

## OASIS Alert

### Assessment: When An ALF Is Home, Double-check OASIS Accuracy

Your quality measures may suffer if your clinicians don't understand the difference between "can" and "do."

Providing home care for patients in an assisted living facility can complicate even the simplest episode. Although the ALF is considered the patient's residence and home care may be appropriate, OASIS questions written for a patient in an individual home situation may be harder to answer when the same patient is in an ALF.

Since the licensing rules differ from one ALF to another, your agency must select OASIS answers that are most appropriate for your area, experts suggest. For example, medication management may differ, with some ALFs allowing patients to handle their own medications and others requiring the ALF staff to administer meds.

Rules for licensing ALFs vary from state to state, advises health care attorney **Liz Pearson** with Covington, KY-based **Pearson & Bernard**, and some ALFs suggest a specific home health agency for their residents. That's acceptable as long as the ALF doesn't interfere with the physician or resident choosing a different agency, she says.

CAUTION: HHAs working with ALFs need to be careful about exclusive arrangements. Many ALFs are run by groups outside the medical industry, such as hotel companies, Pearson cautions. Be aware that they may be unfamiliar with the degree of regulation health care involves and may request services from HHAs that are fine in the corporate world, but a kickback in health care.

Confidentiality may be a more complicated issue when caring for ALF patients, says consultant **Linda Stock Rutman** with Charlotte, NC-based **LarsonAllen Health Care Group**. In an ALF, patient information is more likely to inadvertently be shared with caregivers "whose access to that information has not been specifically approved by the patient or legal guardian," she explains.

Agencies should document how they confirm who is allowed to participate in patient care and information sharing, Rutman suggests. These privacy arrangements should also be assured during the assessment and subsequent visits, she recommends.

Don't overlook: To prevent unnecessary emergent care issues, it is especially important in an ALF for the clinician admitting the patient to establish - with physician approval - an emergency plan and triage process for any anticipated emergent care issues specific to this patient, Rutman advises. Include the non-emergency room options that should be initiated prior to or instead of transport to the ER.

#### Avoid ALF Confusion On These OASIS Items

**M0780** asks whether the patient can prepare and take all prescribed oral medications safely and reliably, including taking the correct dose at the appropriate time. But the question doesn't require that the patient actually be the one preparing meds from day to day, instructs the **Centers for Medicare & Medicaid Services** in the questions and answers from the April 2003 OASIS Coordinators Conference in New Orleans. Instead, you can evaluate the patient's vision, strength, manual dexterity and cognitive ability to judge, CMS says.

One difficulty is the inconsistency in OASIS scoring this may cause, says OASIS consultant **Linda Krulish** with **Home Therapy Services** in Redmond, WA. It's important that clinicians answer M0780 consistently for a patient to prevent a report showing decline in management of oral medications when there really is no change, she adds.

It may be more difficult for an ALF patient to score "0" (independent) on this question since it is harder to remember all the details involved when you aren't actually doing it every day, clinicians report. But many patients are able to be

independent as long as the medication is prepared in advance or some other cuing is provided.

**Strategy:** Document in the clinical record the facility's requirement and how you assessed this item.

M0720 (Planning and preparing light meals) may also be unclear for an ALF patient. As with medications, focus on what the patient is able to do, not whether she actually does it, Krulish recommends.

M0340 is another question that may cause doubts when caring for an ALF patient. This question asks who the patient lives with. Since most ALF patients pay for a room or studio apartment, but eat meals with other residents and perhaps receive medication from ALF staff, clinicians may be tempted to answer "5" (with paid help) or "6" (with other than above) to this question.

Instead, think of the room or apartment as the patient's residence, experts suggest. If the patient lives alone in this residence, answer "1" (lives alone). Then in **M0350** you can indicate the other people assisting the patient, such as relatives, friends or paid help. Response-specific instructions for M0350 instruct that assisted living staff are considered paid help for this question.

TIP: A patient in an ALF who shares a room doesn't live alone, caution the OASIS experts from the **3M National OASIS Integrity Project** in their report released in November 2003. In M0340 you would choose the answer that reflects who she shares it with.