

Description of the Supports Intensity Scale (SIS)

Idaho Department of Health and Welfare (DHW) Supports Needs Assessment Selection Work Group (November 2, 2016)

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This document provides an introduction about the SIS, followed by descriptions of the SIS pertaining to DHW's selection criteria and HSRI's recommended criteria. All information was gathered online and by contacting SIS staff by phone. The purpose of this document is to assist the DHW Supports Needs Assessment Selection Work Group in determining the best assessment tool for their needs.

Background information and content areas

The Supports Intensity Scale[®] (SIS) was created by researchers through the American Association on Intellectual and Developmental Disabilities (AAIDD) to assess support needs of individuals with intellectual and developmental disabilities (I/DD). The SIS was created for individuals aged 16 to 72 over a five-year period and has been in use since 2004. It is being used in a number of states and provinces and has been translated into at least 12 languages, including Spanish, French, Complex Chinese, Czech, Dutch, Italian, Japanese, Icelandic, Portuguese, and Korean.

While the SIS was initially released for use in 2004, a follow-up version of the scale that incorporates user feedback was released in 2015. This revamp, known as the SIS-A, is similar to the SIS in terms of content. Major changes that took place consisted of: re-ordering of the sections, the collection of additional demographic information, and small changes made to vocabulary for item clarification¹.

<u>Description of the Instrument</u>. SIS-A consists of three sections with a total of 89 items—3 more than the original SIS. The three newly added questions come in Section 1A (Medical), and represent the three most commonly written-in items from the "Other" Medical Support Needs observed in the original SIS (Hypertension, Allergies, and Diabetes). Basic information about support providers and additional respondents is also sought.

<u>Section 1: Exceptional Medical and Behavioral Support Needs:</u> This section documents extra support needed to deal with particular medical and behavioral conditions, above and beyond the regular daily supports covered in Section 2. Two sub-sections address Medical Support Needs (Part 1A) and Behavioral Support Needs (Part 1B).

<u>Section 2: Support Needs Index</u>: This section documents the general support needs of individuals, in terms of how often the support is needed, how long it takes to provide the

¹ See: (http://www.dbhds.virginia.gov/library/developmental%20services/sis-a%20frequently%20asked%20questions%20august%203%202015%20(2).pdf)

support each time, and what type of assistance is needed. Six sub-sections address the major areas in which support is typically needed:

Part 2A: Home Living Activities Part 2D: Employment Activities

Part 2B: Community Living Activities Part 2E: Health and Safety Activities

Part 2C: Lifelong Learning Activities Part 2F: Social Activities

<u>Section 3. Supplemental Protection and Advocacy Scale</u>: This section examines the types of activities the individual performs to protect and advocate for him or herself. As in Section 2, each activity is rated in terms of frequency, time, and type of support.

Medical and behavioral support needs

This tool is "specifically designed to measure the level of practical supports required by a person with an intellectual disability...to lead a normal, independent, and quality life in society²". The SIS measures support needs across a number of domains, and gathers information about medical and behavioral support needs. These needs are evaluated in Section 1A and 1B of the SIS, and are rated on a three-point scale that indicates the intensity of support need, ranging from no supports needed to extensive supports needed. Information is not collected about the nature of these supports, as there is too much variation in behavioral and medical interventions, and such information would not be relevant to an assessment used to meet long-term service and support needs.

Psychometric properties and standardization

The SIS was developed by a panel of experts from the I/DD field. The SIS is the result of a review of existing measures and literature relevant to assessing support needs. It was constructed through a Q sort, a process requiring that participants sort items relative to one another to determine which are most relevant to the domains being measured. In this instance, about 50 I/DD professionals ranked items that could potentially be included in initial topical groupings of the SIS. Based on these groupings, items and scoring options were developed.

AAIDD conducted three pilot tests on the SIS, which involved approximately 1,800 individuals. Section 1, the Support Needs Scale of the SIS assessment (changed to Section 2; Support Needs Index in SIS-A), was normed on a cluster sample of individuals in the I/DD community³. A random sample of 2,000 professionals working with individuals with I/DD was created, and these individuals were sent instructions on how to administer the SIS. Approximately 1,306 individual assessments were returned, with some professionals interviewing as many as 100 individuals. After the sample was completed, each of the six parts of the Support Needs Scale was normed and standardized separately. In addition, an

² (https://aaidd.org/docs/default-source/sis-docs/latestsispresentation.pdf?sfvrsn=2).

At the time the study population was collected, AAIDD was referred to as the American Association of Mental Retardation (AAMR) and "the authors [of the SIS] decided to focus...on the AAMR membership, specifically those professionals who worked with adults 18 years or older with mental retardation" (page 1) to recruit the population on which the SNI was pilot tested and normed. Source: http://aaidd.org/docs/default-source/sis-docs/sisstandardization.pdf?sfvrsn=2

overall index was created called the Support Needs Index (SNI) using all six parts of the Support Needs Scale. The SNI was normed with a mean of 100 and a standard deviation of 15.

Numerous studies have been conducted to examine the validity of the SIS for assessing support needs, including face, content, and criterion validity studies. Likewise, researchers have tested various forms of reliability, including test-retest, inter-observer reliability, and internal consistency of scales. Researchers give the scale high marks for validity and reliability when properly administered ⁴. It should be noted that given appropriate training and endorsement of the interviewers, researchers outside of the initial developers have been able to replicate the validity and reliability findings of the original developers across a number of jurisdictions in the United States and internationally.

Ease of use

Some jurisdictions have noted that the length of time required for administration of the SIS renders it resource-intensive and cumbersome. Assessment typically takes between 2-4 hours due to the conversational nature of the assessment, with time varying greatly based on the dynamic of the group and number of individuals present. AAIDD-recognized SIS assessors receive specific training on managing the assessment process and facilitating a group dynamic that focuses on the individual. AAIDD specifically prefers use of recognized trainers for this reason, and to ensure the validity and consistency of data captured by the instrument.

Instrument is respectful of service recipients

SIS-A expands on personal and demographic information, with questions about primary language, primary communication mode, race, ethnicity, residence, educational attainment, and current employment. Additionally, the SIS takes a strengths-based approach, and evaluates the supports an individual's needs in their life, rather than areas of deficit.

Assessment tool uses

Originally developed purely as an assessment tool to support the individual planning process for people with I/DD, the SIS is now employed as a tool to assign individuals to service levels, and ultimately create support budgets. Information from the SIS, and the supplemental questions (developed by HSRI), is typically used with a 7-level supports framework that tracks support needs from low (level 1) to high (levels 6 and 7).

The SIS (including the most recent version specific to adults, SIS-A) is designed to measure the types of supports an individual needs across a variety of life domains.

The different domains contained in the SIS provide good measurement of support need across the areas they evaluate. Information from these sections, particularly scale scores generated by section are particularly relevant to supports budgeting frameworks.

⁴ Fortune, J., Agosta, J, and Bershadsky, J. (2011). *Validity and reliability of the Supports Intensity Scale*. Tualatin OR: Human services Research Institute.

Technological infrastructure

The SIS is available in paper copy, or electronically with options for administration both with and without internet connection. SIS Venture is an application that can be used to give assessments off or online. Assessments given offline are later uploaded to SISOnline (AAIDD's database solution), while assessments given online are automatically uploaded into the database. Upon completion of the assessment, a report is generated that offers a view of several scores to provide all involved parties with transparency in the participant's scoring⁵.

As noted, SISOnline is AAIDD's database solution to storing information generated by the SIS. SISOnline is a well-established data storage site that houses all information captured by the SIS. SISOnline has the ability to produce reports and offers multiple download options for assessment information gathered for the entire jurisdiction. SISOnline is operated by AJ Boggs, which subcontracts with AAIDD, to provide database management. AJ Boggs will tailor SISOnline to jurisdictional need and desired functionality.

Services available

While utilization of AAIDD's technological services is relatively simple for most jurisdictions to adapt to, a common criticism of the SIS is that training and certification is required of all test administrators. Initial training for new assessors takes three days and is provided onsite by AAIDD. It includes a basic orientation to the SIS, wherein the SIS domains are studied and new assessors become familiar with all three sections of the SIS. After the initial training, new assessors spend time reviewing the SIS and conducting practice interviews. An AAIDD trainer then performs an Interviewer Reliability and Quality Review (IRQR) process, which assessors must pass to be recognized by AAIDD. This process requires a substantial amount of time and resources. Some jurisdictions have elected to contract with third-party assessors, other than AAIDD, for completion of this assessment. Process is respectful of service recipients

The SIS is intended for administration in a face-to-face interview format with the individual being assessed, along with additional information provided by others with first-hand knowledge of the individual, who are strongly encouraged to be present during the interview. These can include family members, case managers, or other support providers. Some service recipients and their loved ones may be uncomfortable speaking so openly about the person's areas of support need, however, this dialogue increases the likelihood that the assessment will capture the reality of an individual's needs, leading to better fitting level assignment.

Idaho-Specific Criteria

Limited need for statutory changes

Transition to the SIS is likely to present significant need for statutory changes. The instrument itself differs significantly from the SIB-R, as do its administration standards and training/certification mandates.

Can be implemented within 2-year timeframe

⁵ (http://aaidd.org/docs/default-source/sis-docs/sis_electronicoptionsCDC06F5E956C.pdf?sfvrsn=2)

Transition to the SIS can be completed within a 2-year timeframe, but is greatly dependent on the resources a state elects to put towards this transition, and its expectations for assessment of individuals it serves using this instrument. The rate at which individuals can be assessed is dependent on the number of assessors available, and the number of assessments each is able to undertake in the given timeframe. Time must also be factored in for contracting with AAIDD, acquisition of the instrument, and some manner of training of assessors, leaving the timeframe for implementation potentially significantly reduced from the total 2-year allowance.

A state may consider a staggered uptake method such as focusing implementation on a sub-set of the population (such as individuals living at home with family) to slowly implement the assessment tool, and reduce the burden placed on assessors. If all individuals in service must receive assessment with the SIS within a specified time period, the appropriate resources must be made available to ensure this happens.

Will not require a difficult transition period

Transition to the SIS will require significant investment both in terms of financial resources and time. In order to ensure the validity of the data gathered by the instrument, assessors must undergo training and some manner of certification to guarantee consistency of application of the instrument across the state. This training is offered through AAIDD, and only assessors who have undergone training directly from this entity may gain recognition from AAIDD as SIS assessors. A state may find, though, that it is comfortable with a less stringent training and certification process than AAIDD, and consequently elect to develop an in-house training, or seek such training from a third party. Assessors trained through any entity other than AAIDD will not be recognized by AAIDD, and any state electing to go this route must carefully scrutinize the quality of any training it develops, or contracts to receive, to ensure inter-rater reliability through adherence to assessment practice standards.

Feasible for annual assessment

The SIS is not feasible for annual assessment due to cost and amount of time required to administer the assessment. AAIDD is working to create a shortened version of the SIS that can be used in annual assessment, but there is currently no projected release date for such a product.

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