



Level of care for deinstitutionalized psychiatric patients.

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Abstract: The New York state Level-of-Care Survey (LOCS) was used in 1987-88 to assess the community care and social support needs of 936 mentally disabled community residents in Halifax, Nova Scotia. The cases were assigned an appropriate level-of-care by the computerized algorithm based on an 101-item questionnaire covering all aspects of the cases' physical and mental condition, needs and activities. Compared with their current setting, the algorithm assigned 60% of cases to the same level-of-care, 17% to a lower level, and 23% to a higher level-of-care. The net effect on social service costs of the reassignments would be a 7% increase. The increased costs for some cases (\$1.5 million) would be partly offset by lowered costs for others (\$900,000). The gradual shifting of 14 cases from the relatively expensive rehabilitation unit to more independent living at lower levels of care would compensate for most of the increases.

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