



**Level of Service Inventory
RESIDENTIAL TREATMENT SERVICES VERSION
FOR USE WITH RTH/F/SRTF
User Manual**



**Oregon Health Authority
DIVISION OF MEDICAL ASSISTANCE PROGRAMS
Quality Assurance and Clinical Services Section**

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Introduction

The Level of Service Inventory for Residential Treatment is a quantitative person centered needs assessment for individuals diagnosed with a mental health condition who have been determined as needing a residential level of care.

The purpose of the LSI is;

To assess the type and level of Medicaid funded services an individual needs in order to reside in the community based setting most appropriate to their level of recovery.

The LSI is not intended to be used as a level of care determination tool. The LSI is intended to measure service needs for individuals already assessed as appropriate for care in a 24-hour licensed residential treatment program or home.

Administering the LSI

Assessor should be a clinician (QMHP or higher).

The LSI is a person centered assessment and **Domains 1 and 2** should be completed through a face to face review with the recipient and in collaboration with the provider, family members, advocates and other professionals when applicable or appropriate.

A review of the items in **Domain 3** should be completed through review of the most recent mental health assessment and treatment plan, consultation with other professionals and review of any recent progress notes or clinical documentation.

A review of the items in **Domain 4** should be based on information from the current provider, prospective provider or recommendations of the inpatient treatment team.

When assessing an individual who is not currently in a hospital or residential setting, recommendations of the current treatment team should weigh predominantly in the assessment of each item and each item should be assessed based on the teams recommendation of services the recipient will likely need in the recommended level of care.

Both the recipient and the provider may comment or provide information when reviewing the items in all domains.

The score from all domains factor in the level of service determination.

Scores should be reporting using the LSI tool.

Scoring the LSI

Scores from each item are subtotaled in each domain. The total of all domain subtotals result in the composite score or the Level of Service Inventory score (LSI score).

A composite score between 0 and 100 will result once all domain sub-scores are added.

The LSI composite score is mapped to a level of service, level of care or rate and can be used to measure progress and outcomes when compared with previous LSI scores.

Supporting clinical documentation requirements

Face to face interview and individual recipient and provider responses weigh predominantly in the scoring of the LSI. Although this is the intended model of assessment for the LSI, the principle of medical appropriateness is applicable and LSI scores submitted for the purpose of payment must be supported by clinical documentation.

Each domain score and assessed need for services or supports must be clearly documented in a clinical record and annotated by a qualified mental health provider.

Examples of appropriate supporting clinical documentation that can be used to support medical appropriateness include;

- Behavioral health assessment
- Behavioral health Treatment Plan
- Residential or hospital progress notes
- Nursing assessment
- LOCUS©

Service Items

The LSI consists of four domains that measure 24 service items. Each item is representative of a specific Medicaid funded service or support. Domains Measure need for Medicaid funded Personal Care, Habilitation, and Rehabilitation or Psychosocial Rehabilitation services.

Domain Rating System

The LSI utilizes a dimensional rating system and descriptive measures to assess level of service in each domain for each service area.

- Each item is given a numerical rating based on a descriptive measure.
- Numerical measures are a number between 0 and 6
- The LSI results in a composite score between 0 and 100.

Service Item descriptions

Each item describes the level of assistance, training or treatment an individual requires to complete the task independently, complete the task with assistance or develop the skills necessary to complete the task with progressively reduced assistance.

Weighted Measures

Some items are weighted with a higher score due to the level of difficulty required to provide the service. For example, assisting with a catheter is weighted higher than assisting with meals due to the difficulty of the task and skill required to provide the service.

Some items are weighted in order to capture the cost associated with providing the service or support. For example, one to one staffing is more costly than providing assistance with hygiene.

Service Items Defined

DOMAIN I: ADL (Personal Care and Habilitation Services)

Personal care services provided to a resident of a licensed residential treatment program include a range of assistance, as developmentally appropriate, and are provided to individuals with behavioral health conditions that enable them to accomplish tasks that they would normally do for themselves if they did not have a behavioral health condition. Assistance may be in the form of hands-on assistance (actually performing a personal care task) or cueing (prompting) so that the individual performs the task by him or herself.

Personal care assistance most often relates to performance of activities of daily living (ADLs) and instrumental activities of daily living (IADLs). ADLs include eating, bathing, dressing, toileting, transferring, and maintaining continence.

IADLs capture more complex life activities and include personal hygiene, light housework, laundry, meal preparation, transportation, grocery shopping, using the telephone, medication management, and money management.

Assistance may be in the form of hands-on assistance (actually performing a personal care task for a person) or cueing (redirecting) so that the person performs the task by him or herself.

Domain 2: IADL (Habilitation Services)

Home Based Habilitation Services

Habilitation services are provided in order to assist an individual to acquire, retain or improve skills in one or more of the following areas: assistance with activities of daily living, cooking, home maintenance, community inclusion and mobility, money management, shopping, community survival skills, communication, self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings

Home Based Habilitation is based on each individual assessment and individual services and support plan to deliver a combination of the following services:

- Assistance w IADL and ADLs
- Staff as needed to support the individual's recovery
- Assistance in obtaining Non Medical Transportation
- Skill development (ADL's, cooking, home maintenance, recreation, community mobility, money management, shopping, community survival skills, educational support)

Scoring Domains 1 and 2

Items 1 through 14 are related to ADL and IADL skill ability or deficit and all items should be rated based on the level of skill currently demonstrated by the recipient. For the purpose of this assessment, "Current" means sustained within the 45 days prior to assessment.

Domain I & 2 Item Definitions

ITEM 1 Maintain Personal Hygiene

This item refers to the ability of the individual to independently perform daily hygiene activities such as bathing, grooming and dressing.

ITEM 2 Self Manage Medication

This item refers to the ability of the individual to independently adhere to prescribed medication and medical orders.

ITEM 3 Use and Maintain Adaptive or Medical Devices including Catheter (cleaning, changing, and emptying)

This item refers to the level of assistance or skills training an individual needs to independently use and maintain prescribed adaptive medical devices such as a CPAP machine or wheelchair or the level of assistance an individual needs to independently clean, change or empty a catheter.

ITEM 4 Feed Self

This item rates the level of assistance an individual needs to eat prepared meals and snacks. Implementation of choking or PICA protocols are included.

ITEM 5 Ambulate and Transfer

This item rates the level of assistance an individual needs to transfer from one location to another, including into and out of bed, into and out of a sitting position, into or out of the shower or on or off the commode.

ITEM 6 Use Toilet and care for bowel or bladder

This item rates the level of assistance an individual needs to toilet themselves, including after toilet hygiene, diapering and assistance with feminine hygiene products.

ITEM 7 Delegated nursing tasks OAR 41 1-034-0010

This item rates the services delegated by a registered nurse that are performed by the provider.

ITEM 8 Manage Finances and Budget

This item rates the level of assistance an individual needs to manage personal finances and funds. Including banking, check writing, budgeting, spending, identifying costs and contacting or communicating with funding sources such as DHS or SSA.

ITEM 9 Plan and Prepare Meals

This item refers to the ability of the individual to independently plan and prepare meals. This includes menu planning, shopping, meal preparation and clean up. Education about healthy food, food safety and kitchen safety are included.

ITEM 10 Clean and Maintain Residence

This item refers to the ability of the individual to independently clean and maintain their immediate living area or to participate in shared household or program maintenance and cleaning.

ITEM 11 Independently Access Transportation

This item rates the level of assistance an individual needs to access transportation. This includes identifying modes of transportation, purchasing tickets, using taxi, arranging medical transportation, using public transportation, identifying routes and communicating with transporters.

ITEM 12 Manage and Attend Medical or Health Appointments

This item rates the level of assistance an individual needs to schedule, attend and follow through with medical or health appointments. This includes managing prescriptions and working with an insurance company.

ITEM 13 Maintain Compliance with Court or Legal Requirements

This item rates the level of assistance an individual needs to comply with court or legal requirements such as attending court dates, meeting the conditions of probation, civil commitment and adhering to legal requirements such as child support or protective orders or maintaining a driver's license and automobile insurance.

ITEM 14 Plan and participate in social, recreational or community activities

This measures the frequency in which a staff assists an individual to plan and participate in social, recreational or community activities. This can include researching, arranging, and participating in social, community or recreational activities and assistance to maintain health and safety when participating in such activities.

Domain 3: Psychosocial Rehabilitation

Rehabilitative Mental Health Services

Mental health rehabilitation services support recipients to achieve the maximum reduction of mental disability and restoration to their highest possible functional level. Services include;

- **Intake evaluation, assessment, screenings and brief intervention treatment**
- **Crisis and Stabilization services**
- **Individual, Group and Family level rehabilitative therapy**
- **Medication management and monitoring**
- **Peer Support**
- **Rehabilitation Mental Health Case Management**
- **Skills training**

Psychosocial Rehabilitation

Psychosocial Rehabilitation Services are medical or remedial services recommended by a physician or other practitioner to reduce impairment to an individual's functioning associated with the symptoms of a mental disorder or to restore functioning to the highest degree possible. Services include

- **Comprehensive Medication Services (Physician)**
- **Individual Therapy**
- **Group Therapy**
- **Family Therapy**
- **Psychiatric Skills Training**
- **Psychiatric Activity Therapy**
- **Behavioral health counseling therapy**
- **Community Psychiatric Supportive Treatment**

Items 15 through 22 are related to assessing how an individual manages the symptoms of a mental illness that cause discomfort, result in adverse consequences or reduce functional ability. For the purpose of assessment, "Current" means within the last 60 days, "Recent" means within the last 120 days.

Behavioral Habilitation Services - are designed to help an individual attain or maintain their maximal level of independence, including the individual's acceptance of a current residence and the prevention of unnecessary changes in residence.

- Services include
- Behavior Support
 - Training and Education- Psychosocial skills
 - Activity Therapy

Domain 3 Item Definitions

ITEM 15 Manage symptoms that pose a physical risk to self

This item rates the recipient's skill or ability to manage symptoms that result in behaviors that place the recipient at risk of harm. This includes current suicidal ideation or actions, self-injurious-behavior, inability to recognize danger such as wandering, walking in traffic, not dressing appropriately for weather, eating foods that significantly exacerbate medical conditions, overdosing with medication (prescribed or over the counter), PICA, maintaining sexual safety or other symptoms of clinical significance that limit an individual's ability to maintain personal physical safety.

ITEM 16 Manage symptoms that pose a physical risk to others

This item rates the recipient's skill or ability to manage symptoms that result in behaviors that place others at risk of physical harm from the recipient. This includes recent homicidal ideation or actions and assaultive behavior, placing others in danger through suggestion, manipulation or dishonesty, not following established health and safety rules, unsafe smoking or other symptoms of clinical significance that limit an individual's ability to maintain the personal physical safety of others.

Item 17 Manage symptoms that reduce ability to control impulses

This item rates the skill or ability to manage symptoms that result in impulsive actions or behaviors that have adverse effects on the recipient, others or the community. This item is different than Items 15 and 16 in that the impulsive behavior does not result in

physical harm to self or others. Examples include recent examples of destroying property, borrowing others belongings without asking, over consumption of food, water or cigarettes, disruptive behavior such as yelling, slamming doors, physical aggression without contact, verbal threats or other symptoms of clinical significance.

Item 18 Manage of symptoms of delusion or disorganized thinking

This item rates the recipient's skill or ability to manage or cope with delusional thoughts or disorganized thinking that result in a functional deficit or adverse consequence. Examples include current fixed delusions, confusion, impaired attention span, intrusive or obsessional thoughts, compulsive behavior, hallucinations or other symptoms of clinical significance.

Item 19 Manage symptoms that result in emotional excesses

This item rates the recipient's skill or ability to manage or cope with current symptoms of emotional excess such as; mania, depression, anxiety, paranoia, hypersensitivity, low frustration tolerance, extreme and sudden mood shifts or other symptoms of clinical significance.

Item 20 Communicate effectively with others

This item rates the recipient's skill or ability to effectively communicate with others which includes current ability to speak clearly, use appropriate tone and volume, use appropriate language, self-advocate, report, listen, repeat and express thoughts, feelings or symptoms to provider.

Item 21 Management of comorbid or co-occurring condition

This item rates the recipient's skill or ability to manage or cope with the symptoms of a co-morbid or co-occurring condition or disorder. This includes managing a substance abuse disorder, managing an intellectual developmental disability, managing a traumatic or acquired brain injury or managing a chronic health or medical condition. This item can be used to rate the skill deficits described in items 15 through 20 when the symptoms are a result of the co-occurring disorder rather than the symptoms of the primary mental health diagnosis.

Domain 4: Person Centered Services and Supports

Program supportive services refer to any changes to the structure or operation of a home or program necessary to ensure the health and safety of an individual or support specified treatment outcomes. Program supportive services include;

- **Staffing levels and scheduling**
- **Modifications or changes to the program schedule, routine or design**
- **Modifications or accommodations to the physical characteristics of the program or home.**

Items 22 through 24 refer to the programmatic supports put in place for an individual to support health and safety requirements or achieve specified treatment goals. For the purpose of assessment, “Current” means within the last 60 days and “Recent” means within the last 120 days.

Domain 4 Item Definitions

Item 22 Modify physical environment, program routine or staffing pattern

This item rates the modifications a provider has been required to make to the physical program structure or plan including alterations or additions to program furniture, yard, automobile, schedule, routine or staffing pattern for the purpose of ensuring health and safety or achieving specified treatment outcomes.

ITEM 23 Provide line of sight supervision in milieu or community

This item measures the amount of time staff of the program is required to maintain line of sight supervision of the individual when in the home or community for the purpose of maintaining health and safety for the individual or others.

ITEM 24 Provide 1:1 Supervision, Support and monitoring

This measures the amount of time a program is required to have a staff supervise or work one on one with an individual for the purpose of maintaining health or safety in the home or community or achieving a specific treatment goal. This refers to a staff that

is assigned to work individually with the recipient and does not provide services to other recipients at the same time.

Descriptive Measures

Within each domain, each service items is rated on a scale between 0 and 6.

The scale and subsequent score is based on the descriptive measures. The descriptive measures include;

Descriptive measures for Domains 1 and 2

Practices skill independently/NA: Recipient can adequately and safely perform task or skill independently without assistance, prompting or supervision or the skill or task is not applicable to the recipient.

Requires prompt or supervision to practice skill: Recipient, when prompted, reminded, supervised or instructed can adequately and safely perform the task or skill.

Requires support and training to practice skill: Recipient, when provided set-up, instruction, demonstration and some assistance can adequately and safely perform the task or skill.

Requires assistance and training to perform skill: Recipient cannot adequately or safely perform the task independently without assistance. Because the recipient has not yet developed the skills to complete the majority portions of each task, they need set-up, instruction and demonstration followed by full assistance to complete the task or skill.

Descriptive measures for Domains 3

Practices skill independently/NA: Recipient can adequately and safely manage symptom independently without assistance, prompting or supervision or the symptom is not applicable to the recipient.

Requires prompt or supervision to practice skill: Recipient, when prompted, reminded, supervised or instructed can adequately and safely manage the symptom through self-assessment and utilizing skills learned through treatment.

Requires support and training to practice skill: Recipient, when provided therapy, instruction and some assistance can adequately and safely manage the symptom by performing some self-assessment and utilizing skills learned through treatment.

Requires assistance and training to perform skill: Recipient cannot adequately or safely manage the symptom without assistance. Because the recipient has not yet developed the skills to cope with or manage the symptom, they need active treatment, individualized therapy, instruction and staff monitoring or support to manage the symptom.

Descriptive measures for Domain 4

Never: The program has not been required to modify the program schedule, the program staffing pattern, provide individualized behavior or symptom supports or modify the physical environment of the program to meet an individual's health and safety needs.

0-7 hours per day: The program is required to modify the program schedule, the program staffing pattern, provide individualized behavior or symptom support or modify the physical environment of the program to meet an individual's health and safety needs between 0 and 7 hours each day.

8-15 hours per day: The program is required to modify the program schedule, the program staffing pattern, provide individualized behavior or symptom support or modify the physical environment of the program to meet an individual's health and safety needs between 8 and 15 hours each day.

16-24 hours per day: The program is required to modify the program schedule, the program staffing pattern, provide individualized behavior or symptom support or modify the physical environment of the program to meet an individual's health and safety needs between 16 and 24 hours each day.

Length of Stay

Residential treatment or residential care for individuals diagnosed with a mental health condition is intended to be an outcome based, transitional, and episodic period of care to provide service and supports in a structured environment that will allow the individual to successfully reintegrate into an independent community-based living arrangement.

Although the LSI can inform the amount of time it may take for an individual to develop the skills to reside in the most independent community based setting possible, the LSI does not provide suggestion for length of stay within a residential program or home. This is because a fixed episode of care or standardized length of stay is not considered medically appropriate in the absence of clinical information supporting a defined length of stay.

Requested length of stay must be based on assessment of individual need and the medical appropriateness of the proposed time for care.