QUALITY MEASURE TIP SHEET: Activities of Daily Living—Long Stay

Quality Measure Overview
This measure reports the percentage of residents whose need for help with activities of daily living (ADLs) has increased when compared to the prior assessment.

- This measure reports the percentage of residents whose need for help with activities of daily living (ADLs) has increased when compared to the prior assessment.
- Measures the **most support provided in the last seven days**, even if that support only occurred once.
- **This measure involves four late-loss ADLs:**
  - Bed mobility
  - Transferring
  - Eating
  - Toileting

**Exclusions:**
- All four late-loss ADL items indicate total dependence on the prior assessment (4, 7, 8 coded).
- Three of the late-loss ADLs indicate total dependence on the prior assessment, and the fourth late-loss ADL indicates extensive assistance.
- Resident is comatose.
- Prognosis of life expectancy is less than six months.
- Hospice care is employed.
- Resident is not in the numerator and bed mobility or transferring, eating, or toileting equal [-].

MDS Coding Requirements

In the Minimum Data Set (MDS):
- Include look-back period of seven days.
- Code based on resident’s level of assistance when using adaptive devices such as a walker, a device to assist with donning socks, a dressing stick, a reacher, or adaptive eating utensils.
- Capture the total picture of the resident’s ADL performance 24 hours a day for the entire seven-day period.
- Indicate if the activity occurred three or more times within the seven-day period, using the ADL Self-Performance Algorithm (see the Resident Assessment Instrument [RAI], page G-8).

Ask These Questions ...

- Was the MDS coded per RAI requirements?
- Is the staff member’s coding documentation accurate?
- Is the MDS designee completing self-observation of care and staff member interviews to determine accuracy of documentation?
- Has baseline function been determined?
- Has the root cause for the decline been determined and treated?
- Has the resident been referred to therapy for treatment?
- Are underlying health conditions that may be affecting ADL performance being treated?
- Have restorative programs been initiated to rehabilitate or maintain the resident’s ADL performance?
- Does evidence exist of the delivery of services for residents on a restorative program?
- Is pain/depression managed?
- Is the resident receiving appropriate assistance from staff members?
- Are activity pursuits appropriate?
- Is adaptive equipment available, as needed, to assist the resident?

FOR GUIDANCE ON QUALITY MEASURES, PLEASE REACH OUT TO A TELLIGEN NURSING HOME QUALITY IMPROVEMENT FACILITATOR