing home, residential service, rehabilitation unit.