

Patient-Driven Groupings Model - Functional Level Scoring

Functional Impairment Level (From OASIS Items)		
Low	Medium	High

Being reimbursed for the work your agency has provided is critical to growth and success. The points accumulated from responses to these OASIS items determine if the patient is categorized as having a low, medium, or high functional impairment. The points needed to progress between levels will vary based upon the Clinical Grouping.

Functional Items Scoring Tips:

- Timeframe: 24 hours preceding the visit only
- Varying performance: Score is based on patient's ability 50 percent or more of the time assessed
- Conduct an assessment, not an interview: The patient must be up and moving MAKE THEM SHOW YOU!
- Accurate assessments combine methods of observation, interview, and collaboration with other clinicians with direct patient contact during the assessment timeframe

M1800 – Grooming – Consider <u>ability</u>, rather than willingness or actual performance, to <u>safely</u> perform grooming tasks

- This measure specifically includes: washing face and hands; shaving or applying makeup; teeth or denture care; and fingernail care
- This measure excludes: bathing, shampooing hair, and toilet hygiene Response of 2 or higher = 4 points

M1810/M1820 – Dressing Upper Body/Dressing Lower Body – Consider <u>ability</u>, rather than willingness or actual performance, to <u>safely</u> obtain, put on, and take off clothing that is regularly worn

- These measures specifically include: managing zippers, buttons, and snaps; managing undergarments (e.g. hooking bra); and managing prosthetics and support devices (e.g. anti-embolism garments)
- Nurses may be well positioned to observe the removal and replacement of upper body
 clothing in the process of listening to heart and lung sounds as well as the removal and
 replacement of shoes and socks when checking pedal pulses and observing skin integrity.

M1810 response of 2 or higher = 6 points

M1820 response of 2 = 5 points

M1820 response of 3 = 11 points

M1830 – Bathing – Consider <u>ability</u>, rather than willingness or actual performance, to <u>safely</u> wash entire body.



- This measure specifically includes the tasks of getting into and out of tub or shower; often, mobility, balance, or range of motion deficits are limiting factors
- Being fearful and unwilling to attempt bathing is the same as being physically unable (response of 4 or 5).

Response of 2 = 3 points Response of 3 or 4 = 13 points Response of 5 or higher = 21 points

M1840 – Toilet Transferring – Consider <u>ability</u>, rather than willingness or actual performance, to <u>safely get to and from</u> the toilet or commode and <u>transfer on and off</u>

• Pain, weakness, cognitive limitations, and balance all need to be considered to determine the level of assistance needed to be safe

Response of 2 or higher = 4 points

M1850 – Transferring - Consider <u>ability</u>, rather than willingness or actual performance, to <u>safely</u> transfer between bed and chair in both directions or turn and position self if bedbound

- "Minimal human assistance" in response two (2) includes manual, verbal, or set-up assistance of less than 25 percent of the task
- Included steps to the task range from changing from supine to sitting on the edge of the bed as well as the stand pivot or slide board maneuver

Response of 1 = 4 points Response of 2 or higher = 8 points

M1860 – Ambulation – Consider <u>ability</u>, rather than willingness or actual performance, to <u>safely</u> ambulate

- Cannot score a patient with equipment that is not in the home. If the patient is not safe with a straight cane, and you believe a walker would make them safe, but there is no walker in the home, you cannot factor the walker into the assessment.
- Ambulating with a walker, but not being safe unless there is contact guarding should be scored as a three (3).
- Patients who can't negotiate stairs or uneven surfaces safely even with assistance should be scored as a three.

Response of 2 = 10 points Response of 3 = 12 points Response of 4 or higher = 24 points

M1033 – Risk for Hospitalization – It is important to mark <u>all</u> that apply in order to accurately determine the functional impairment

- Be mindful that the look-back period varies for each of the response items.
- Response one (1) includes witnessed and unwitnessed falls and response seven (7) includes over-the-counter and herbal medications.

4 or more boxes checked = 11 points