

Kingston Standardized Behavioural Assessment



Name: _____ Case #: _____
 Sex: M ___ F ___ Age _____ Education _____ Years of Illness _____
 Date: _____ Informant: _____
 Lives in Community ___ **or** Lives in Care Facility ___



Please check all of the following behaviours that have occurred in the last month or are presently occurring, and that are a **change** from your spouse/relative/client's earlier behaviour (prior to illness). Indicate whether they apply by marking the box beside the appropriate statement. The Total Score equals number of boxes checked.

1 Daily Activities	
<input type="checkbox"/>	1 No longer takes part in favourite pastimes (or greatly reduced).
<input type="checkbox"/>	2 Reduced personal hygiene . (e.g. Would not take a bath unless told to do so, or wears the same clothes for days unless made to change).
<input type="checkbox"/>	3 If left on his/her own, doesn't eat properly.
<input type="checkbox"/>	4 Unsafe in daily activities, if left unsupervised.
<input type="checkbox"/>	5 No longer uses some common objects properly. (e.g. telephone)
<input type="checkbox"/>	6 Unable to handle personal finances.
<input type="checkbox"/>	7 Is unable to perform usual household tasks.
<input type="checkbox"/>	8 Gets confused in places other than home.
<input type="checkbox"/>	9 Overly dependent, wants more guidance than usual.
<input type="checkbox"/>	10 Trouble appreciating subtleties in conversations (e.g. recognizing humor).
<input type="checkbox"/>	11 Difficulty judging the passing of time.
<input type="checkbox"/>	12 Wanders aimlessly.
<input type="checkbox"/>	13 Hides things.
<input type="checkbox"/>	14 Hoards objects.
<input type="checkbox"/>	15 Fails to recognize family or friends.
<input type="checkbox"/>	16 Incontinence of urine/faeces in clothes in daytime.
<input type="checkbox"/>	17 Voids in non-toilet areas.
<input type="checkbox"/>	< Total Daily Activities

2 Attention/Concentration/Memory	
<input type="checkbox"/>	18 Can't concentrate, pay attention for long.
<input type="checkbox"/>	19 Misplaces things more than usual.
<input type="checkbox"/>	20 Has difficulty organizing his/her time or daily activities.

<input type="checkbox"/>	21 Forgets activities, conversations of only a short time before.
<input type="checkbox"/>	22 Forgets important everyday information.
<input type="checkbox"/>	< Total Attention/Concentration/Memory

3 Emotional Behaviour	
<input type="checkbox"/>	23 Shows little or no emotion.
<input type="checkbox"/>	24 Mood changes with no apparent reason.
<input type="checkbox"/>	25 Expresses inappropriate emotions, either type or intensity.
<input type="checkbox"/>	26 Makes uncharacteristically pessimistic statements.
<input type="checkbox"/>	< Total Emotional Behaviour

4 Aggressive Behaviour	
<input type="checkbox"/>	27 Verbally abusive at times.
<input type="checkbox"/>	28 Uncharacteristically excitable, easy to upset; reacts catastrophically.
<input type="checkbox"/>	29 Attempts to hit/strike out at others.
<input type="checkbox"/>	< Total Aggressive Behaviour

5 Misperceptions/Misidentifications	
<input type="checkbox"/>	30 Claims an object/possession looks similar to, but is not the real one.
<input type="checkbox"/>	31 Claims a family member looks similar but is not the true one.
<input type="checkbox"/>	32 Thinks present dwelling is not their place of living.
<input type="checkbox"/>	33 Thinks people are present who aren't.
<input type="checkbox"/>	< Total Misperception Behaviour

6 Paranoid Behaviour

- 34 Suspicious of family and friends.
- 35 Suspicious about money issues.
- 36 Accuses others of stealing his or her things.
- 37 Accuses spouse of infidelity.
- 38 Expresses suspicion around taking medication.

< Total Paranoid Behaviour**7 Judgement/Insight**

- 39 Shows poor judgement in social situations.
- 40 Shows poor judgement about driving.
- 41 Shows uncharacteristic change in his or her concern about money.
- 42 Poor choices in dressing. (e.g. wears clothes that are inappropriate for season or temperature, wears the same clothes for days).
- 43 Makes inappropriate sexual advances.
- 44 Shows less self control than usual.
- 45 Unable to identify personal safety risks.

< Total Judgement/Insight**8 Perseveration**

- 46 Repeats same actions over and over.
- 47 Repeats same words or phrases.
- 48 Repeatedly shouts or calls out.

< Total Perseveration**9 Motor Restlessness**

- 49 Desire to pace or walk almost constantly.
- 50 Can't sit still, restless, fidgety.
- 51 Tries doors, windows.

< Total Motor Restlessness**10 Sleep/Activity/Sundowning**

- 52 Falls asleep at uncharacteristic times.
- 53 Gets up and wanders or awakens frequently at night, more than usual.
- 54 Sleeps more.
- 55 Behaviour more agitated or impaired in late afternoon.

< Total Sleep/Activity/Sundowning**11 Motor/Spatial Problems**

- 56 Poor coordination seen in limb/finger movements.
- 57 Slowness of movement
- 58 Unsteadiness when walking.
- 59 Has trouble dressing, especially with buttons or shoelaces.
- 60 Difficulty judging object sizes or how near an object is from themselves.

< Total Motor Spatial Problems**12 Language Difficulties**

- 61 Reads far less frequently than previously.
- 62 Substitutes some words for others.
- 63 Does not watch or follow television.
- 64 Does not speak unless spoken to. (e.g. Does not participate in conversations.)
- 65 Often cannot find the right word.
- 66 Trouble pronouncing words.
- 67 Does not understand simple commands, explanations.
- 68 Does not produce meaningful speech.

< Total Language Difficulties**TOTAL SCORE**

Kingston Standardized Behavioural Assessment - ANALYSIS FORM

BEHAVIOURAL PROFILE

TOTAL SCORE ANALYSIS

COMPARISON SCALE	1	2	3	4	5	6	7	8	9	10	11	12
	Daily Activities	Attention/Concentration/Memory	Emotional Behaviour	Aggressive Behaviour	Misperceptions	Paranoid Behaviour	Judgement/Insight	Perseveration	Motor Restlessness	Sleep/Activity/Sundowning	Motor/Spatial Problems	Language Difficulties
10	17	5	4	3	4	5	7	3	3	4	5	8
9.5	16											
9	15						6					7
8.5	14											
8	13	4				4					4	
7.5	12		3		3		5			3		6
7	11			2				2	2			
6.5	10											5
6	9	3				3	4			3		
5.5	8											
5	7		2		2					2		4
4.5	6											
4	5	2									2	
3.5	4			1				1	1			3
3	3						2					
2.5	2	1	1		1					1		2
2	1					1					1	
1.5												
1												1
.5												
0												

Total Score	COMM	INST
	Total Score Descriptions	Total Score Descriptions
68		
67	CONSIDER	CRISIS
66		
64		
63		
62		
61		
60		
58		
56		
54		
52	PLACEMENT	CONSULT / CONCERN
50		
48		
46		
44		
42		
40		
38		
36		
34		
32	CONCERN	
30		
28		
26		
24		
22		
20		
19		
17		
16		
14		
11		
9		
6		
5		
4		
3		
2		
1		
0		

To produce a behaviour profile, count the number of items checked for each behavioural group and circle that number on the above chart in the appropriate column. To the right of the profile chart are columns for total score analysis. Select the appropriate column and circle the number matching the total score. (COM = community living; INST = institutional living).

KSBA Behavioural Analysis Procedures

STEP 1
CIRCLE SUM
OF TOTAL
ITEMS SCORED
(See arrow)

STEP 2
READ TOTAL
SCORE
PERFORMANCE
CLASSIFICATION
IN COLUMN TO
RIGHT
(See arrow)

STEP 3
CREATE
BEHAVIOURAL
PROFILE BY
CIRCLING SUM OF
ITEMS SCORED FOR
EACH BEHAVIOURAL
GROUP (See arrows).
CONNECT CIRCLES,
IF DESIRED.

COMPARISON SCALE	1	2	3	4	5	6	7	8	9	10	11	12	COMM	
	Daily Activities	Attention/Concentration/Memory	Emotional Behaviour	Aggressive Behaviour	Misperceptions	Paranoid Behaviour	Judgement/Insight	Perseveration	Motor Restlessness	Sleep/Activity/Sundowning	Motor/Spatial Problems	Language Difficulties	All Items	Total Score Descriptions
10	17	5	4	3	4	5	7	8	3	4	5	8	68	CONSIDER PLACEMENT
9.5	16												67	
9	15						6					7	66	
8.5	14												64	
8	13	4				4					4		63	
7.5	12		3		3		5			3		6	62	
7	11			2				2	2				61	
6.5	10											5	60	
6	9	3				3	4				3	5	58	
5.5	8											4	56	
5	8		2		2					2		4	54	
4.5	7						3						52	
4	6	2				2					2	3	50	
3.5	6			1				1	1			3	48	
3	5						2					2	46	
2.5	4		1		1					1		2	44	
2	3	1				1					1	2	42	
1.5	2						1					1	40	
1	1											1	38	
.5	1												36	
0	0	0	0	0	0	0	0	0	0	0	0	0	34	
													32	
													30	
													28	
													26	
													24	
													22	
													20	
													18	
													16	
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													5	
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													3	
													2	
													1	
													0	

For explanations and samples as to how to use this form see KSBA Administration and Interpretation Manual, which can be freely downloaded from www.providencecare.ca → Clinical Services → Geriatric Psychiatry → Kingston Scales

or e mail: kscales@queensu.ca