

# Person—level of difficulty with activities in a life area, Abbreviated Life Skills Profile score code N

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	Level of difficulty with activities in a life area (LSP-16 score)
<b>Synonymous names:</b>	LSP-16
<b>METEOR identifier:</b>	654401
<b>Registration status:</b>	<ul style="list-style-type: none"><li>• <a href="#">Health</a>, Superseded 17/12/2021</li></ul>
<b>Definition:</b>	The ease by which a person is able to perform tasks and actions in a life area, as represented by a code.
<b>Context:</b>	Level of functioning, persons aged 18 years and over.
<b>Data Element Concept:</b>	<a href="#">Person—level of difficulty with activities in a life area</a>

## Value domain attributes

## Representational attributes

<b>Representation class:</b>	Code										
<b>Data type:</b>	Number										
<b>Format:</b>	N										
<b>Maximum character length:</b>	1										
<b>Permissible values:</b>	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>0</td><td>Score of 0</td></tr><tr><td>1</td><td>Score of 1</td></tr><tr><td>2</td><td>Score of 2</td></tr><tr><td>3</td><td>Score of 3</td></tr></tbody></table>	Value	Meaning	0	Score of 0	1	Score of 1	2	Score of 2	3	Score of 3
Value	Meaning										
0	Score of 0										
1	Score of 1										
2	Score of 2										
3	Score of 3										

## Supplementary values:

Value	Meaning
7	Unable to rate
9	Not stated/missing

## Collection and usage attributes

### Guide for use:

The abbreviated Life Skills Profile (LSP-16) contains 16 items which provide a key measure of function and disability in people with mental illness. The focus of LSP-16 is on the person's general functioning, i.e. how the person functions in terms of their social relationships, ability to do day-to-day tasks etc. Each of the 16 items is scored on a four point scale of 0 to 3. Lower scores indicate a higher level of functioning.

The 16 items are in the form of questions:

- 1 Does this person generally have any difficulty with initiating and responding to conversation?
- 2 Does this person generally withdraw from social contact?
- 3 Does this person generally show warmth to others?
- 4 Is this person generally well groomed (e.g. neatly dressed, hair combed)?
- 6 Does this person generally neglect her or his physical health?
- 7 Is this person violent to others?
- 8 Does this person generally make and/or keep up friendships?
- 9 Does this person generally maintain an adequate diet?
- 10 Does this person generally look after and take her or his own prescribed medication (or attend for prescribed injections on time) without reminding?
- 11 Is this person willing to take psychiatric medication when prescribed by a doctor?
- 12 Does this person co-operate with health services (e.g. doctors and/or other health workers)?
- 13 Does this person generally have problems (e.g. friction, avoidance) living with others in the household?
- 14 Does this person behave offensively (includes sexual behaviour)?
- 15 Does this person behave irresponsibly?
- 16 What sort of work is this person generally capable of (even if unemployed, retired or doing unpaid domestic duties)?

### Comments:

The original Life Skills Profile (LSP) was developed by a team of clinical researchers in Sydney (Rosen et al. 1989, Parker et al. 1991). It was designed to be a brief, specific and jargon-free scale to assess a consumer's abilities with respect to basic life skills.

Work undertaken as part of the Australian Mental Health Classification and Service Costs (MH-CASC) study saw the 39 items reduced to 16. This reduction in item number aimed to minimise the rating burden on clinicians when the measure is used in conjunction with the Health of the Nation Outcome Scale (HoNOS).

## Source and reference attributes

**Submitting organisation:** Independent Hospital Pricing Authority

- Reference documents:** Australian Mental Health Outcomes and Classification Network 2005. Training Manual: Adult ambulatory. Viewed 13 September 2016, [http://www.amhocn.org/sites/default/files/publication\\_files/adult\\_ambulatory\\_manual\\_0.pdf](http://www.amhocn.org/sites/default/files/publication_files/adult_ambulatory_manual_0.pdf)
- Parker G, Rosen A, Emdur N, Hadzi-Pavlov D 1991. The Life Skills Profile: psychometric properties of a measure assessing function and disability in schizophrenia. *Acta Psychiatrica Scandinavica*, 83(2):145-152
- Rosen A, Hadzi-Pavlovic D & Parker G 1989. The Life Skills Profile: a measure assessing function and disability in schizophrenia. *Schizophrenia Bulletin*, 15: 325–337

## Data element attributes

### Collection and usage attributes

- Guide for use:** Functioning is the umbrella term for any or all of: body functions, body structures, activities and participation. Functioning is a multidimensional concept denoting the neutral aspects of the interaction between an individual (with a health condition) and that individual's environmental and personal factors.
- An individual's functioning in a specific domain is an interaction or complex relationship between health conditions and environmental and personal factors.
- Functioning and disability are dual concepts in a broad framework, with disability focussing on the more negative aspects of this interaction.

### Source and reference attributes

- Submitting organisation:** Independent Hospital Pricing Authority

### Relational attributes

- Related metadata references:** Supersedes [Person—level of difficulty with activities in a life area, Abbreviated Life Skills Profile score code N](#)
- [Independent Hospital Pricing Authority](#), Standard 15/10/2014
- Has been superseded by [Person—level of difficulty with activities in a life area, abbreviated Life Skills Profile score code N](#)
- [Health](#), Standard 17/12/2021

- Implementation in Data Set Specifications:** [Activity based funding: Mental health care NBEDS 2017-18 Health](#), Superseded 25/01/2018

**Implementation start date:** 01/07/2017

**Implementation end date:** 30/06/2018

**Conditional obligation:**

Reporting of LSP-16 is mandatory for the first mental health phase of care in an episode of mental health care for patients that are admitted to residential mental health units or ambulatory health services.

Reporting of the LSP-16 is not mandatory if mental health phase of care is reported as Assessment Only.

Subsequent reporting of LSP-16 is mandatory for the commencement of a new mental health phase of care occurring three months after the last LSP-16 reporting occasion.

The LSP-16 should only be reported for patients aged 18 years and over.

[Activity based funding: Mental health care NBEDS 2018-19 Health](#), Superseded 12/12/2018

**Implementation start date:** 01/07/2018

**Implementation end date:** 30/06/2019

**Conditional obligation:**

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[Activity based funding: Mental health care NBEDS 2019-20 Health](#), Superseded 17/01/2020

**Implementation start date:** 01/07/2019

**Implementation end date:** 30/06/2020

**Conditional obligation:**

Reporting of LSP-16 is mandatory for the first mental health phase of care in an episode of mental health care for patients that are admitted to residential mental health units or ambulatory health services.

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[Activity based funding: Mental health care NBEDS 2020–21 Health](#), Superseded 23/12/2020

**Implementation start date:** 01/07/2020

**Implementation end date:** 30/06/2021

**Conditional obligation:**

Reporting of LSP-16 is mandatory for the first mental health phase of care in an episode of mental health care for patients that are admitted to residential mental health units or ambulatory health services.

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[Activity based funding: Mental health care NBEDS 2021–22 Health](#), Superseded 17/12/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**Conditional obligation:**

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