Contents for PART 5

The Pathways 3

Section C. PATHWAY 1: Activities of Daily Living 3

~~ Guidelines for ADL Performance ~~ 4

CODING EXAMPLES 5

Careful Questioning Required 6

C.12A. Locomotion 6

C.12B. Eating 7

C.12C. Transfer 8

C.12D. Bed Mobility 9

C.12E. Toilet Use 10

C.12F. Dressing 11

C.12G. Personal Hygiene 12

C.12H. Bathing 13

C.12I. Bladder Continence 14

C.12J. Medication Management 15

C.12K.a. Meal Preparation 16

C.12K.b. Shopping 16

C.12L. Going out of the home 17

C.12M. Activity of Daily Living Self-Performance Change 18

Section D. PATHWAY 2: Cognitive Performance 19

D.13A. Short Term Memory 20

D.13B. Memory Exercise Question 20

D.13C. Cognitive Skills for Daily Decision Making 21

D.13D. Making Self Understood 22

D.13E. Change in Mental Functioning in Last Seven Days 23

The Pathways

The following sections of the LOCET address the Pathways of eligibility: Activities of Daily Living, Cognitive Performance, Physician Involvement, Conditions and Treatments, Skilled Rehabilitation Therapies, Behavior, and Service Dependency. The questions in these sections are designed to assess the functional/medical status of the applicant. Each question is worded specifically about a particular activity or functional ability, and is pertinent to a specific period of time. The intake analyst may need to rephrase questions so that he/she communicates effectively with the informant. Select vocabulary which would be appropriate for an upper elementary level of education unless conversation with the applicant indicates otherwise. Questions should not be asked in a leading fashion, but clearly and objectively.

Section C. PATHWAY 1: Activities of Daily Living

Most applicants who qualify for the Louisiana Medicaid level of care criteria will qualify under Activities of Daily Living (ADLs). This set of criteria has been designed to identify those applicants with a significant loss of independent function.

An individual can vary in ADL performance from day to day. It is important to capture the total picture of ADL performance over a 7-day period. The 7-day look-back period is based on the date the Level of Care Eligibility Tool (LOCET) is completed. Since accurate coding is important for making eligibility decisions, the analyst must be sure to fully consider each activity definition.

The wording used in each coding option reflects real life situations where slight variations are common. When variations occur, the coding ensures that the applicant is not assigned to an excessively independent or dependent category. Codes permit one or two exceptions for the provision of additional care before the applicant is categorized as more dependent.

For instance, for the ADL of Transfer, Independent is defined as “No help or oversight” OR “Help/oversight provided only 1 or 2 times during the last 7 days.” The exception here is the “Help/oversight provided only 1 or 2 times during the last 7 days.” Each of the ADL performance codes

is exclusive; there is no overlap between categories. Changing from one category to another demands an increase or decrease in the number of times help is provided.

To evaluate the applicant's ADL performance, talk with the applicant to ascertain what he/she does for each ADL activity, as well as the type and level of assistance by others. Try to determine a consistent picture of ADL performances. The following list provides general guidelines for recording accurate ADL self-performance.

~~ Guidelines for ADL Performance ~~

• Do not confuse an applicant who is totally dependent in an ADL activity with one where the activity itself is not occurring. For example, an applicant who receives tube feedings and no foods or fluids by mouth is engaged in eating, and must be evaluated under the eating category for his/her level of assistance in the process.

• An applicant who is highly involved in providing him/herself a tube feeding is not totally dependent and should not be coded as "total dependence," but rather as a lower code depending on the nature of help received from others.

• Remember, each of the ADL performance codes is exclusive; there is no overlap between categories. Changing from one category to another demands an increase or decrease in the number of times help is provided.

CODING EXAMPLES

Item	Description of Applicant's Activity	Proper Coding
Locomotion	Mr. A ambulated independently around his home during the day. He becomes afraid at night and his wife walks him to the bathroom at least twice each night.	Supervision
Eating	Mrs. D is fed by a feeding tube. No food or fluids are consumed through her mouthtube; feeding assistance is performed by caregivers.	Total Dependence
Eating	Mr. F is fed via parenteral IV and requires total assistance in maintaining nutrition and fluids through the line.	Total Dependence
Transfer	Mrs. B is ventilator dependent and, because of many new surgical sites, she must remain on total bed rest.	Activity Did Not Occur
Bed Mobility	Mrs. P has been alone without informal support in the community for the last two weeks and is unable to physically turn, sit up or lay down in bed on her own. She presents with stage 3 pressure sores related to the lack of personnel to assist.	Activity Did Not Occur
Toilet Use	Mr. K has a urinary catheter. Adult briefs are utilized, checked and changed every three hours.	Total Dependence
Toilet Use	Mrs. J used the bathroom independently once she was placed in a wheelchair. She uses the bedpan independently at night.	Independent
Dressing	Ms. G received limited physical help with dressing for the past 3 days. She placed her arms into the bra and her caregiver assisted with positioning of her arms.	Limited Assistance
Personal Hygiene	Mr. T performs all personal hygiene tasks. Because of his failing eyesight, his wife hands grooming articles to him and returns them when he is finished.	Independent
Bathing	Mr. E receives verbal cueing and encouragement to take daily showers.	Supervision

Careful Questioning Required

The Intake Analyst must constantly be aware that the answer to one question may alert him/her to the need for more probing on another. For instance, the applicant is an elderly woman who is wheelchair bound. She is propelled throughout her environment by others. She is scored "D" in Item C.12A. for Locomotion. This indicates she received extensive assistance (involving weight-bearing 3 or more times) with locomotion in the look-back period.

When the Intake Analyst reached the question about transferring from one surface to another, Item C.12C, the informant told the Intake Analyst that the applicant did not receive any physical assistance in the look-back period with this activity. The Intake Analyst should pause here and ask the informant to carefully think about the activities during the last week. "Are you sure that Ms. Jones got in and out of her chair each time without assistance in the last week? Did she receive assistance when she got out of bed in the morning? What about going up and down steps? Did she receive help then?"

For this same applicant, more probing may be needed for the ADL of toileting. Someone who is wheelchair bound, elderly, and dependent upon others for movement once in the chair may be likely to have received help with toileting as well. As you will see, transferring on and off the toilet is scored in Item C.12.E (toileting), not in Item C.12.C (transferring). It is extremely important to code each Item appropriately.

C.12A. Locomotion

Locomotion refers to how the applicant gets around in the home environment, moving from surface to surface. If the applicant uses a wheelchair, coding should reflect the applicant's self-sufficiency one he/she is in the chair. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent

Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12B. Eating

This section refers to how the applicant eats and drinks (regardless of skill and includes intake of nourishment by other means, e.g., tube feeding, total parenteral nutrition). The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12C. Transfer

This section refers to the applicant's ability to move between surfaces, to/from a bed, chair, wheelchair, and to a standing position (excluding to/from bath/toilet). The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12D. Bed Mobility

This section refers to the applicant's ability to move to and from a lying position, to turn side to side, and to position the body while in bed. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12E. Toilet Use

This section refers to how well the applicant uses the toilet room (or commode, bedpan, urinal), transfers on/off toilet, cleanses, changes pad, manages ostomy or catheter, and adjusts clothes. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12F. Dressing

This section refers to how well the applicant dresses and undresses him/herself, including prostheses, orthotics, fasteners, pullovers, belts, pants, etc. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12G. Personal Hygiene

This section refers to how well the applicant performed tasks such as combing the hair, brushing teeth, shaving, applying make-up, washing/drying face and hands. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.

Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12H. Bathing

This section refers to how the client takes a full body bath/shower or sponge bath. Exclude washing of the back and hair. Code for the most dependent episode in the last 7 days. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Make this selection when the applicant is independent. Independent means the applicant needs no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days.

Selection b: Supervision
Make this selection when the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

Selection c: Limited Assistance
Make this selection when the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days.

Selection d: Extensive Assistance
Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:
• Weight-bearing support
• Full performance by another individual during part, but not all, of last 7 days

Selection e: Total Dependence
Make this selection when the applicant required full performance of activity by another individual during entire 7-day period.
Selection f: Activity did not occur during entire 7-day period (regardless of ability)
Make this selection when the activity did not occur for this applicant.

Selection g: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's functional ability in this area for the last 7 days.

C.12I. Bladder Continence

This section refers to how well the applicant maintains urinary continence; use of bladder continence devices is also assessed. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Continent
Code if applicant has complete control and no device used.

Selection b: Continent with catheter
Code if applicant has complete urinary bladder control with any type of catheter used.

Selection c: Usually continent
Code if applicant has urinary incontinent episodes once a week or less, with or without a catheter.

Selection d: Incontinent
Code if applicant has urinary incontinent episodes at least two times a week or more, with or without a catheter.

Selection e: Unknown to Informant
Make this selection when the informant (caller) is not aware of how the applicant maintained urinary continence during the last 7 days.

C.12J. Medication Management

This section refers to how well the applicant manages medications, including taking correct dosages, opening bottles, giving injections, applying ointments. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Code if applicant managed his/her medication regimen without assistance.

Selection b: Some Help
Code if applicant received help with medication regimen some of the time in the last 7 days.

Selection c: Full Help
Code if applicant's medication regimen was performed with help of others all of the time in the last 7 days.

Selection d: By Others
Code if applicant's medication regimen was performed by others all of the time in the last 7 days.

Selection e: Did not occur
Code if applicant did not take any medications in the last 7 days.

Selection f: Unknown to Informant
Make this selection when the informant (caller) is not aware of how the applicant managed medications during the last 7 days.

C.12K.a. Meal Preparation

This section refers to how well the applicant prepares meals, including planning meals, cooking, setting out food and utensils. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Code if applicant prepared all meals without assistance.

Selection b: Some Help
Code if applicant received help with meal preparation some of the time in the last 7 days.

Selection c: Full Help
Code if applicant's meal preparation was performed with help of others all of the time in the last 7 days.

Selection d: By Others
Code if applicant's meal preparation was performed by others all of the time in the last 7 days.

Selection e: Did not occur
Code if there was no meal preparation performed for the applicant in the last 7 days.

Selection f: Unknown to Informant
Make this selection when the informant (caller) is not aware of how the applicant's meals were prepared in the last 7 days.

C.12K.b. Shopping

This section refers to how the applicant's shopping is performed for food and household items, selecting items and managing money. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed.

Selection a: Independent
Code if applicant managed his/her food and household item shopping without assistance.

Selection b: Some Help
Code if applicant received help with food and household item shopping some of the time in the last 7 days.

Selection c: Full Help
Code if applicant's food and household item shopping was performed with help of others all of the time in the last 7 days.

Selection d: By Others
Code if applicant's food and household item shopping was performed by others all of the time in the last 7 days.

Selection e: Did not occur
Code if there was no food and household shopping performed for the applicant in the last 7 days.

Selection f: Unknown to Informant
Make this selection when the informant (caller) is not aware of how the applicant's food and household item shopping was done during the last 7 days.

C.12L. Going out of the home

This section refers to how often the applicant leaves his/her place of residence. Code for the number of days the applicant usually went out of the house or building of residence, no matter how short a time. Code for a typical week within the 30 days prior to the date the Eligibility Tool (LOCET) is completed.

Selection a: Every day
Code if the applicant left his/her place of residence (house or building) each of the last 7 days, even for a short period of time.

Selection b: Two – 6 days
Code if the applicant left his/her place of residence (house or building) 2 to 6 days of the last 7 days, even for a short period of time.

Selection c: One
Code if the applicant left his/her place of residence (house or building) on one of the last 7 days, even for a short period of time.

Selection d: No days
Code if the applicant did not leave his/her place of residence (house or building) on any of the last 7 days.

Selection e: Unknown to Informant
Make this selection when the informant (caller) is not aware of how often the applicant left his/her home in the last 7 days.

C.12M. Activity of Daily Living Self-Performance Change

This section refers to the applicant's overall ADL self-performance as compared to what it was 90 days prior to the date the Eligibility Tool (LOCET) is completed.

Selection a: No change
Code if the applicant's overall ADL self-performance at the present time is no different from what it was 90 days ago.

Selection b: Improved
Code if the applicant's overall ADL self-performance at the present time has improved from what it was 90 days ago. I.e., the applicant is able to perform more tasks independently now than 90 days ago, or the applicant is able to perform a task without assistance more frequently now than 90 days ago.

Selection c: Deteriorated
Code if the applicant's overall ADL self-performance at the present time has diminished from what it was 90 days ago. I.e., the applicant is able to perform less tasks independently now than 90 days ago, or the applicant is able to perform a task without assistance less frequently now than 90 days ago.

Selection d: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's self-performance of ADLs now as compared to 90 days ago.

Section D. PATHWAY 2: Cognitive Performance

The Louisiana Level of Care Eligibility Tool (LOCET) definition is meant to include applicants who meet level of care based on cognitive performance. Pathway 2 uses the Cognitive Performance Scale to identify applicants with cognitive difficulties, especially difficulties with short-term memory and daily decision-making, both essential skills for residing safely in the community. The applicant's ability to remember, think coherently, and organize daily self-care activities is very important. The focus is on performance, including a demonstrated ability to remember recent events and perform key decision-making skills.

Questions about cognitive function and memory can be sensitive issues for some applicants who may become defensive, agitated, or very emotional. These are common reactions to performance anxiety and feelings of being exposed, embarrassed, or frustrated when the applicant knows he/she cannot answer the questions cogently.
Be sure to interview the applicant by using a nonjudgmental approach to questioning. This will help create a needed sense of trust. Be cognizant of possible cultural differences that may affect your perception of the applicant's response.

- Engage the applicant in general conversation to help establish rapport.
- Actively listen and observe for clues to help you structure your assessment.

Remember:
Repetitiveness, inattention, rambling speech, defensiveness, or agitation may be challenging to deal with during an interview, but these behaviors also provide important information about cognitive function.

- Be open, supportive, and reassuring during your conversation with the applicant.

An accurate assessment of cognitive function can be difficult when the applicant is unable to verbally communicate. It is particularly difficult when the areas of cognitive function you want to assess require some kind of verbal response from the applicant (memory recall).

It is certainly easier to perform an evaluation when you can converse with the applicant and hear responses that give you clues as to how the applicant is able to think, if he/she understands his/her strengths and weaknesses, whether he/she is repetitive, or if he/she has difficulty finding the right words to tell you what they want to say.

D.13A. Short Term Memory

The intent of this section is to determine the applicant's self-assessment of his/her functional capacity to remember recent events (i.e., short term memory). (If speaking to an informant who is not the applicant, this question will ask for the informant's assessment of whether or not the applicant has a memory problem.)

Selection 0: Memory OK
Code if the applicant or informant states that the applicant is able to recall recent events or when he/she ate his/her last meal, etc.

Selection 1: Memory problem
Code if the applicant or informant states that there appears to be a problem with recall of recent events or when he/she ate his/her last meal.

D.13B. Memory Exercise Question

Item D.13B, in conjunction with Item B.11A, will constitute an informal memory exercise for the applicant. Please note that if the applicant is not the informant, this item must be omitted and selection 4 must be coded.

See initial instructions for Item B.11A for this exercise. At the conclusion of five minutes after the three words have been spoken to the applicant, Item D.13B must be completed. Ask the applicant to recall the three words.

Enter the number of words correctly recalled (0, 1, 2 or 3). If not assessed, enter "4."

D.13C. Cognitive Skills for Daily Decision Making

The intent of this section is to record the applicant's actual performance in making everyday decisions about the tasks or activities of daily living. This item is especially important for further assessment in that it can alert the intake analyst to a mismatch between the applicant's abilities and his/her current level of performance, or that the family may inadvertently be fostering the applicant's dependence.

Process

Review events of the last 7 days. The 7-day look-back period is based on the date the Eligibility Tool (LOCET) is completed. The inquiry should focus on whether the applicant is actively making his/her decisions, and not whether there is a belief that the applicant might be capable of doing so.

Remember, the intent of this item is to record what the applicant is doing. When a family member takes decision-making responsibility away from the applicant regarding tasks of everyday living, or the applicant does not participate in decision making, whatever his/her level of capability, the applicant should be considered to have impaired performance in decision making.

Examples of Decision Making

• Choosing appropriate items of clothing

• Knowing when to go to meals

• Knowing and using space in home appropriately

• Using environmental cues to organize and plan the day (clocks and calendars)

• Seeking information appropriately (not repetitively) from family or significant others in order to plan the day

• Using awareness of one's own strengths and limitations in regulating the day's events (asks for help when necessary)

• Knowing when to go out of the house

• Acknowledging the need to use a walker and using it faithfully

Selection a: Independent
Code when the applicant's decisions were consistent and reasonable (reflecting lifestyle, culture, values); the applicant organized daily routine and made decisions in a consistent, reasonable, and organized fashion.

Selection b: Minimally impaired
Code when applicant has some difficulty in new situations or his/her decisions are poor. Code also when the applicant requires cueing/ supervision in specific situations only.

Selection c: Moderately impaired
Code when the applicant's decisions were poor; the applicant required reminders, cues, and supervision in planning, organizing, and correcting daily routines.

Selection d: Severely Impaired
The applicant's decision-making was severely impaired; the applicant never (or rarely) made decisions.

Selection e: Unknown to Informant
Make this selection when the informant (caller) is not aware of the applicant's decision-making abilities.

D.13D. Making Self Understood

The intent of this section is to document the applicant's ability to express or communicate requests, needs, opinions, urgent problems, and social conversation, whether in speech, writing, sign language, or a combination of these (includes use of word board or keyboard). Observe and listen to the applicant's efforts to communicate with you.

Selection a: Understood
Code if the applicant expresses ideas clearly and without difficulty.

Selection b: Usually Understood
The applicant has difficulty finding the right words or finishing thoughts, resulting in delayed responses. If given time, little or no prompting is required.

Selection c: Sometimes Understood
Code if the applicant has limited ability, but is able to express concrete requests regarding at least basic needs (i.e., food, drink, sleep, toilet).

Selection d: Rarely/Never Understood
Code if, at best, understanding is limited to interpretation of highly individual, applicant-specific sounds or body language (i.e., indicates the presence of pain or need to toilet).

Selection e: Unknown to Informant
Code if the informant (caller) is not aware of the applicant's ability to make him/herself understood.

D.13E. Change in Mental Functioning in Last Seven Days

The intent of this question is to identify an acute confusional state which has presented itself within the seven day period prior to completion of the LOCET.

Code for the client's behavior regardless of what the cause may be.

Selection 0: No
Make this selection when there has been no sudden or new onset or change in mental functioning in the 7 days prior to the LOCET.

Selection 1: Yes
Make this selection when there been a sudden or new onset or change in mental functioning in the 7 days prior to the LOCET. This can include the ability to pay attention, awareness of surroundings, and coherency. These symptoms can present themselves with unpredictable variation over the course of the day.

Selection 2: Unknown to Informant
Make this selection when the informant is unaware of whether or not there has been such a change in mental functioning for the applicant within the 7 days prior to the date of the LOCET.