

MULTNOMAH COMMUNITY ABILITY SCALE

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ITEM ANCHORS

Includes suggested interview questions

Base all scores on the past **1 month**

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Anchor elaborations appear in *italics*.

MCAS 1. Physical Health

How impaired is the client by his/her physical health status? NOTE: Impairment may be from chronic health problems and/or frequency and severity of acute illnesses.

Some chronically mentally ill people misinterpret or don't experience symptoms or health problems, so it is important to verify the status of a client's health from other data on physical condition if at all possible. Many chronically mentally ill clients are scored **5** because their disability is psychiatric and not physical. Remember that a health condition is not the same as a health impairment. Some examples are that a controlled seizure condition would be scored **4** and a poorly controlled or uncontrolled seizure condition would be scored at **less than 4**, depending on the severity and lack of control. Think about how the condition affects functioning on a day-to-day basis.

1 = Extreme health impairment	<i>(Major medical problem that precludes client's participation in most daily activities)</i>
2 = Marked health impairment	<i>(Major medical problem that interferes with most of client's activities, e.g., multiple sclerosis that requires use of walker)</i>
3 = Moderate health impairment	<i>(Medical problem that interferes some with client's activities, e.g., an uncontrolled seizure condition)</i>
4 = Slight health impairment	<i>(e.g., Controlled seizure condition or recent tooth abscess)</i>
5 = No health impairment	

*** Basis for rating:

Consider the following questions:

*In the past month, how has your physical health been? If client is unsure, provide options:
very good, good, fair, poor, etc.*

Do you suffer from any medical problems? Such as diabetes, high blood pressure, etc?

What kinds of medical treatment are you being given? Are the treatments working?

Does your medical problem interfere with your day-to-day life?

CUE TO RATERS:

A rating of 2 is limited to a person who has a pervasive health problem, e.g., walks with a walker, constant breathing problems, etc.

MCAS 2. Intellectual Functioning

What is the client's level of general intellectual functioning? NOTE: Low intellectual functioning may be due to a variety of reasons. It should be distinguished from impaired cognitive processes due to psychotic symptoms, which are covered in later questions. Rate estimated IQ independent of psychotic symptoms.

In the absence of tested intelligence, estimate the level of intellectual functioning from your observation of their reading and other cognitive abilities. Since the scale is intended to measure clinician's perception, rate the item in terms of your perception of the client's intellectual functioning (independent of psychotic symptomatology).

1 = IQ < 60	Extremely low intellectual functioning (<i>Not literate</i>)
2 = IQ in the 60's	Moderately low intellectual functioning (<i>Mild mental retardation or has literacy problems or major deficits in orientation</i>)
3 = IQ in the 70's	Low intellectual functioning (<i>Borderline intellectual functioning; very limited conceptual thinking; 2 or more deficits in orientation</i>)
4 = IQ in the 80's	Slightly low intellectual functioning (<i>Low average I.Q.; mild deficits in orientation</i>)
5 = IQ in the 90's & above	Normal or above level of intellectual functioning (<i>Well oriented, cognitive skills demonstrated in interview</i>)

*** Basis for rating:

Observation of client's general intellectual skills, apart from psychotic symptoms or thought disorder. Observe client's vocabulary and conceptual thinking.

Some questions that may be asked:

What is the highest grade that you completed in school?

(Ask only if less than a high school education: Did you ever receive any special education?)

Can you tell me today's date?

What is your address? Your phone number?

Can you tell me who is the President of the United States?

CUE TO RATERS:

Focus on orientation questions, not IQ.

MCAS 3. Thought Processes / Psychosis

How impaired are the client's thought processes as evidenced by such symptoms as hallucinations, delusions, tangentiality, loose associations, response latencies, ambivalence, incoherence, etc.?

Consider the client's ability as he/she is when rated, whether that be on or off medications, independent of other services. If the client has changed within the time period rated, use the most recent condition.

1 = Extremely impaired thought processes	<i>(Speech word salad or inability to focus on anything but psychotic ideas)</i>
2 = Markedly impaired thought processes	<i>(Speech which is difficult to follow or preoccupation with psychotic ideas)</i>
3 = Moderately impaired thought processes	<i>(Hallucinations, delusions, or disorganization which interfere with functioning some of the time)</i>
4 = Slightly impaired thought processes	<i>(Mild hallucinations or disorganized thinking or occasional delusional thinking)</i>
5 = No impairment, normal thought processes	

*****Basis for rating:**

Rater's observation of the person's disorganized thinking.

Some questions that might be asked include:

Now I'd like to ask you about some symptoms that some people have:

Do you hear voices that others cannot hear?

If yes: inquire about frequency of voices, what voices consist of and how much the voices interfere with daily activities. How much do the voices bother you?

Do you see things that others cannot see?

If yes: inquire about frequency and content of visual hallucinations.

Do you believe the radio or TV communicates with you? Do you receive messages from God?

If yes to either question: inquire about frequency and content of communication.

Do you have special powers that other people do not have?

Can you read others' minds?

Do you ever feel/think that others can tell what you are thinking?

Have you been concerned that people are trying to harm you or interfere with you in any way?

Do you trust most people? If not, why?

How do you compare yourself to other people? Do you have special gifts or abilities?

Are you a religious person?

CUE TO RATERS:

Reserve a rating of 2 for a person who is absorbed by psychotic ideas.

MCAS 4. Mood Abnormality

How abnormal is the client's mood as evidenced by such symptoms as constricted mood, extreme mood swings, depression, rage, mania, etc. NOTE: Abnormality in this area may include any of the following: range of moods, level of mood, and/or appropriateness of mood.

1 = Extremely abnormal mood	<i>(Despondence or uncontrolled mania or rage)</i>
2 = Markedly abnormal mood	<i>(Mania or marked irritability or severe depression)</i>
3 = Moderately abnormal mood	<i>(Moderate depression or marked blunted affect or significant irritability or passive suicidal ideation)</i>
4 = Slightly abnormal mood	<i>(Mild depression or mild blunted affect or mild irritability)</i>
5 = No impairment, normal mood	

*****Basis for rating:**

Consider these questions when rating this item:

*In the past month, how has your mood been? Have you been feeling sad or down?
How depressed have you been?*

If yes: inquire about frequency, cause and severity of negative feelings.

Has your sadness/depression interfered with your participation in activities, your sleep or your appetite?

Have you felt dead inside?

Have you felt life wasn't worth living? Have you had any suicidal or self-destructive thoughts recently? If yes: follow-up.

Have you been feeling irritable? Have you been snapping at other people? Have you had a problem with your temper?

If mood has not been sad/down: inquire about possible manic or hypo-manic symptoms.

Have you been feeling exceptionally happy without any reason? If so, how long does it last?

Have you been feeling on top of the world – like everything is great, feeling high (but without drugs)?

CUE TO RATERS:

If the person has any passive suicidal ideation (e.g., the person wishes they were dead sometimes), consider a rating of 3.

MCAS 5. Response to Stress and Anxiety

How impaired is the client by inappropriate and/or dysfunctional responses to stress and anxiety?

NOTE: Impairment could be due to inappropriate responses to stressful events (e.g., extreme responses, or no response to events that should be of concern) and/or difficulty in handling anxiety as evidenced by agitation, perseveration, inability to problem-solve, etc.

The client's response to work, living independently, changes in life status, family discord, interpersonal conflict, new social demands, etc., may reveal an impaired response to normal stressors. A client may become hostile or aggressive, self-destructive, antisocial, or have other outward manifestations or poor coping. A client may also withdraw or actively isolate him/herself. Pay special attention to the quieter manifestations which may be less obvious or socially troublesome but are still dysfunctional for the client.

If client is in an intensive residential program (>16 hrs./day), rating should be 3 or less.

1 = Extremely impaired response	<i>(Extreme reactivity to stressors, from acting out to paralysis, resulting in the inability to adapt)</i>
2 = Markedly impaired response	<i>(Marked reactivity; very limited problem solving in response to stress; need for large amount of support and intervention from others; daily panic attacks or severe anxiety)</i>
3 = Moderately impaired response	<i>(Moderately reactive to stress; needs assistance in order to cope)</i>
4 = Slightly impaired response	<i>(Somewhat reactive to stress, has some coping skills, responsive to limited intervention)</i>
5 = Normal response	

*****Basis for rating:**

Consider the following questions:

In the past month, have you felt anxious or tense?

If yes: inquire about cause, frequency and severity of anxiety. Ask about physical symptoms of anxiety and whether they have panic attacks.

Has your anxiety interfered with your day-to-day activities, sleep or appetite?

Do you ever use a PRN medication?

What stresses have you had lately? (Give examples of stresses – problems where you live, with people, with money, etc.) How stressed have you been feeling?

Also rate behavioral manifestations of anxiety during the interview.

CUE TO RATERS:

If the person has severe anxiety such as daily panic attacks, consider a rating of 2.

MCAS 6. Ability to Manage Money

How successfully does the client manage his/her money and control expenditures?

If there is no indication that the client has any trouble managing money, assume that she/he manages it successfully. If the client only manages a slight amount of money because most of it is managed by someone else, rate **below 3**. If the client only manages a slight amount because that is all she/he could have, rate **lower**; if she/he is managing a small amount because that is all she/he has left over after rent and food, rate somewhat **higher**. Rate what clients ARE doing, not what they MIGHT do if they had a chance. If a client is not managing money, she/he cannot be scored higher than a **1 or 2**. Ask client if they have a checking account and if they pay their own bills which would indicate a rating of **4 or 5** depending on their need for assistance.

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|---|---|
| 1 = Almost never manages money successfully | <i>(Only manages pocket money)</i> |
| 2 = Seldom manages money successfully | <i>(Only manages money which is handed out <u>daily</u>)</i> |
| 3 = Sometimes manages money successfully | <i>(Money doled out <u>weekly</u> by supervised housing or family; can buy food, cigarettes and manage that money ok; or manages money on own, but with difficulty)</i> |
| 4 = Manages money successfully a fair amount of the time | <i>(Does more than a rating of 3 - i.e., pays for rent, treatment or other bills by self - or manages all monthly bills with assistance)</i> |
| 5 = Almost always manages money successfully | <i>(Generally independent in managing money)</i> |

*****Basis for rating:**

Consider the following questions:

Where are you living now?

Do you live with family or roommates? Who owns your apt/house, etc?

How do you support yourself? Does the money come to you, or is someone else the payee?

Do you pay the bills at your apt., home, etc.?

Does your care-provider/staff/family give you spending money? If yes: How often do you receive money from them (e.g., weekly, daily)?

Are you currently employed? If so: details?

Do you have a bank account?

Does your money last the whole week/month, or do you find that you run out of money early?

Does someone help you budget your money?

CUE TO RATERS:

How often the person receives his/her money is the key issue.

MCAS 7. Independence in Daily Living

How well does the client perform independently in day-to-day living? NOTE: Performance includes personal hygiene, dressing appropriately, obtaining regular nutrition, and housekeeping.

If a client resides in a residential care facility or is hospitalized, the rating would be **3 or less**.

1 = Almost never performs independently	<i>(Minimal to no ADLs even with repeated staff interventions)</i>
2 = Often does not perform independently	<i>(Completes only some ADLs, even with prompts and direction)</i>
3 = Sometimes performs independently	<i>(Needs consistent prompts for ADLs, but usually does complete most of them)</i>
4 = Often performs independently	<i>(May need occasional prompts or has difficulty in one area of ADLs)</i>
5 = Almost always performs independently	

*****Basis for rating:**

Consider the following questions:

Is there someone who helps you with cooking or cleaning or who reminds you about taking care of your hygiene? Who?

How often do you do your laundry?

...go grocery shopping?

...cook for yourself?

...take a bath or shower?

...clean up around the apartment/house? It is usually messy or do you keep it neat?

How much help do you receive with these tasks?

Base rating also on your observation of the person and their general grooming.

CUE TO RATERS:

If the person needs only occasional help and in only one area of 'ADLs' ('Activities of Daily Living'), then consider a rating of 4.

MCAS 8. Acceptance of Illness

How well does the client accept (as opposed to deny) his/her psychiatric disability?

You may wish to ask the client about this issue prior to rating the item. Some insight into or verbal admission of the client's mental illness is necessary for a high rating. Remember that issues of medication compliance and compliance with treatment are rated in items 14 and 15 and should not be considered in this question. An attitude of non-acceptance of illness is considered denial to the extent that it interferes with treatment.

1 = Almost never accepts disability	<i>(Adamantly denies illness and need for treatment)</i>
2 = Infrequently accepts disability	<i>(Consistently misunderstands illness or symptoms)</i>
3 = Sometimes accepts disability	<i>(Some denial evident in attributing problems to external factors or minimizing seriousness or denying specific symptoms)</i>
4 = Accepts disability a fair amount of the time	<i>(Much of the time acknowledges having an illness and/or some specific symptoms)</i>
5 = Almost always accepts disability	<i>(Identifies illness and symptoms consistently)</i>

*** Basis for rating:

Consider these questions when rating this item:

Could you tell me about your psychiatric problems?

Can you tell me what your psychiatric diagnosis is? What does that consist of? How serious do you think it is?

What (psychiatric) symptoms do you have?

Do you take (psychiatric) medication? How does your medicine help you ?

CUE TO RATERS:

If the person knows his/her diagnosis, can give relevant symptoms, and knows the importance of medications, then consider a rating of 5.

MCAS 9. Social Acceptability

In general, what are other people's reactions to the client?

Consider this item within the range of the client group instead of the general population. Consider physical appearance, behavior in public situations, and reports from others. If appearance and behavior motivate others to cross to the opposite side of the street, a low rating is required.

1 = Very negative	<i>(Consistently elicits avoidant reaction from others)</i>
2 = Fairly negative	<i>(Presentation elicits some negative reaction from others)</i>
3 = Mixed, mildly negative to mildly positive	
4 = Fairly positive	<i>(Presentation slightly impaired, but can navigate in public without attracting negative attention)</i>
5 = Very positive	<i>(No outward appearance of mental illness or impairment)</i>

***** Basis for rating:**

Client's general countenance and demeanor during interview. This includes grooming and clothing, cleanliness, general attitude. The presence of intrusive behavior; talking or laughing inappropriately; body odor; odd movements or posture would lower the rating on this item.

Consider these questions of yourself when rating this item:

*Would you feel comfortable sitting next to this person on a bus, if you did not know him/her?
How would you respond to him/her, seeing him/her in public, if you did not know him/her?*

CUE TO RATERS:

If the person looks grossly "normal," consider a rating of 5.

MCAS 10. Social Interest

How frequently does the client initiate social contact or respond to others' initiation of social contact?

This item is a measure of **frequency** of social interest **without a judgment of the appropriateness or the quality** of social interactions.

1 = Very infrequently	<i>(Almost never participates in social activities; usually avoids available social situations)</i>
2 = Fairly infrequently	<i>(Limited response to invitation or opportunity for social interaction; does not go on recreation outings; e.g., passive interaction with others when smoking)</i>
3 = Occasionally	<i>(Sometimes initiates and responds to social activities; e.g., goes on outings with program which are arranged by staff, may have some withdrawal from others)</i>
4 = Fairly frequently	<i>(Responds consistently and initiates occasionally; e.g., has some social contacts outside of activities which are organized by staff)</i>
5 = Very frequently	<i>(Ongoing initiation and responses to social interactions; e.g., actively maintains social activities outside of household)</i>

*** *Basis for rating:*

Rate the interest the client shows in initiating and/or engaging in social activities with others.

Consider asking the following questions:

How do you spend your free time? How much time do you spend with other people?

Could you describe the types of activities you do with others?

How many friends do you have? Are they close friends?

How often do you get together with your friends? With your family?

Do you invite people to get together or do others take the lead?

Are there times when your friends or family ask you to go somewhere and you just say 'No'?

CUES TO RATERS:

Rate what the person actually does, regardless of constraints of money, transportation, etc.

If the person has some withdrawal from others, consider a rating of 3.

MCAS 11. Social Effectiveness

How effectively does the client interact with others? NOTE: “Effectively” refers to how successfully and appropriately the client behaves in social settings, i.e., how well he or she minimizes interpersonal friction, meets personal needs, achieves personal goals in a socially appropriate manner, etc.

Behavior, which is aggressive, intrusive, inappropriate, goal-inappropriate, illegal, immoral, or ridiculous, causes this item to be rated low.

1 = Very ineffectively	<i>(Lacking in almost any social skills; inappropriate response to social cues)</i>
2 = Ineffectively	<i>(Uses only minimal social skills, can not engage in give-and-take of instrumental or social conversations; limited response to social cues)</i>
3 = Mixed or dubious effectiveness	<i>(Marginal social skills, not always appropriate)</i>
4 = Effectively	<i>(Is generally able to carry out social interactions with minor deficits, can generally engage in give-and-take conversation with only minor disruption)</i>
5 = Very effectively	<i>(Social skills are within the normal range)</i>

***** Basis for rating:**

Consider the following when rating this item:

Based on your observation, do you think that the client is able to communicate needs in order to get them met? For example, could they walk into a bank and be able to open a checking account?

Is the client able to engage in simple social conversation? For example, do you think that they could carry on a conversation over a meal or at a social activity?

Consider the social skills - both verbal and nonverbal - of the client that are demonstrated during the interview.

If client is intrusive, silly, preoccupied, constricted, this would lower the rating on this item.

CUES TO RATERS:

Base this rating on the person’s behavior during the interview. Also consider any clear evidence that the person has provided about interactions with others outside of the interview setting.

MCAS 12. Social Network

How extensive is the client's social support network? NOTE: A support network may consist of interested family, friends, acquaintances, professionals, coworkers, socialization programs, etc.
NOTE: Rate the size of the network, not the social acceptability.

1 = Very limited network	(Nobody)
2 = Limited network	(Family member <u>or</u> Casemanager)
3 = Moderately extensive network	(Family member <u>and</u> : a Case Manager <u>or</u> a Friend <u>or</u> a Socialization group)
4 = Extensive network	(Family member <u>and</u> a Case Manager <u>and</u> : a Friend <u>or</u> a Socialization group)
5 = Very extensive network	(Most of the above <u>and</u> close friends or a partner with some experience of intimacy)

-To rate a 5, clients should have close friends or a partner, experience some intimacy.

*****Basis for rating:**

Consider the following questions:

Who are the persons you are closest to?

Who do you rely on for emotional support?

How often do you have contact with your family?

...with a counselor or case manager?

...with friends?

...with someone special like a boyfriend/girlfriend?

CUES TO RATERS:

If the person has a romantic relationship, consider a rating of 5.

If the person has no contact at all with family, consider a rating of 3.

MCAS 13. Meaningful Activity

How frequently is the client involved in meaningful activities that are satisfying to him or her?

NOTE: Meaningful activities might include arts and crafts, reading, going to a movie, etc.

-Rate the **client's** perception.

1 = Almost never involved	<i>(Does nothing outside of meeting basic needs)</i>
2 = Seldom involved	<i>(May be involved in some passive activities with little enthusiasm)</i>
3 = Sometimes involved	<i>(Does passive activities such as listening to music, watching T.V. with some enthusiasm; at day program has only passive involvement or skips groups)</i>
4 = Often involved	<i>(Has some constructive activities with others which are identified as meaningful; active involvement at day program, may include part-time sheltered work activity at day program)</i>
5 = Almost always involved	<i>(Consistently involved in an interactive activity like work, school, volunteering outside of a sheltered psychiatric setting)</i>

*****Basis for rating:**

Consider the following questions:

How do you spend your time during the day? (e.g., day program, job, school)

How do you spend a typical day?

If at a day program: What activities do you participate in at your day program?

Do you skip groups sometimes? Do you tend to be quiet in the groups or do you talk and participate a lot in the groups?

Do you have any hobbies or interests? What do you most enjoy doing?

CUE TO RATERS:

If the person declines to attend groups at his/her day program, consider a rating of 3.

MCAS 14. Medication Compliance

How frequently does the client comply with his/her prescribed medication regimen? NOTE: This question does not relate to how much those medications help the client.

1 = Almost never complies	<i>(Forced compliance of any medication)</i>
2 = Infrequently complies	<i>(Does not take medication independently; staff directly monitor self-administration of all medications)</i>
3 = Sometimes complies	<i>(Takes medication on own, but misses frequently and/or needs periodic checks, monitoring, or help with packing medications)</i>
4 = Usually complies	<i>(Takes medication perfectly with prompting, or takes medication on their own, but misses occasionally)</i>
5 = Almost always complies	<i>(Takes medication completely independently and compliantly)</i>

*****Basis for rating:**

Rate the current medication administration arrangements, not what the client may be capable of.

Consider the following questions:

Do you take your medication on your own or is it supervised by staff members or your family?

(If the person does take medication on his/her own, consider asking: Does anyone ever remind you to take your medication? ...Do staff/family help you pack your medications? ...How often do you miss a dose of medication or forget to take it?)

CUE TO RATERS:

If medications are administered directly by staff, or if the person's taking of medications is directly observed by staff, then consider a rating of 2.

MCAS 15. Cooperation with Treatment Providers

How frequently does the client cooperate as demonstrated by, for example, keeping appointments, complying with treatment plans, and following through on reasonable requests?

1 = Almost never cooperates	<i>(Does not cooperate at all with treatment plans or keep appts.)</i>
2 = Infrequently cooperates	<i>(Non-compliant with treatment efforts; does not follow daily schedule, though may keep some appts.)</i>
3 = Sometimes cooperates	<i>(Follows through some of the time with daily schedule or other treatment activities; is minimally involved in treatment planning)</i>
4 = Usually cooperates	<i>(Usually keeps doctor's appts. and attends day programs on scheduled days; involved in treatment planning)</i>
5 = Almost always cooperates	<i>(Rarely misses appointments or scheduled activities, actively engaged in treatment planning/goal setting)</i>

*****Basis for rating:**

Consider the following questions:

Do you attend your day program/volunteer job/work all the days you're scheduled to attend?

Do you keep all of your clinic/doctor appointments?

How about meetings with your case manager? Do you ever just say, 'Forget it, I'm not going'?

What are your treatment/rehab goals?

CUES TO RATERS:

Cooperating refers mostly to keeping doctor's appointments and attending day program on scheduled days.

A person should be able to state and have some understanding of their rehabilitation goals in order to receive a rating of 5.

MCAS 16. Alcohol / Drug Abuse

How frequently does the client abuse drugs and/or alcohol? NOTE: "Abuse" means use to the extent that it interferes with functioning.

NOTE: Abuse of drugs includes **illegal street drugs** as well as abuse of **over-the-counter and prescribed** medications.

1 = Frequently abuses	<i>(Drug/alcohol dependence; daily abuse of alcohol or drugs which causes severe impairment of functioning; inability to function in community secondary to alcohol/drug abuse)</i>
2 = Often abuses	<i>(Recurrent use of alcohol or abuse of drugs which causes significant effect on functioning)</i>
3 = Sometimes abuses	<i>(Some use of alcohol or abuse of drugs with some effect on functioning)</i>
4 = Infrequently abuses	<i>(Occasional use of alcohol or abuse of drugs without impairment)</i>
5 = Almost never abuses	<i>(Abstinence; no use of alcohol or drugs during rating period)</i>

*****Basis for rating:**

Consider the following questions:

In the past month, have you had anything to drink? How much? How often?

In the past month, have you used any street drugs? How often? How much?

*In the past month, have you taken any over-the-counter or prescription medications to get high?
How often? How much?*

Have you ever driven a car, gone to work or school when you have been drinking or using drugs?

How has the alcohol/drug use interfered with your day-to-day life?

MCAS 17. Impulse Control

How frequently does the client exhibit episodes of extreme acting out? NOTE: "Acting out" refers to such behavior as temper outbursts, spending sprees, aggressive actions, suicidal gestures, inappropriate sexual acts, etc.

1 = Frequently acts out	<i>(Frequent and/or severe acting out behavior, e.g., behaviors which could lead to criminal charges)</i>
2 = Acts out fairly often	<i>(Impulsive acts which are fairly often and/or of moderate severity)</i>
3 = Sometimes acts out	<i>(Some acting out behavior; moderate severity; at least one episode of behavior that is dangerous or threatening)</i>
4 = Infrequently acts out	<i>(Maybe one or two lapses of impulse control; minor acting out, such as attention-seeking behavior which is not threatening or dangerous)</i>
5 = Almost never acts out	<i>(No noteworthy incidents)</i>

*****Basis for rating:**

Consider asking the client:

In the past month, have you had disagreements with others?

If yes: inquire about frequency, severity, time last occurrence, and cause of disagreements/fights and if the disagreement ever got to the point of a physical fight.

Have you done anything lately that has annoyed other people?

Have you been spending a lot of money lately?

Have you tried to hurt yourself in any way?

Did you threaten anyone or break things?

Have you done anything recently on the spur of the moment that you later regretted? If yes, were these behaviors ones that other people considered dangerous or not in your best interests? (Consider asking if the person has had significant impulse problems: During the past month, have you been in trouble with the police?)

CUE TO RATERS:

If the person has verbal arguments with others, consider a rating of 4.