

# MFEI Level of Care Tool

## Module 7 – Activities of Daily Living (ADLs) & Additional Functional Status Items

# Module 7: ADL Self-Performance and Additional Functional Status Items

Covered in this module:

- Bathing
- Personal hygiene
- Dressing upper body
- Dressing lower body
- Locomotion
- Transfer toilet
- Toilet use
- Bed mobility
- Eating
- Transfer
- Additional assistance needed in any of the ADLs
- Mode of locomotion/walking
- Most severe pressure ulcer
- Employment status



# 14. ADL Self-Performance

**Intent:** To record what the person did for themselves and how others assisted in the performance of self-care activities of daily living during the last 3 days

**Process:** Measure the following activities based on all episodes of the activity over the last 3 days. Record what the person's actual level of involvement in self-care and the type and amount of support actually received

- A person may be independent in one aspect of an ADL (e.g. personal hygiene) but need extensive assistance in another aspect

# a. Bathing

**Definition:** How the person takes a full body bath/shower, includes how transfers in and out of the tub or shower AND how each part of the body is bathed: arms, upper and lower legs, chest, abdomen, perineal area—EXCLUDE WASHING OF BACK AND HAIR

## **Example Questions:**

- How do you take a shower or bath?
- Does anyone help you? If so, how do they help you?
- How do you get in and out of the shower or bath?
- Are you able to reach all parts of your body?
- Are you able to adjust the water to a safe temperature?

## b. Personal Hygiene

**Definition:** How the person manages personal hygiene, including combing hair, brushing teeth, shaving, applying make-up, washing and drying face and hands—EXCLUDE BATH AND SHOWERS

### Example Questions:

- Tell me how you manage your personal appearance and hygiene?
- Are you able to comb the back and sides of your hair?
- Are you able to clean your face with soap or a facial wipe?
- Are you able to get a toothbrush to all teeth?
- Are you able to shave without hurting yourself?
- Have you needed to change your makeup routine?
- Have you changed your morning or evening hygiene routines?

## c. Dressing Upper Body

**Definition:** How the person dresses and undresses (street clothes, underwear) above the waist, including prostheses, orthotics, fasteners, pullovers, etc.

### **Example Questions:**

- How do you get dressed?
- Do you decide what to wear?
- Are you able to put a shirt on over your head?
- Are you able to button or zip a shirt, sweater, etc.?
- Are you able to get a jacket on?
- Does anyone help you get dressed?
- Do you need help putting on prosthetics?

## d. Dressing Lower Body

**Definition:** How the person dresses and undresses (street clothes, underwear) from the waist down including prostheses, orthotics, belts, pants, skirts, shoes, fasteners, etc.

### **Example Questions:**

- How do you get dressed?
- Do you decide what to wear?
- Do you have any trouble balancing when you put on your underwear or pants/shorts/skirts?
- Are you able to put on and tie your shoes?
- Do you need help putting on prosthetics?

## e. Locomotion

**Definition:** How the person moves between locations on the same floor (walking or wheeling)

➤ If in wheelchair, self-sufficiency once in chair

### Example Questions:

- Do you use any assistive devices to move around your home?
- Are you able to access all the rooms on this floor of your home easily?

## f. Transfer Toilet

**Definition:** How the person moves on and off the toilet or commode

### **Example Questions:**

- Are you able to easily get on and off the toilet?
- Do you have any assistive devices to help you balance while using the toilet?
- Have you ever fallen while trying to get on or off the toilet?
- Does anyone help you so that you won't fall while using the toilet?

## **g. Toilet Use**

**Definition:** How the person uses the toilet (or commode, bedpan, urinal), cleanses self after toilet use or incontinent episode(s), changes pad, manages ostomy or catheter, adjusts clothes –EXCLUDE TRANSFER ON AND OFF TOILET

### **Example Questions:**

- Are you able to clean yourself and adjust your clothing after you go to the bathroom?
- If you have an accident, are you able to clean yourself afterwards?

## **h. Bed Mobility**

**Definition:** How the person moves to and from lying position, turns from side to side, and positions body while in bed

### **Example Questions:**

- Do you have difficulty changing positions while in bed?
- Do you have difficulty moving from side to side?

# i. Eating

**Definition:** How the person eats and drinks (regardless of skill); includes intake of nourishment by other means (e.g., tube feeding or total parenteral nutrition)

## **Example Questions:**

- Do you need help cutting up food?
- Are you avoiding foods that are more difficult for you to eat? Why are they difficult to eat?
- Do you need prompts to eat in a safe manner?
- Do you need reminders to drink water?

# j. Transfer

**Definition:** How the person moves between surfaces including to or from: bed, chair, wheelchairs, standing position – EXCLUDE TRANSFER TO/FROM BATH/TOILET/VEHICLE

## Example Questions:

- From your wheelchair, are you able to transfer yourself to your bed or a chair by yourself?
- Are you able to get from your bed or chair into your wheelchair?
- Are you able to get up from the couch? Do you need any help to do it?

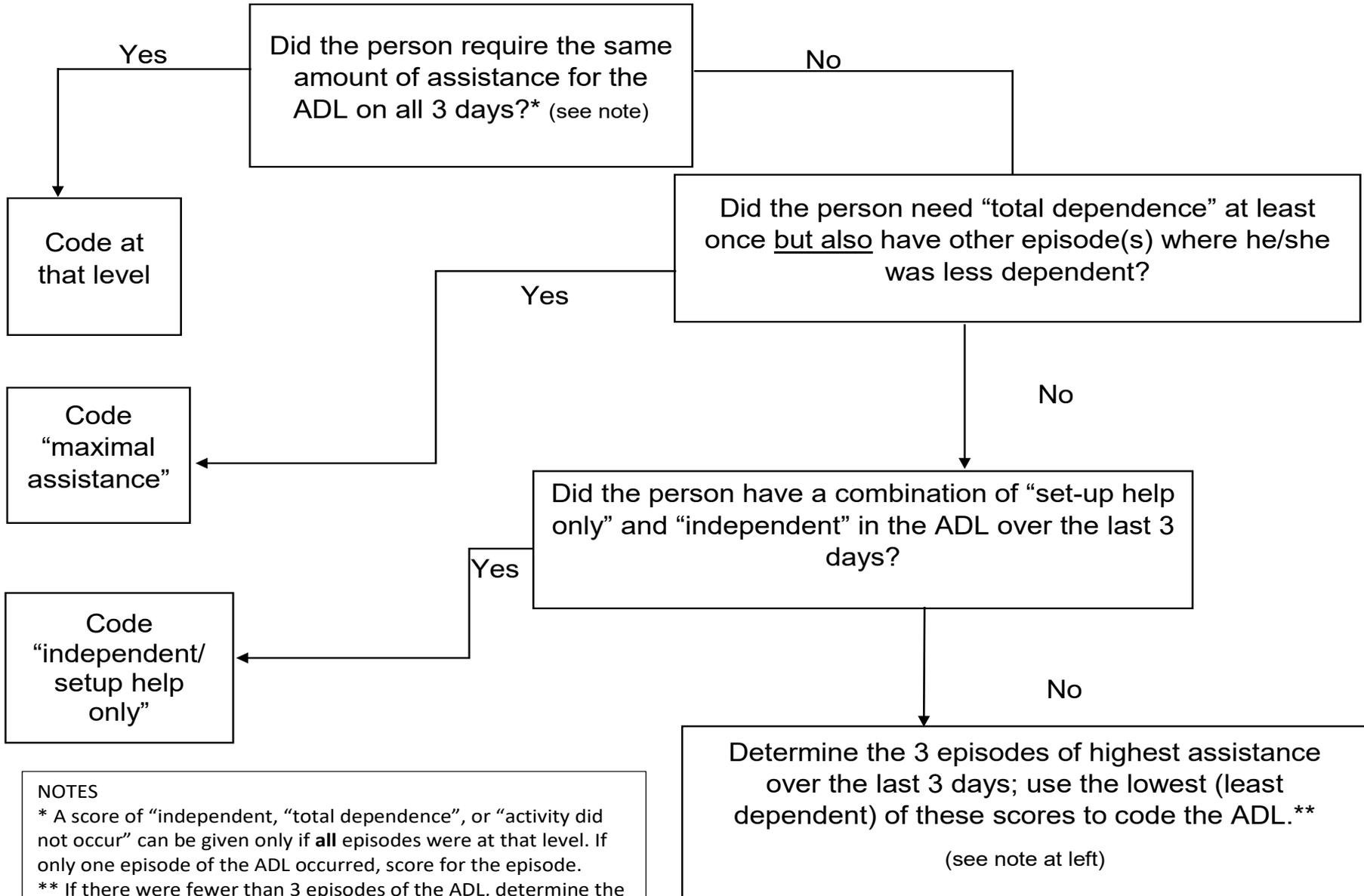
# 14. ADLS: Coding

- ❑ **Independent** – No help, setup or supervision in any episode
- ❑ **Independent, setup help only**—Article or device provided or placed within reach, no physical assistance or supervision in any episode
- ❑ **Supervision** – Oversight/cueing required
- ❑ **Limited assistance** – Guided maneuvering of limbs, physical guidance without taking weight
- ❑ **Extensive assistance** –Weight-bearing support (including lifting limbs) by 1 helper or where person still performs 50% or more of subtasks
- ❑ **Maximal assistance** – Weight-bearing support (including lifting limbs) by 2+ helpers-OR-weight-bearing support for more than 50% of subtasks
- ❑ **Total dependence** – Full performance by others during all episodes
- ❑ **Activity did not occur during entire period**
- See manual for examples of codes for each ADL

# 14. ADLs: Scoring Rules

- Review all episodes over the last 3 days
- When ADL self-performance in an area varies over the last 3 days, identify the three most dependent episodes – i.e. the episodes when the person received the greatest care or assistance from others
- Performance:
  - If all episodes are the same, then score at that level (e.g. **Independent, Total dependence, or Activity did not occur**)
  - BUT if any episode is at **Total dependence** and others are *less* dependent, score ADL at **Maximal assistance**
  - Otherwise, focus on the three most dependent episodes:
    - If most dependent episode is **Independent, setup help only**, score it that
    - If not, score ADL as least dependent of those episodes in range **Supervision to Maximal assistance**

## Kansas MFEI – ADL Performance Scoring Flowchart



**NOTES**

\* A score of "independent, "total dependence", or "activity did not occur" can be given only if **all** episodes were at that level. If only one episode of the ADL occurred, score for the episode.  
 \*\* If there were fewer than 3 episodes of the ADL, determine the 2 highest episodes.

# 14. ADLs: Scoring Rules

- Setup Help—assistance characterized by the provision of articles, devices, or preparation necessary for the person's self-performance of an activity
  - Includes giving or holding out an item the person takes from the helper, if the helper then leaves the person alone to complete the activity
  - If someone remains nearby to watch over the person, the person is receiving oversight

# 14. ADLs: Scoring Rules

- Weight bearing—person may require varying degrees of physical assistance to complete ADL tasks
  - When relating to non-upright positions, such support might take the form of a helper holding the full weight of an arm while assisting the person with putting on a shirt
  - When related to standing or walking such support might mean taking the person's weight by holding them under the armpit, or allow the person to lean on the helper's arm
  - Guiding movements with minimal physical contact and contact guarding with intermittent physical assistance are NOT considered weight bearing

# 14. ADLs: Coding Examples

## Bathing

**Independent (no physical assistance, setup, or supervision in any episode)**

Mr. A takes a shower every night. He is able to set out his towel, get in to and out of the shower, and wash himself on his own.

**Independent, set up help only (article or device provided or placed within reach, no physical assistance or supervision in any episode)**

Mr. A takes a shower every two days. He can get into the shower and wash himself on his own. He needs his partner to put in the shower chair for him.

# 14. ADLs: Coding Examples

## Bathing

### Supervision (oversight/cueing)

Mr. A takes a shower every other night. He can get into and out of the shower on his own, but he needs his partner to remind him to wash all parts of his body.

### Limited assistance (guided maneuvering of limbs, physical guidance without taking weight)

Mr. A takes a shower every night. Due to his low vision, he needs guided assistance from his partner to get the body wash onto his wash cloth.

# 14. ADLs: Coding Examples

## Bathing

**Extensive assistance (weight-bearing support [including lifting limbs] by one helper where person still performs 50% or more of the subtasks)**

Mr. A takes a shower twice a week. He took a shower last night. He has difficulty balancing well enough to get into and out of the shower. His partner takes some of his weight to help him balance. Mr. A can complete all other tasks related to bathing on his own.

# 14. ADLs: Coding Examples

## Bathing

**Maximal assistance (weight-bearing support [including lifting limbs] by 2+ helpers OR weight-bearing support for more than 50% of subtasks)**

Mr. A took a bath last night. His partner and caregiver worked together to lift him in to and out of the bath, but Mr. A was able to wash himself.

OR

Mr. A needs weight-bearing support from his caregiver to get into the shower. His caregiver completes most of the bathing activities, although Mr. A is able to assist with washing his upper body.

# 14. ADLs: Coding Examples

## Bathing

**Total dependence (full performance by others during all episodes)**

Mr. A took a bath last night. His partner lifted him in and out of the tub and washed all body parts. Mr. A did not help with any of the tasks related to bathing.

**Activity did not occur during entire period (DO NOT USE THIS CODE IN SCORING CAPACITY)**

Mr. A did not bathe in the last 3 days. OR  
Mr. A only took sponge baths during the last three days.

# 14k. ADLS: Additional Assistance Needed

- The intent of this item is to gather information about ADLs that the person may be performing independently out of necessity, but needs assistance in order to perform the task adequately and safely
- An explanatory note is required for each ADL area marked as more help needed; use the comments area
- In software, only items that need to be assessed will show up (skip pattern)
- Check if more help needed in (as compared to actual performance in the last 3-days):
  - Bathing/Hygiene,
  - Dressing (upper/lower)
  - Locomotion
  - Toilet use/Toilet transfer
  - Eating
  - Transfer (excluding bath, toilet, or vehicle transfer)
  - None, N/A

# 14k. ADLS: Additional Assistance Needed: Coding Examples

## Additional Assistance Needed: Bathing/Hygiene

### Yes, more help is needed

- Person has been bathing themselves independently; however, they are a fall risk when transferring in and out of the shower.
- Person has been bathing themselves, however, they cannot reach their lower legs and feet.
- Person has been taking care of their own hygiene, however, hygiene is very poor to the point of putting their health at risk.

### No, additional help is not needed

- There are no concerns about the person's capacity to bathe themselves or manage their hygiene.
- The person's family believes the person needs to shave more often, however, their health is not at risk.
- There are concerns that the person is 'only' bathing every other day; however, there is no medical reason why they need to bath more often.
- The person takes "too long" to complete their bath; however, they are still able to complete the task.

# 14k. ADLS: Additional Assistance Needed: Coding Examples

## Additional Assistance Needed: Locomotion

Yes, more help is needed

- The person has been walking independently, but they are a fall risk.
- The person has been wheeling themselves independently, but they are running into things and risk hurting themselves or others.
- The person has been walking/wheeling themselves independently but they are too slow to the extent that they cannot cross the street in time.
- The person is independent when in their home environment, using a walker. But they need more help in public due to fatigue that occurs when ambulating longer distances. The person was rated independent under performance as they have not left their home in the past three days, but additional assistance is needed when they leave the home.

No, additional help is not needed

- There are no concerns about the person's ability to walk/wheel themselves.
- The person walks independently, but family members complain that they are "too slow," yet no safety risks are apparent.

## 14k. ADLS: Additional Assistance Needed: Coding Examples

### Additional Assistance Needed: Eating

#### Yes, more help is needed

- The person is eating independently, but they need more assistance to follow doctor's orders for dietary restrictions.
- The person has cognitive impairments that make it difficult to make informed dietary decisions.
- The person is eating independently, but they are at risk of choking.
- The person is eating independently, but it is so difficult and/or tiring for them that they often do not finish their meal to the extent of insufficient nutritional intake.

#### No, additional help is not needed

- There are no concerns about the person's ability to feed themselves.
- Caregivers are concerned about the person's dietary choices; however, the person is making an informed choice to eat poorly and are capable of eating healthier food if they choose to.
- Caregivers are concerned that it takes the person "too long" to finish their meal, however, the person is able to finish eating the amount of food they desire.

# 15. Primary Mode of Locomotion/Walking

**Intent:** to identify the person's *primary* mode of locomotion and the types of appliances, aids, or assistive devices the person used over the last 3 days indoors

## **Coding:**

- Walking, no assistive device
- Walking, uses assistive device—e.g. cane, walker, crutch, pushing wheelchair
- Wheelchair, scooter
- Non-ambulatory—e.g. stays in bed, uses gurney

# 16. Most Severe Pressure Ulcer: Intent

- To document the presence of any pressure ulcers; this will help to facilitate the monitoring of healing or worsening over time
  - In the software, this item may be skipped for consumers who do not have locomotion or mobility impairments

# 16. Most Severe Pressure Ulcer: Definitions

- **Any area of persistent skin redness** — A persistent area of skin redness (without a break in the skin) that does not disappear when pressure is relieved
- **Partial loss of skin layers** — A partial thickness loss of skin layers that presents clinically as an abrasion, blister, or shallow crater
- **Deep craters in the skin** — A full thickness of skin is lost, exposing the subcutaneous tissues. Presents as a deep crater with or without undermining adjacent tissue
- **Breaks in skin exposing muscle or bone** — A full thickness of skin and subcutaneous tissue is lost, exposing muscle or bone

# 16. Most Severe Pressure Ulcer: Process

- Discuss the presence of an ulcer with the person or caregiver (for example, a family member or health care aide)
- Ask if they have been examined for the presence of pressure ulcers or other skin conditions, and if there is any documentation of the ulcer
- The assessor is not expected to make a clinical diagnosis, but rather, refer to documentation or what the informant reports about their medical condition
- If you receive information that there is an ulcer but you cannot determine the severity, choose “not codeable”

# 16. Most Severe Pressure Ulcer: Coding

- Code for the most severe pressure ulcer present. If the person has more than one ulcer, determine which ulcer is in the highest (worst) category and code based on that ulcer
  - No pressure ulcer
  - Any area of persistent skin redness
  - Partial loss of skin layers
  - Deep craters in the skin
  - Breaks in skin exposing muscle or bone
  - Not codeable — For example, necrotic eschar (scar tissue) predominant that makes assessment impossible; person does not know and no documentation is available

# 17. Employment Status

**Intent:** To determine person's employment status (paid work) and interest in employment if the person is not currently employed

- *Does not include volunteering*
- *If a person is interested in pursuing employment, a referral to the Working Health/WORK program is encouraged*

## Coding:

- Employed**
- Unemployed/retired/student/homemaker, actively seeking employment**
- Unemployed/retired/student/homemaker, not seeking employment**
- Unemployed/retired/student/homemaker, but may want to seek employment**

# Practice Scenarios

# ADL: Practice Scenario A

Mrs. A lives at home with her husband. She has been diagnosed with Alzheimer's. It has always been very important to her to do her hair and makeup every morning. Her husband has noticed that in the past month, there have been some mornings when she hasn't combed her hair. He has tried mentioning it to her, but sometimes she becomes agitated and upset. Last week he began to lay out her hairbrush and makeup every night before bed so that she would see them in the morning. He reports that he has done that every day and since he started setting them out, she hasn't missed a day doing her hair and makeup.

**How would you rate item 14b. *Personal Hygiene* for Mrs. A?**

# ADL: Practice Scenario A Answer

Mrs. A lives at home with her husband. She has been diagnosed with Alzheimer's. It has always been very important to her to do her hair and makeup every morning. Her husband has noticed that in the past month, there have been some mornings when she hasn't combed her hair. He has tried mentioning it to her, but sometimes she becomes agitated and upset. **Last week he began to lay out her hairbrush and makeup every night before bed so that she would see them in the morning. He reports that he has done that every day and since he started setting them out, she hasn't missed a day doing her hair and makeup.**

Personal Hygiene: **Independent, Set-up help only**

# ADL: Practice Scenario B

Ms. N has paraplegia as a result of a car accident. She is very independent performing all of her ADL's. However, two weeks ago, she slipped and fell while transferring herself from her wheelchair to the toilet. As a result, she hit her head and received a cut requiring a few stitches. Since that time she is nervous while transferring to the toilet and asks that her partner be present to help reassure her.

**How would you rate item 14f. *Transfer Toilet* for Ms. N?**

# ADL: Practice Scenario B Answer

Ms. N has paraplegia as a result of a car accident. She is very independent performing all of her ADL's. However, two weeks ago, she slipped and fell while transferring herself from her wheelchair to the toilet. As a result, she hit her head and received a cut requiring a few stitches. Since that time she is nervous while transferring to the toilet and **asks that her partner be present to help reassure her.**

**Toilet Transfer: Supervision**

# ADL: Practice Scenario C

Mr. B usually repositions himself in bed. However, because he sleeps with the head of the bed raised 30 degrees, he occasionally slides down towards the foot of the bed. During the last 3 mornings a family member helped him reposition by providing weight-bearing support as he bent his knees and pushed up off the footboard.

**How would you rate item 14h. *Bed Mobility* for Mr. B?**

# ADL: Practice Scenario C

Mr. B usually repositions himself in bed. However, because he sleeps with the head of the bed raised 30 degrees, he occasionally slides down towards the foot of the bed. **During the last 3 mornings a family member helped him reposition by providing weight-bearing support as he bent his knees and pushed up off the footboard.**

**Bed Mobility: Extensive assistance: Weight-bearing support required but person performs at least 50% of subtasks**

# ADL: Practice Scenario D

Ms. H lives in an apartment. You notice that when she walks short distances, she uses objects, such as furniture, to help support herself. However, when she goes from room to room, she uses her walker. She states that she uses her walker whenever she leaves the home.

**How would you code *Additional Assistance* for Ms. H?**

# ADL: Practice Scenario D

Ms. H lives in an apartment. You notice that when she walks short distances, she uses objects, such as furniture, to help support herself. **However, when she goes from room to room, she uses her walker.** She states that she uses her walker whenever she leaves the home.

**Locomotion/walking: Walking/ uses assistive device**

# ADL: Practice Scenario E

Mrs. A is an 82-year-old woman who uses a walker for mobility around her own home. Her home is small and adapted to her mobility needs, so she is able to move about safely in her home independently and always remembers to use her walker. She is also able to transfer safely, without assistance. She has not left her home in the last three days. However, when Mrs. A leaves her home, she often needs assistance with locomotion. She becomes fatigued and short-of-breath when needing to ambulate longer distances, so family members stay by her side and sometimes push her in a wheelchair. She is able to transfer in and out of the wheelchair safely without assistance.

**How would you rate performance for 14e. *Locomotion* and 14j. *Transfer*? How would you rate 14k. *Additional Assistance Needed for Locomotion and Transfer*?**

# ADL: Practice Scenario E

Mrs. A is an 82-year-old woman who uses a walker for mobility around her own home. Her home is small and adapted to her mobility needs, so she is able to move about safely in her home independently and always remembers to use her walker. She is also able to transfer safely, without assistance. She has not left her home in the last three days. However, when Mrs. A leaves her home, she often needs assistance with locomotion. She becomes fatigued and short-of-breath when needing to ambulate longer distances, so family members stay by her side and sometimes push her in a wheelchair. She is able to transfer in and out of the wheelchair safely without assistance.

**Locomotion: Independent**

**Additional Assistance Needed? Yes**

**Transfer: Independent**

**Additional Assistance Needed? No**