

**This assessment review was compiled by our students and is intended to be used as a guide in assisting clinicians. We encourage you to review the evaluations and assessments for yourself to guarantee the most accurate and updated information.*

I. General Information

Title of the test: The Kohlman Evaluation of Living Skills (KELS)

Author: Linda Kohlman Thomson, MOT, OTR, OT(C), FAOTA

Publisher: American Occupational Therapy Association, Inc.

Time required to administer: Administered individually and lasts 30-45 minutes

Cost of the Test: The booklet is \$45 on the AOTA website

II. Description of Test

Type/Purpose of Test: An evaluation to determine an individual's ability to function with basic life skills. Living skills are tested in the areas of: self care, safety, health, money management, transportation, telephone, work and leisure. Upon completion the therapist can recommend living situations that allow clients to function as independently as possible. The goal is to integrate the client into their environment.

Population: Originally designed for short-term inpatient psychiatric use. Now applicable to acute care, geriatrics, and individuals with cognitive disabilities, or brain injuries.

Focus of measurement:

Organic systems Abilities Participation/life habits Environmental Factors

III. Practical Administration

Ease of Administration: This test is easy to give. It is initially recommended to put together a notebook with the needed equipment in divider pockets. Upon administration the therapist would need the notebook, local phone book(s), and a telephone.

Clarity of Directions: Directions are in administration manual. A clear outline of what to say and do as the administrator is given throughout in bold writing. The different aspects of evaluation are outlined including: method, equipment, administration, alternate administration method, and scoring.

Scoring Procedures: In each area client scores either "independent" or "need assistance". There are specific guidelines on each aspect to determine which they scored. An overall score sheet is filled out with each of the aspects marked. Additional information is noted by the administrator such as client's orientation, attention span, time management, memory and figure ground skills.

Interpretation: Each aspect marked as needing assistance is scored as 1 point with some exceptions. A score of 5 ½ or less represents that the client is capable to live independently. If the score is 6 or higher the client needs assistance to live in the community. Depending on the aspects the client needs assistance with depends on what type and where to get assistance. For example if the client needs assistance with money management and food a halfway house could be a good fit. But if the client needs assistance with health and safety a nursing facility may be better.

Examiner Qualification & Training: Manual refers to an occupational therapist as administering the test but does not specify qualifications.

IV. Technical Considerations

Standardization: ____ Norms Criterion Referenced ____ Other

Reliability: Inter-rater reliability in an early study ranged from .74- .94 agreement. Subsequent studies reported by the author used minor changes in procedure and yield high agreement (0.84, .94, .94, .98, 1.0)

Validity: High correlations of $r=.70$ with Functional Independence Measure and Mini Mental State Exam; $r=.895$ with the Routine Task Inventory; $r=.84$ with The Bay Area Functional Performance Evaluation; and Global Assessment Scale $r=.78$ to $.89$ with $p<.001$

Manual: Adequate

What is (are) the setting/s that you would anticipate using this assessment?

Not suggested in settings with long length of stays due to the consideration that the client's daily life resources have changed dramatically

Summary of strengths and weaknesses:

Strengths:

- Listed under Medicaid and Medicare's approved evaluations
- Very applicable to OT
- Addresses variety of important aspects of daily living

Weakness:

- Visual problems could be misleading in test score.
- This test is not sufficient to make a diagnosis or to create a treatment plan- need to incorporate other tests and evaluations.
- Published in 1992 so it is not current
- Cultural bias
- Manual does not list technical considerations