

Supports Intensity Scale (SIS) Assessment Information

SIS Purpose: To measure the pattern and intensity of a person's support needs for a variety of activities in various settings.

SIS measures supports for the following activities:

- Home Living
- Employment
- Protection & Advocacy
- Community Living
- Health and Safety
- Exceptional Medical Support Needs
- Lifelong Learning
- Social
- Exceptional Behavior Support Needs

SIS Questions are asked using the following format: What support does the person need to be successful: + (verb + an activity or task?) ex. What supports do you need to be successful + preparing + food?

Successful means: Being involved in all aspects of an activity similar to that of a typically functioning person without disabilities.

- **SIS measures three dimensions of support by rating the "Type, Frequency and amount of support need to be successful in performing a task or participating in an activity.** (Provide and review SIS Rating key)
- **An example of how support needs are rated for an activity in SIS is:** What support does the person need to be successful preparing food?
- **There are some rating limitations for some activities/tasks in the SIS.** Ex. Preparing food does not allow a frequency score of 4 (hourly or more frequently) since the SIS authors determined that incidences of this occurring are not "typical."
- **There are no "Right" or "Wrong" answers.** It is important that ratings reflect the supports needed for client to be successful in performing a task or participating in an activity.
- **All questions on mandatory panels must be answered for the assessment to be complete.** The legislature has directed DDD to assess all clients with a common, standardized assessment process. Information in the SIS affects algorithms, which are used in determining support needs and amount of service if you are approved to receive a DDD paid service.
- **The next SIS question will be asked once a support rating has been recorded.** A directed interviewing style is used in SIS to reduce the amount of time need to answer 92 questions.
- **There will be additional time at the end of the assessment for questions and discussion**
- **DDD uses a laptop to record assessment information which requires typing during the assessment.**
- **Assessment information is confidential**
- **Before administering the assessment, briefly describe what a "Typical Day" looks like.**

SIS Rating Key

<p>Type of Support: What kind of support should be provided?</p> <p>0 = None 1 = Monitoring 2 = Verbal / Gesture prompting 3 = Partial physical assistance 4 = Full physical assistance</p>
<p>Frequency of Support: How frequently is support needed for this activity?</p> <p>0 = None or less than monthly 1 = At least once a month, but not once a week 2 = At least once a week, but not once a day 3 = At least once a day, but not once an hour 4 = Hourly or more frequently</p>
<p>Daily support Time: On a typical day when support in this area is needed, how much time should be devoted?</p> <p>0 = None 1 = Less than 30 minutes 2 = 30 minutes to less than 2 hours 3 = 2 hours to less than 4 hours 4 = 4 hours or more</p>

Support Needs Ratings for Exceptional Medical and Behavioral Acuity Scales	
Rating	Definition
0	Means the person does not need any support at any time for the medical condition or behavior.
1	Means that some support is needed – This means that caregivers must be continuously aware of the needed supports and may need to provide occasional assistance and monitoring. However, if for some reason support is not provided, there is not an immediate health and safety risks.
2	Means that extensive support is needed – This means that the medical condition or behavior poses an important health and safety risk and if significant support is not provided, there is a likely consequence that the person’s health and safety will be jeopardized. Caregivers must provide regular assistance and supports in most environments.

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Supports Intensity Scale (SIS) Questions

Questions in the SIS focus on identifying the type, frequency, and amount of support a person needs in order to be **successful** in performing a specific activity or task.

All questions must be answered even if the person is not currently interested in the activity.

A Home Living Activities			
A1	Using the toilet	A6	Dressing
A2	Taking care of clothes (includes laundering)	A7	Bathing and taking care of personal hygiene and grooming needs
A3	Preparing food	A8	Operating home appliances
A4	Eating food	A9	Using currently prescribed equipment or treatment
A5	Housekeeping and cleaning		
B Community Living Activities			
B1	Getting from place to place throughout the community (transportation)	B5	Participating in preferred community activities (church, volunteer, etc.)
B2	Participating in recreation/leisure activities in community settings	B6	Shopping and purchasing goods and services
B3	Using public services in the community	B7	Interacting with community members
B4	Going to visit friends and family (transportation)	B8	Accessing public buildings and settings
C Life-Long Learning Activities			
C1	Interacting with others in learning activities	C6	Learning functional academics (reading signs, counting change, etc.)
C2	Participating in training/educational decisions	C7	Learning health and physical education skills
C3	Learning and using problem solving strategies	C8	Learning self-determination skills
C4	Using technology for learning	C9	Learning self-management strategies
C5	Accessing training/educational settings (includes transportation)		

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D		Employment Activities	
D1	Accessing/receiving/job/tasks accommodations	D5	Completing work related tasks with acceptable speed
D2	Learning and using specific job skills	D6	Completing work related tasks with acceptable quality
D3	Interacting with co-workers	D7	Changing job assignments
D4	Interacting with supervisors and/or coaches	D8	Seeking information and assistance from an employer
E		Health & Safety Activities	
E1	Taking medications	E5	Learning how to access emergency services
E2	Avoiding health and safety hazards	E6	Maintaining a nutritious diet
E3	Obtaining health care services	E7	Maintaining physical health and fitness
E4	Ambulating and moving about	E8	Maintaining emotional well-being
F		Social Activities	
F1	Socializing within the household	F5	Communicating with others about personal needs
F2	Participating in recreation and/or leisure activities with others	F6	Using appropriate social skills
F3	Socializing outside the household	F7	Engaging in loving and intimate relationships
F4	Making and keeping friends	F8	Engaging in volunteer work
G		Protection & Advocacy Activities	
G1	Advocating for self	G5	Belonging to and participating in self advocacy/support organizations
G2	Managing money and personal finances	G6	Obtaining legal services
G3	Protecting self from exploitation	G7	Making choices and decisions
G4	Exercising legal responsibilities	G8	Advocating for others

Supports Intensity Scale (SIS) Questions

Identify the support ratings that best describe the supports the person needs regarding the following exceptional medical needs and behaviors.

The following scores are used to describe the support that must be provided for each of the corresponding exceptional medical and behavioral needs.

0 – No Support 1- Some Support 2 – Extensive Support

#	Exceptional Medical Supports	#	Exceptional Behavior supports
1	Inhalation or oxygen therapy	1	Prevention of assaults or injuries to others
2	Postural drainage	2	Prevention of property destruction (e.g., fire setting, breaking furniture)
3	Chest PT	3	Prevention of stealing
4	Suctioning	4	Prevention of self injury
5	Oral stimulation or jaw positioning	5	Prevention of PICA (ingestion of inedible substances)
6	Tube feeding (e.g., nasogastric)	6	Prevention of suicide attempts
7	Parenteral feeding (e.g., IV)	7	Prevention of sexual aggression
8	Turning or positioning	8	Prevention of non-aggressive but inappropriate behavior
9	Dressing of open wound(s)	9	Prevention of tantrums or emotional outbursts
10	Protection from infectious diseases due to immune system impairment	10	Prevention of wandering
11	Seizure management	11	Prevention of substance abuse
12	Dialysis	12	Maintenance of mental health treatments
13	Ostomy care	13	Managing attention seeking behavior.*
14	Lifting and/or transferring	14	Managing uncooperative behavior.*
15	Therapy services	15	Managing agitated/over reactive behavior.*
16	Diabetes Management.*	16	Managing obsessive/repetitive behavior.*
17	Other(s) - Specify:	17	Prevention of other serious behavior problem(s) - Specify: