

## OASIS Alert

### Assessment: Follow The 3 Ws To Accurately Track Ambulation Improvement

#### 4 scenarios reveal your ability to choose the correct score for M1860.

Knowing that your patients' improvements in ambulation are being publicly reported doesn't make assessing their abilities any easier.

Problem: The OASIS makes tracking improvement a challenge by asking you to not only simplify one-hand versus two-hand devices but to also address different surfaces and amounts of assistance needed, warns **Carol Siebert**, a principal with **The Home Remedy** in Chapel Hill, N.C.

Use this guide to ensure you capture the right information at assessment so that your outcomes match all the hard work you put into caring for your patients:

#### Look for the 3 Ws

M1860 (Ambulation/Locomotion: Current ability to walk safely, once in a standing position, or use a wheelchair, once in a seated position, on a variety of surfaces) is a loaded item. Before you can accurately score your patient, you need to understand what the item is asking for.

Your score should take into account all three of these "W" factors:

1. Where: The types of surfaces or surface transitions on which the patient ambulates,
2. What: The intensity of equipment support the patient uses, and
3. Who: The need for another person to be present.

Why: "Focusing on only one or two factors will lead to an inaccurate score and may result in outcomes of home care not being accurately captured," Siebert explains. But the difference between the factors can be tough to spot. For instance, your patient may use a one-handed device on uneven surfaces and need human assistance at some point. (Keep in mind that assistance isn't always lending a hand; it also includes verbal cues and supervision.)

If the patient can ambulate safely on the uneven surfaces **and** stairs without help -- even if the patient will accept help if it's offered -- the score will be 1. However, if the patient requires any type of human intervention **or** can only navigate stairs, you'd assign a score of 2.

Crucial: You'll also assign a 2 to any patient who must use a two-handed device like crutches or a walker -- even if the patient can use that two-handed device independently.

Why "who" matters: You must determine the third W even if knowing it won't affect your score, as in the case of a patient using a two-handed device. Failing to determine that last factor could lead you to assume falsely that a patient is totally independent, Siebert says.

#### Put Your M1860 Skills To The Test

Use the following sample scenarios to test your ability to sort through and accurately score for the three Ws:

Scenario A: The patient can walk independently without any assistance from either a human or device on

uneven surfaces. The patient cannot climb stairs without the use of a stair rail.

Scenario B: The patient prefers to ambulate without assistance from a human or device, but often falls. The only safe way for the patient to walk is with a cane and the care giver's helping hand. When using the cane and getting guidance from a helper, the patient is able to ambulate safely both on uneven surfaces and stairs.

Scenario C: The patient relies on a walker to ambulate safely on uneven surfaces and stairs. The patient cannot climb stairs.

Scenario D: The patient can walk independently without any assistance on uneven surfaces. The patient has been observed climbing stairs without using any assistance, but leans on the rail when asked by the clinician to climb stairs.

**Answers:** In all four scenarios, your first goal is to find out where the patient can walk, then look at what devices are needed, and lastly note whether a person must assist. For Scenario A, the patient can ambulate on uneven surfaces but not on stairs (where). When trying to climb stairs, the patient uses a cane (what) but not a person (who). The score for this patient is 1.

Scenario B may seem similar to A, but there's one crucial difference -- safety. In Scenario B, the patient needs a device (what) and human assistance (who) on all surfaces (where). Therefore, the score would be 2.

When answering Scenario C, you quickly see that there's no device (what) or human assistance (who). You must then examine the where. In this case, the patient can walk everywhere. You've met all three conditions and can respond 0.

Tip: Scenario D brings in an important assessment strategy, Siebert says. You should assess "spontaneous" ambulation as well as "guided" ambulation. With spontaneous ambulation, you're observing the patient without his or her acknowledgment.

Why it's important: If your patient thinks no one's watching, he or she may reveal a greater level of independence than you thought. Asking the patient to walk "for you" or climb stairs "for you" may cause him or her to act differently.

Try this: Give the patient a different reason to ambulate, Siebert suggests. You might ask the patient to show you where medicine is kept or where the bathroom is. This lifts the pressure off the patient to perform and will give you a better measure of ability.

Therefore, if you've observed the patient walking upstairs independently (and safely) without the use of a rail, you'd choose response 0.

The bottom line: The last thing you need is for future or potential patients to look at your improvement measures and see that your current patients are failing to improve. Focus on assessing patients' abilities so that your hard work will shine through at discharge.