

## **Agency Service Coordination Manual**

### **4.1 Supports Intensity Scale Assessments, Referrals and Reviews**

#### **Background**

The Supports Intensity Scale (SIS) is a standardized assessment tool that the Community Living disABILITY Services (CLDS) program uses to determine how often eligible participants need support, why type of supports they need and how much support they need in areas of daily life. The SIS assessment is completed by an interview with the individual and members of their support network. The CLDS Supports Intensity Scale Policy describes the assessment process.

Agencies will assume the responsibility of making referrals for SIS assessments, reviewing completed assessments for accuracy, using the assessment to inform planning and participating in the verification of extraordinary needs.

Note: should an agency desire training for their staff regarding SIS assessments, please contact the SIS team at [SISMailbox@gov.mb.ca](mailto:SISMailbox@gov.mb.ca).

#### **Process**

##### **Making a SIS Referral**

- Agencies will receive a list of participants who have already completed SIS assessments. Agency designate will be responsible to track those participants without completed assessments and prioritize for referral, based on the following prioritization criteria:
  1. Age of majority participants and newly referred participants to the agency who do not have a completed SIS assessment.
  2. Participants requiring new/updated assessments due to a significant change in support needs.
  3. All other participants living in Supported Independent Living (SIL), Home Share, or participants living in a Shift-Staffed Home who do not have a completed SIS assessment.
- The agency designate will complete the SIS assessment referral form and submit via Secure Email Transfer Service to the SIS team at [SISMailbox@gov.mb.ca](mailto:SISMailbox@gov.mb.ca).
  - Please include contact information for the agency designate in the “Referral Made By” section.
- All communication regarding the scheduling of the assessment will be between the agency designate and the SIS team.

- After addressing the above priorities, agency staff should continue to submit new referrals on a regular basis and review as determined in collaboration with their agency program manager (or comparable authority).
- Prior to each assessment, agency staff should familiarize themselves with the case file and ensure that individuals able to speak to a participant's abilities and support needs are available to attend the assessment. For accuracy of the assessment, it is helpful if individuals from a person's family and support network are invited to attend the assessment. The names of all respondents should be documented, as well as the names of individuals who were invited but did not attend.
- As each referral will be internally prioritized by the SIS Program, there may be a period of time between submission and the assessment; please be in contact with the SIS team if there are updates to the information provided in the referral.

### **Reviewing Completed SIS Assessments**

- Upon receipt of a completed SIS assessment, agency designates are required to read the report in full to confirm information accurately reflects the supports needed by the individual.
  - If the information is accurate, but the Supports Budget is not sufficient to meet the individual's needs, agency designates are encouraged to discuss next steps with their manager, including the Exceptions Review Process.
  - If the information is not accurate:
    - Identify the missing information. Consider whether the missing information is a temporary situation based on circumstances (e.g., a broken leg) or something that impacts the individual long-term or permanently.
    - Consider whether the missing information will:
      - reflect a change in supports needs (Sections 2A, 2B, 2E and Medical and Behavioural Sections); and/or
      - result in a change in scoring (see Appendix A on how supports budgets are calculated).
    - Agency designates are encouraged to discuss these scenarios with their managers.
    - In the event missing information is long-term/permanent and will impact the result of the assessment, agency designates may email the SIS mailbox with the referral, including a brief explanation of the request.
- In the event an individual/Substitute Decision Maker/family member/support network member feel that the SIS policy and procedures were not adhered to, a

request for review of the SIS interview process can be made to the Executive Director of Disability Programs and Specialized Services, as described in the [SIS Request for Review Policy](#) using the [SIS Request for Review Form](#).

### Using SIS Assessments to Inform Planning

- The SIS assessment contains detailed and valuable information about a participant's support needs that can be used to inform all aspects of case management. Agency designates are encouraged to review completed SIS assessments with the participant and their support network, in order to make note of valuable information from the interview and use that information to inform all types of planning (e.g., Person-Centred Plans, Support Plans, Supports Budget Planning).
- “My SIS Review” is a tool that was designed to assist staff in reviewing assessments with participants and their support teams. This is an **optional** tool that agency designates may choose to help facilitate this conversation. See Appendix B for the “My SIS Review” Template and Guide.

### Verification of Extraordinary Needs

- While the support needs of most individuals are identified through the SIS assessment, some needs are not easily or adequately measured through the SIS itself. When the SIS is administered, certain responses require that a series of supplemental questions be asked. Responses to the supplemental questions help to identify people with extraordinary medical or behavioural support needs, based on the following definitions:
  - **Severe Medical Risk** – the verification process is seeking to confirm that the person requires frequent and extensive 1:1 support to address their significant medical needs. In general, this may be defined as support from a nurse (delegated or direct) for 8 hours or more per day, or extensive support for that duration or longer, provided by a combination of a licensed nurse and a direct service staff trained by a nurse. The Supplemental Question itself asks if the person is receiving 24 hours of direct, professional care. However, documentation of 8 hours or more of nurse support (delegated or direct) is the threshold used to indicate the need for extensive support due to medical risks.
  - **Severe Community Safety (Convicted and/or Not Convicted)** – the verification process is seeking to confirm the extent to which the person presents a severe community safety risk. The only difference between the Supplemental Questions 2 and 3 is the distinction between a person that has been convicted of a crime related to these risks and one that has not. For Supplemental Question 2, documentation in the person's record is expected to indicate that he or she has been convicted of a crime related

to the risk behaviour in the past year, or that restrictions are still required in the support plan for convictions that happened longer than a year ago. Documentation should reflect a need for 1:1 staffing requirements for significant portions of the day. If documentation for Supplemental Question 2 does not confirm that a person meets the definition of conviction, but documentation indicates the person meets the criteria for the severe community safety risk, it is appropriate to confirm the person needs additional funding using Supplemental Question 3.

- **Severe Risk of Injury to Self** – the verification for this last severe risk follows closely with the review process for Supplemental Questions 2 and 3. The difference is that the reviewer is looking for documentation that the person presents a serious risk to their own self. Documents should reflect the need for extensive 1:1 support for significant portions of the day to prevent the person from harming themselves. A threshold of at least 8 hours per day of 1:1 exclusive support is used to verify.
- Verification is a case record review conducted to identify individuals with exceptional medical or behavioral support needs who did not automatically meet criteria through their responses to the SIS Exceptional Medical and Behavioral Support Needs section alone.
- Where verification is required, the Service and Support Navigator (SSN) and/or CLDS Program Manager will contact the agency designate to review the case record including: the person-centred plan, support plan, health care plan, case management case notes, current and historical medical information, current and historical legal information, specialist assessment information, behavioral support plans, risk assessments, and any other relevant documentation.
  - Following a thorough review, the agency designate will respond to the SSN and/or CLDS Program Manager, with a recommendation of whether the individual has exceptional medical or behavioral support needs that may result in a change to support budget level. This should include a brief summary justifying the recommendation, based on the criteria described above.
  - The CLDS Program Manager will ultimately be responsible to confirm whether a participant's Support Budget Level will remain the same or be raised to a higher level due to extraordinary needs.

### **Receiving Assigned Support Budget Levels**

- The SSN will distribute a list of agency-managed participants with their corresponding Supports Budget Level on a quarterly basis.

- The SSN will obtain this information by using the SIS Assessment Details Report from inFACT.
- In the event an agency delegate requires a Supports Budget Level sooner, they may contact the SSN to request the level. It is recommended that the agency delegate waits at least four weeks following completion of a SIS assessment prior to requesting the assigned level.

### **Obtaining and Reviewing Previously Completed SIS Assessments**

- In situations where agencies do not have a copy of a completed SIS assessment on file, agency designates should contact the SSN to obtain a copy, including the raw data scores and the level assigned.
- For assessments completed prior to a participant joining the agency as well as for assessments completed with the support of pilot agency staff, it is crucial that agency designates review the results of the assessment to determine if it is currently accurate.
- If agency staff notes that circumstances have significantly changed for the participant since the assessment was completed, or if the results do not seem to accurately capture their support needs, this needs to be addressed with the SIS team.
  - The SIS team may opt to have a new assessment completed, update the existing assessment, or to proceed with an Exception Review. If agency staff do not receive a response from the SIS team, after two attempts to connect on this issue, include Meredith Daun ([Meredith.Daun@gov.mb.ca](mailto:Meredith.Daun@gov.mb.ca)), Supports Intensity Scale Program Manager, in your follow up correspondence.

### **Reassessments**

- In situations where there has been significant long-term change(s) to support needs, (e.g, significant life event, significant deterioration in functioning, significant change in health status, significant change in behavioural status) agency designates may request a new SIS assessment.
- Reassessments are typically considered after five years of the original assessment, where regional resources allow. The completion of initial assessments may be prioritized prior to reassessments being considered.

### **Standards**

- Agencies will assume the responsibility of making referrals for SIS assessments, reviewing completed assessments for accuracy, using the assessment to inform planning and participating in the verification of extraordinary needs.

## 4.1 Supports Intensity Scale Assessments, Referrals and Reviews

### Appendix A: How the Supports Budget Level is Calculated

#### 1. Supports Needs Index Section

Scores indicated here are not current supports, but needed to be successful as others in the community if an individual were to take part in an activity.

Refer to the Support Needs Profile in the SIS Report. Add the standard scores from A (Home Living), B (Community Living) and E (Health and Safety) to determine the SIS Sum. See graphs below.

Example: The A, B and E standard score below equals 16. Without Medical and Behaviour Scores, this standard score of 16 would reflect a Personal Supports Level of 1. (see chart under #2)

#### Support Needs Profile - Graph

The graph provides a visual presentation of the six life activity areas from section 2.

The graph reflects the pattern and intensity of the individual's level of support. The intent of the graph is to provide an easy means to prioritize the life activity areas in consideration of setting goals and developing the Individual Support Plan.

Activities Subscale	Total Raw Score	Standard Score	Percentile	Confidence Interval (95%)
2A. Home Living	13	5	5	4-6
2B. Community Living	12	4	2	3-5
2C. Lifelong Learning	47	9	37	8-10
2D. Employment	29	7	16	6-8
2E. Health and Safety	28	7	16	6-8
2F. Social	36	8	25	7-9
<b>Total:</b>	<b>165</b>	<b>40</b>		
<b>SIS Support Needs Index:</b>	<b>77</b>			
<b>Percentile:</b>	<b>6</b>			

#### 2. Exceptional Medical and Behavioural Sections

Scores reflect current supports provided. Refer to the report for the Medical\* and Behaviour total scores. See the Supports Level Chart below.

Supports Budget Levels		Sum: Sections A,B & E	Section 3A Medical Support	Section 3 B: Behavioral
1	Least Support Needs	0 to 22	0 to 6	0 to 6
2	Mild or Moderate Support Needs	23 to 30	0 to 6	0 to 6
3	Mild to Moderate Support Needs & Moderate Behavioral Challenges	0 to 30	0 to 6	7 to 10
4	Moderate Support Needs & Mild to Moderate Behavioral Challenges	31 to 36	0 to 6	0 to 10
5	High Support Needs & Mild to Above Average Behavioral Challenges	37 to 52	0 to 6	0 to 10
6	Extraordinary Medical Challenges	Any	7 to 32 or Verified Extraordinary medical risk	0 to 10
7	Extraordinary Behavioral Challenges	Any	Any	11 to 26 or Verified Danger to others or Extreme self-injury risk

\*Please note: When the SIS-A was introduced, 3 new items (hypertension, allergies and diabetes) were added to the exceptional medical section. For the purpose of the Supports Budget Level calculation for exceptional medical needs, these items are weighted and the three new items are all treated as sub-items within the "Other Category" so that regardless of the scoring for the three items plus the "Other" line item, the possible point totals for the four items combined is 0, 1 or 2. When manually calculating the exceptional medical section to project or estimate the Supports Budget Level it is important to understand how these items are weighted, as it may appear that the exceptional medical score increases the Supports Budget Level to 6 when that is not the case. Always refer to the formally calculated Supports Budget Level entered into inFACT.

### 3. Supplemental Questions

All **Medical** scores indicating a rating of 2 should have Supplemental Questions completed. Review for accuracy.

**Behaviour** questions #2, 3, 5, 6, 7, 9 that indicate a rating of 2 trigger Supplemental Questions. Review for accuracy.

## 4.1 Supports Intensity Scale Assessments, Referrals and Reviews

### Appendix B: My SIS Review Template and Guide

Note: The My SIS Review Template is an **optional** tool intended to help facilitate the review of a completed SIS assessment with a participant and their support network.

#### MY SIS REVIEW TEMPLATE

##### PART A:

<b>Date Reviewed:</b>	<b>Reviewed By:</b>
<b>Name:</b>	<b>Age:</b>
<b>Residential Setting:</b>	<b>SIS interview date:</b>

##### PART B:

**Home Living** (key support needs and/or abilities that are highlighted in Home Living section of SIS):

- 1.
- 2.
- 3.

**Community Living** (key support needs and/or abilities that are highlighted in Community Living section of SIS):

- 1.
- 2.
- 3.

**Lifelong Learning** (key support needs and/or abilities that are highlighted in Lifelong Learning section of SIS):

- 1.
- 2.

3.

**Employment** (key support needs and/or abilities that are highlighted in Employment section of SIS):

1.

2.

3.

**Health and Safety** (key support needs and/or abilities that are highlighted in Health and Safety section of SIS):

1.

2.

3.

**Social** (key support needs and/or abilities that are highlighted in Social section of SIS):

1.

2.

3.

**PART C:**

**Protection & Advocacy** (key support needs and/or abilities that were identified in the Protection & Advocacy section of SIS):

1.

2.

3.

**PART D:**

**Exceptional Medical** (note any support needs that were identified in “Section 1A” of the SIS and confirm how those needs are currently being supported) :

Need	How Supported
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

**Exceptional Behaviour** (note any support needs that were identified in “Section 1B” of the SIS and confirm how those needs are currently being supported):

Need	How Supported
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

**PART E:**

**Strengths & Abilities** (skills and/or abilities that are identified throughout all sections of SIS) :

- 1.
- 2.
- 3.

**Goals** (dream, skill building or support goals that were identified throughout all sections of SIS):

- 1.
- 2.

3.

**PART F:**

<p><b>Important “To”</b> (values, things to help feel content, things that are enjoyed, valued personality traits, etc):</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p>	<p><b>Important “For”</b> (important items that are needed to be safe, happy and healthy, etc):</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p>
---	--

**PART G:**

**Dominant Support Needs or Themes:** (consistent support trends or abilities that were noted throughout the SIS that would be important “To”/”For”) :

- 1.
- 2.
- 3.

**Networks:** (identify groups or activities that meet or occur on a regular basis (e.g. family, friends, school, Special Olympics, advocacy/interest groups, etc).

- 1.
- 2.
- 3.

**Next Steps:** (potential plan of action that could be developed (e.g. schedule a planning meeting, complete a referral to support current need, contact the Community Service Worker, check out an activity in the community, etc)).

- 1.
- 2.
- 3.

## MY SIS REVIEW GUIDE

“**My SIS Review**” is a template that can be used to guide a review of the information captured within the Supports Intensity Scale (SIS) interview for participants of the Community Living disABILITY Services (CLDS) program.

You may find it useful to make notes in this template while reading the SIS interview for the first time or you may find it helpful to reference “**My SIS Review**” while summarizing the results of the SIS interview with a participant and their support network.

This optional tool that can also be used to make note of valuable information from the SIS interview and then use that information to inform all types of planning (e.g., Person-Centred Planning, Supports Budget Planning, Support Plans, etc.).

Consider this guide when completing the “**My SIS Review**”.

**PART A:** By completing this section, specific demographic information regarding the individual (e.g., name, age, residential setting, SIS interview date, etc.) is identified.

**TIP:** A CLDS participant or any person who is supporting a CLDS participant can complete the tool (e.g., family members, Community Service Workers, agency supports, etc.).

**PART B:** Within “Part B”, “key support needs and abilities” that were noted throughout the SIS interview in various life domains can be listed. Such supports and strengths are found within the Home Living, Community Living, Lifelong Learning, Employment, Health and Safety and Social sections of the SIS interview.

**TIP:** The SIS interview document ranks each “**Item**” from those requiring the most support to be successful at the top and those requiring the least amount of support to be successful at the bottom. The “content” in these sections can help an individual to identify skill building or support activities that they could develop at a day program or at school (e.g., developing additional skill in the “Home Living” section to live independently or to develop specific employment-related skills in a current job setting).

**PART C:** The Protection and Advocacy sections contain important information that will speak to the nature of existing support or talks about the help that an individual would need in areas that include, but are not limited to, advocacy, managing personal finances, protecting self from exploitation or making decisions. This section of the SIS interview would also speak to skills, abilities and strengths that an individual has with regard to making decisions.

**TIP:** Information in the Protection and Advocacy sections can be valuable in identifying and creating opportunities to support an individual’s ability to keep themselves safe. In addition, supporting the creation of strong community connections can reduce overall

risk related to protection and advocacy concerns. This section can also be referenced while supporting an individual through the Substitute Decision Making application process or to develop individual Safety Plans in various settings (e.g., Home or Community).

**PART D:** “Part D” is where you can list significant support needs that were captured in the Sections 1A and 1B (Medical and Behavioural) of the SIS Interview.

**TIP:** Sections 1A and 1B often contain valuable information that will dictate support need considerations across all areas of life (e.g., “Seizure Management” will be present at home and in the community and will require support to mitigate harm to at all times). Also, while supporting an individual to achieve their medical or behavioural goals, it is important to identify the current supports in place and how they are provided.

**PART E:** Key strengths, abilities and goals could be identified throughout sections of the SIS interview.

**TIP:** Support team members may be aware of the strengths, abilities or goals of an individual and that information may not be listed within the SIS interview. This information can be documented in different types of plans (e.g., PATHs, Individual Education Plans and Support Plans, etc.).

**PART F:** Important “To” and “For” are sections that are listed following the review of all the SIS interview questions due to their importance for planning. Important “To” / “For” information may also be listed within the SIS interview document by the facilitator.

**TIP:** A general understanding of what may be Important “To” could include preferences, interests, personality traits that they value, times of day that work better for them, etc. The areas that are important “For” the individual may include key items that are required by the individual to be safe, happy and healthy, like having specific support while eating meals or accepting help to schedule medical appointments. This information may be identified following a complete review of the SIS interview.

**PART G:** After reviewing the SIS interview and completing this template, consistent support needs or strengths may have been identified (e.g., an individual may require direct supports to complete most activities of daily living successfully or an individual may enjoy the company of people, rather than participating in activities independently).

Also, this section offers an opportunity to identify and map “Networks” or groups that an individual may belong to.

**TIP:** In “Part G” there is an opportunity to document identified support needs and trends within the SIS. Furthermore, identifying “Networks” or groups is a helpful exercise to identify resources that could help in achieving goals.