OASIS ITEM

(M2100) Types and Sources of Assistance: Determine the level of caregiver ability and willingness to provide assistance for the following activities, if assistance is needed. (Check only **one** box in each row.)

Type of Assistance	No assistance needed in this area	Caregiver(s) currently provides assistance	Caregiver(s) need training/ supportive services to provide assistance	Caregiver(s) not likely to provide assistance	Unclear if Caregiver(s) will provide assistance	Assistance needed, but no Caregiver(s) available
a. **ADL assistance** (e.g., transfer/ ambulation, bathing, dressing, toileting, eating/feeding)	☐0	☐1	☐2	☐3	☐4	☐5
b. **IADL assistance** (e.g., meals, housekeeping, laundry, telephone, shopping, finances)	☐0	☐1	☐2	☐3	☐4	☐5
c. **Medication administration** (e.g., oral, inhaled or injectable)	☐0	☐1	☐2	☐3	☐4	☐5
d. **Medical procedures/ treatments** (e.g., changing wound dressing)	☐0	☐1	☐2	☐3	☐4	☐5
e. **Management of Equipment** (includes oxygen, IV/infusion equipment, enteral/ parenteral nutrition, ventilator therapy equipment or supplies)	☐0	☐1	☐2	☐3	☐4	☐5
f. **Supervision and safety** (e.g., due to cognitive impairment)	☐0	☐1	☐2	☐3	☐4	☐5
g. **Advocacy or facilitation** of patient's participation in appropriate medical care (includes transportation to or from appointments)	☐0	☐1	☐2	☐3	☐4	☐5

ITEM INTENT

Identifies availability and ability of the caregiver(s) (other than home health agency staff) to provide categories of assistance needed by the patient.

TIME POINTS ITEM(S) COMPLETED

Start of care

Resumption of care

Discharge from agency – not to an inpatient facility

Guidance for this item updated 12/18/2009

| RESPONSE—SPECIFIC INSTRUCTIONS   (Cont'd for OASIS Item M2100) |

- For each row a-g, select one description of caregiver assistance.

- If patient needs assistance with any aspect of a category of assistance (e.g., needs assistance with some IADLs but not others), consider the aspect that represents the most need and the availability and ability of the caregiver(s) to meet that need.

- If more than one response in a row applies, (e.g., the caregiver(s) provides the assistance but also needs training or assistance), select the response that represents the greatest need ("caregiver(s)needs training/supporting services to provide assistance").

- "Caregiver(s) not likely to provide" indicates that the caregiver(s) has indicated an unwillingness to provide assistance, or that the caregiver(s) is/are physically and/or cognitively unable to provide needed care.

- "Unclear if caregiver(s) will provide" indicates that the caregiver(s) may express willingness to provide care, but their ability to do so is in question or there is reluctance on the part of the caregiver(s) that raises questions as to whether the caregiver will provide the needed assistance.

- Row a – ADLs include basic self-care activities such as the examples listed.

- Row b – IADLs include activities associated with independent living necessary to support the ADLs such as the examples listed.

- Row c – Medication administration refers to any type of medication (prescribed or OTC) and any route of administration including oral, inhalant, injectable, topical, or administration via g-tube/j-tube, etc.

- Row d – Medical procedures/treatments include procedures/treatments that the physician or physician-designee has ordered for the purpose of improving health status. Some examples of these procedures/treatments include wound care and dressing changes, range of motion exercises, intermittent urinary catheterization, postural drainage, electromodalities, etc.

- Row e – Management of equipment refers to the ability to safely use medical equipment as ordered. Examples of medical equipment include oxygen, IV/infusion equipment, enteral/parenteral nutrition, ventilator therapy equipment or supplies, continuous passive motion machine, wheelchair, hoyer lift, etc.

- Row f – Supervision and safety includes needs related to the ability of the patient to safely remain in the home. This category of assistance needs includes a wide range of activities that may be necessary due to cognitive, functional, or other health deficits. Such assistance may range from calls to remind the patient to take medications, to in-person visits to ensure that the home environment is safely maintained, to the need for the physical presence of another person in the home to ensure that the patient doesn't wander, fall, or for other safety reasons (i.e., leaving the stove burner on).

- Row g – Advocacy or facilitation of patient's participation in appropriate medical care includes taking patient to medical appointments, following up with filling prescriptions, or making subsequent appointments, etc.

| DATA SOURCES / RESOURCES |

- Patient/caregiver interview

- Review of previous health history

Guidance for this item updated 12/18/2009

OASIS ITEM

(M2110) **How Often** does the patient receive **ADL or IADL assistance** from any caregiver(s) (other than home health agency staff)?

    ☐ 1 - At least daily

    ☐ 2 - Three or more times per week

    ☐ 3 - One to two times per week

    ☐ 4 - Received, but less often than weekly

    ☐ 5 - No assistance received

    ☐ UK - Unknown*

*at discharge, omit Unknown response.

ITEM INTENT

Identifies the frequency of the assistance with ADLs (e.g., bathing, dressing, toileting, transferring, ambulating, feeding, etc.) or IADLs (e.g., medication management, meal preparation, housekeeping, laundry, shopping, financial management) provided by any non-agency caregivers.

TIME POINTS ITEM(S) COMPLETED

Start of care

Resumption of care

Discharge from agency – not to an inpatient facility

RESPONSE—SPECIFIC INSTRUCTIONS

- Responses are arranged in order of most to least assistance received from caregivers.

- Note that this question is concerned broadly with ADLs and IADLs, not just the ones specified in other OASIS items. ADLs are defined as the tasks of everyday life. Basic ADLs include eating, dressing, getting into or out of a bed or chair, taking a bath or shower, and using the toilet. Instrumental activities of daily living (IADL) are activities related to independent living and include preparing meals, managing money, shopping, doing housework, and using a telephone.

- Select the response that reports how often the patient receives assistance with any ADL or IADL.

DATA SOURCES / RESOURCES

- Patient/caregiver interview