

Overt Behaviour Scale - Adult

Date of Completion	
Client name/Identifier	
Primary Informant	
Informant's Role	
Administering Clinician	

Challenging behaviours

Behaviours can be challenging or problematic if they are disruptive, make the client or other people uncomfortable, or go against the rules of community living. Such behaviours lead to distress or can disrupt things like social relationships and continuance of services. They can also result in significant financial cost to the service system.

What is this scale for?

This scale is designed to clarify the types of observable challenging behaviours that can occur following acquired brain injury (ABI). This can help to show how behaviours may have changed over time and can inform decisions related to clinical interventions. This scale can also be used to measure the frequency of challenging behaviours and the impact that they have on people living and/or working with the client (including family members and service providers).

What does this scale measure?

There are 9 categories of behaviour that can be scored on this scale; they are:

- **Verbal aggression**
- **Physical aggression against objects**
- **Physical acts against self**
- **Physical aggression against other people**
- **Inappropriate sexual behaviour**
- **Perseverative / repetitive behaviour**
- **Wandering / absconding**
- **Inappropriate social behaviour**
- **Reduced initiation**

This scale enables you to score the severity, frequency, and impact of each behaviour.

How to use this scale

For each of the 9 categories of behaviour there is a heading (e.g., verbal aggression) and a relevant subscale. If your client exhibits no sign of that category of behaviour, mark the "no" box and go to the next behaviour.

If your client does show this type of behaviour you need to complete the subscale. Here you can indicate more clearly what sort of behaviour occurs. Under each heading there are a number of behaviour descriptions with realistic examples that correspond to increasing levels of severity (shouting is low severity, threats are more severe). Tick each of the types of behaviour observed and rate how frequently they occur and the impact that they have.

If a behaviour appears to fit 2 categories, use the single most appropriate one. See the Administration Guidelines for further information.

Timeframe

This scale represents behaviour that has occurred over the most recent 3 months.

More information

Developmental and psychometric information regarding the OBS has been published in Kelly, Todd, Simpson, Kremer, & Martin (2006). The Overt Behaviour Scale (OBS): A tool for measuring challenging behaviours following ABI in community settings. *Brain Injury*, 20(3), 307 - 319.

More resources available at www.diverge.org.au

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How to rate behaviours

Tick each level that is a problem

For each category of behaviour there are a number of descriptions with examples that **illustrate** different levels of severity. Select the level(s) with a description or example that **best represents** the sorts of behaviour(s) that you have observed by placing a tick [✓] in this column.

Remember, these behaviours **are only examples**; if you have seen behaviours that are similar, but are not exactly the same, then tick this description.

Frequency

Rate how frequently the behaviour occurs using a number from 1 to 5 with the following definitions:

- 1 = less often than once per month
- 2 = once a month or more
- 3 = once a week or more
- 4 = once a day
- 5 = multiple times each day

Impact (distress or disruption)

“Impact” means the amount of **emotional distress** and/or **practical disruption** that a challenging behaviour causes. For example, **impact** refers to your experience of stress, worry, concern, or fear as a result of the behaviour. But **impact** can also refer to practical difficulties including needing additional staff, altered procedures, dealing with complaints from families or other residents, or having to acquire additional supports such as psychiatrists, police, or behaviour intervention. Disruption often translates into additional costs.

Rate how much this behaviour impacts upon yourself and/or other people by using a number from 1 to 5 and the following definitions:

- 1 = no impact
- 2 = minor impact
- 3 = moderate impact
- 4 = severe impact
- 5 = extremely severe impact

VERBAL AGGRESSION

Has the client shown any verbal aggression?

NO (go to next behaviour)

YES (rate the subscale below)

Clinical Weighted Severity

Severity

Tick each level that is a problem [✓]

Frequency

- 1 = < 1/month
- 2 = 1/month or more
- 3 = 1/week or more
- 4 = 1/day
- 5 = multiple daily

Impact

- 1 = no impact
- 2 = minor
- 3 = moderate
- 4 = severe
- 5 = extreme

Shouts angrily, makes loud noises, is clearly not directed at some other person (e.g., “bloody hell!”).

1

Makes mild personal insults clearly directed at some other person but does not include swearing/offensive sexual comments (e.g., “You are stupid!”, “idiot!”).

2

Swearing, use of foul language, moderate threats clearly directed at others or self (e.g., “F*** off you bastard!”).

3

Makes clear threats of violence directed towards others or self (e.g., “I’m going to kill you!” or “I’m going to finish myself!”) or requests help to control self (i.e., expresses anxieties that they will engage in aggressive act beyond own control unless someone make some immediate intervention). This includes suicidal threats.

4

PHYSICAL AGGRESSION

Clinical Weighted Severity	Severity Tick each level that is a problem [✓]	Frequency 1 = < 1/month 2 = 1/month or more 3 = 1/week or more 4 = 1/day 5 = multiple daily	Impact 1 = no impact 2 = minor 3 = moderate 4 = severe 5 = extreme
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Physical aggression against objects

Has the client shown any physical aggression against objects?

NO (go to next behaviour)

YES (rate the subscale below)

Slams doors, scatters clothing, makes a mess in clear response to some antecedent.	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Throws objects down (without some other person at risk of being hit by the object), kicks furniture without breaking it, marks the wall.	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breaks objects, smashes windows.	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Throws objects dangerously (i.e., some other person is at risk of being hit by the object(s) thrown but is not actually hit). If the object thrown does hit someone score this as physical aggression against other people. Sets fire.	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical acts against self

Has the client shown any physical acts against self?

NO (go to next behaviour)

YES (rate the subscale below)

Picks or scratches skin, hits self, pulls hair (with no or minor injury only).	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bangs head, hits fist into objects, throws self onto floor or into objects (hurts self without serious injury).	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inflicts small cuts or bruises, minor burns to self.	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mutilates self, causes deep cuts, bites that bleed, internal injury, fracture, loss of consciousness, loss of teeth. This includes suicide attempts.	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical aggression against other people

Has the client shown any physical aggression against other people?

NO (go to next behaviour)

YES (rate the subscale below)

Makes threatening gesture that is clearly directed towards some other person, swings at people, grabs at clothes.	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strikes, kicks, pushes, pulls hair (without significant injury) to person(s) aggression directed at.	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attacks others, causing mild-moderate physical injury (bruises, sprain, welts) to person(s) aggression directed at.	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Causes severe physical injury (broken bones, deep lacerations, internal injury) to person(s) aggression directed at.	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INAPPROPRIATE SEXUAL BEHAVIOUR

Has the client shown any inappropriate sexual behaviour?

- NO (go to next behaviour)**
- YES (rate the subscale below)**

Clinical Weighted Severity

Severity
Tick each level that is a problem [✓]

Frequency
1 = < 1/month
2 = 1/month or more
3 = 1/week or more
4 = 1/day
5 = multiple daily

Impact
1 = no impact
2 = minor
3 = moderate
4 = severe
5 = extreme

Sexual talk

Comments of a sexual nature (e.g., “I’ve got a big dick”, “I want to make babies with you”, “You’ve got nice tits”, “I could give you a good time”) where comments may be face-to-face or in the form of phone calls or letters. Explicit accounts of sexual activities (e.g., “When I am with a woman I like to ...”).

1

Touching (non genital)

Touching other people who do not want to be touched (but contact does not involve genitals). For example kissing hand or arm, putting arm around shoulder, patting someone’s knee, rubbing or caressing arm or leg or back. Also includes touching clothing (e.g., lifting skirts).

1

Exhibitionism

“Flashing”, exhibiting genitals, undressing in public. Failing to dress (e.g., walking about house without clothes on when coresidents could be or are present. Answering door when naked).

2

Masturbation (public)

Masturbation in a public or shared setting when other people are in the area (e.g., masturbating in a car in a public carpark where passers by may see; masturbating in a common area in a supported residential setting).

2

Touching (genital)

Touching (or making attempts to touch) other people’s breasts, buttocks, or genitals (e.g., groping staff who walk by, fondling breasts of support workers, pulling other’s hands toward own groin).

3

Coercive sexual behaviour, Rape

Attempt to forcibly undress another person. Use of threat to obtain sex. Sexual penetration of another person who has not consented.

4

Victim details can be noted here

(The legal consequences of inappropriate sexual behaviour can differ depending on the sex and age of the victim.)

PERSEVERATIVE / REPETITIVE BEHAVIOUR

Has the client shown any perseverative behaviour?

NO (go to next behaviour)

YES (rate the subscale below)

Clinical Weighted Severity

Severity

Tick each level that is a problem [✓]

Frequency

1 = < 1/month
2 = 1/month or more
3 = 1/week or more
4 = 1/day
5 = multiple daily

Impact

1 = no impact
2 = minor
3 = moderate
4 = severe
5 = extreme

Engages in prolonged continuation and repetition of a behaviour that **has not resulted in physical harm** (e.g., continued, persistent tapping, writing same letter over and over, unrolling entire toilet roll, asking the same question repeatedly: "do you watch the Bill?" "Will you marry me?").

1

Engages in prolonged continuation and repetition of a behaviour that **has resulted in minor physical harm** (e.g., continued, persistent touching, rubbing, or scratching leading to skin irritation; remaining in shower until skin is shriveled).

2

Engages in prolonged continuation and repetition of a behaviour that **has resulted in serious harm** (e.g., continued, persistent eye rubbing; riding an exercise bike and only stopping upon exhaustion).

3

WANDERING / ABSCONDING

Has the client shown any wandering/absconding?

NO (go to next behaviour)

YES (rate the subscale below)

Clinical Weighted Severity

Severity

Tick each level that is a problem [✓]

Frequency

1 = < 1/month
2 = 1/month or more
3 = 1/week or more
4 = 1/day
5 = multiple daily

Impact

1 = no impact
2 = minor
3 = moderate
4 = severe
5 = extreme

Going into areas that are prohibited but where there no or low risk of harm (e.g., entering other resident's rooms, staff areas, kitchen).

1

Leaving the familiar, 'safe', environment when there is a good risk of becoming lost or seriously harmed (e.g, nursing home resident attempting to return to family home, walking onto freeways, needing to be located/recovered by police).

2

Escapes secure premises (e.g., through a doorway left open, by using security door codes, by climbing over fence). May physically resist attempts to stop such escape (e.g., wrestles with or pushes staff who attempt to stop or restrain them).

3

INAPPROPRIATE SOCIAL BEHAVIOUR

Has the client shown any inappropriate social behaviour?

NO (go to next behaviour)

YES (rate the subscale below)

Clinical Weighted Severity

Severity

Tick each level that is a problem [✓]

Frequency

1 = < 1/month
2 = 1/month or more
3 = 1/week or more
4 = 1/day
5 = multiple daily

Impact

1 = no impact
2 = minor
3 = moderate
4 = severe
5 = extreme

Socially awkward

Inappropriate laughter. Failure to monitor personal hygiene (e.g., does not shower regularly). Excessive apologising or thanking. Standing too close to strangers. Failure to pick up on nonverbal cues (that others are bored, the joke was not funny, the conversation is over).

1

Nuisance / annoyance

Interrupts other people's conversations. Actively does things to seek attention (e.g., spills food, rings buzzer, "Nurse, can you come here?"). Inconsiderate of other people (e.g., hogging TV channel or remote control). Nagging, impatient (e.g., always wanting something else to be done; can not tolerate waiting for supermarket queues). "Butts in" to other people's affairs (e.g., advising staff/management on how to improve residence, reporting on other clients' activities).

2

Noncompliant / oppositional

Responds "no!" to prompts to do things. Refuses to discuss problem behaviours with staff. Will not follow toilet or shower routines. Refuses to take medication. Rejects or dismisses service providers who are helpful with home care. Intentional lying that is not due to poor memory (e.g., denying drug use or stealing; fabricating stories to cover tracks). Will not (as opposed to Can not) follow rules. (e.g., leaving without telling someone where s/he is going).

3

Petty crime or unlawful behaviour

Driving while unlicensed. Fraud (e.g., writing dishonoured cheques). Obtains goods by theft or deceit. Stealing (e.g., steals cigarettes from other residents, steals clothes or food from shops; materials from building sites).

4

Presents a danger/risk to self or others

Smokes in bed. Starts bonfire near gas cylinder. Crosses road without evaluating traffic. Wheeling wheelchair in middle of road. Climbs ladders when perception and / or balance impaired. Excessive use of alcohol, cigarettes, or other substances where that is the key behaviour leading to risk or actual harm to self or others. Uses provision of sex to gain access to goods (such as money, cigarettes, drinks) or services.

4

REDUCED INITIATION

Explanation

This behaviour is different from the others because it is a **reduction of** overt behaviour.

The person has difficulty getting tasks started or completed and is characterised as having reduced motivation, initiative, or interest in day-to-day activities.

Examples

- The person may not wash, eat, or drink, shower or groom themselves without prompting from others. They may sit on the couch all day, not initiate social conversation or attend social activities without someone taking them.
- However, the person may engage in activities if someone else prompts them. Once asked to “wash the dishes”, the person may then commence and complete the task.
- Some people need more prompts: they might only wash dishes and then need another prompt for cutlery: “okay, you’ve finished the plates, what about the cutlery”?
- In severe cases, a person may not eat despite having a meal placed in front of them or fail to wash himself or herself even if standing under the shower. They would require constant prompts such as “put some soap on the washer, soap up your arms, now rinse etc”.

Has the client shown reduced initiation?

NO

YES (complete scoring this item)

Severity

Tick each level that is a problem
[✓]

Clinical Weighted Severity

i.e., Amount of

prompting required

1 = less than once/day

2 = approx. once/day

3 = more than twice/day

4 = many times/day

5 = all tasks, everyday

Impact

1 = no impact

2 = minor

3 = moderate

4 = severe

5 = extreme

SCORING

The OBS produces 3 key indices: **Cluster, Total Severity, and Total Clinical Weighted Severity.**

Cluster

Sum the number of **YES** boxes ticked. **Range: 0 to 9**

Total Severity

Sum the number of **SEVERITY** boxes ticked. **Range: 0 to 34**

Total Clinical Weighted Severity

Sum the **CLINICAL WEIGHTED SEVERITY** numbers associated with each **SEVERITY** level ticked. **Range: 0 to 84**

Note: The two other measures, **frequency** and **impact**, do not form the structure of the scale, but rather provide additional clinical data.