**DATE:** June 22, 2022

**TOPIC: June 2022 Adult Functional Screen Quiz Rationales**

**Purpose:** The quiz rationales serve to:

* Provide a user friendly tool for agency screen liaisons to help screeners improve their overall knowledge of screen instructions and procedures.
* Encourage discussion among screeners in order to arrive at the correct answers.
* Encourage screeners to think about the reason(s) for their selections and compare those with the rationale provided on the answer version of the quiz.
* Provide answers to all screeners based on real world questions that have come to the team.
* Provide an example of a screener Note for the situation described in the question that would be appropriate given the information provided. \*

The answers to the quiz questions may not be found verbatim in the [Instructions](https://www.dhs.wisconsin.gov/functionalscreen/ltcfs/instructions.htm) manual or [HRS Supplement](https://www.dhs.wisconsin.gov/publications/p02525.pdf); however, the rationales should be assumed to be correct and we would expect the screeners to arrive at those answers as they apply the information in the instructions manual.

As always, do not assume any medical conditions, diagnoses, support needs, or deficits are present for any person described in any question. For instance, do not assume any person described has an intellectual disability unless the information provided tells you that the person has that diagnosis.

In addition, a given diagnosis may have variable signs and symptoms and not everyone will have the same signs and symptoms. Screeners should select the level of assistance needed based on need and not solely a diagnosis. If there are questions on this, please reach out to your liaison who can reach out to [DHSLTCFSTeam@dhs.wisconsin.gov](mailto:DHSLTCFSTeam@dhs.wisconsin.gov), if needed.

This quiz includes questions pertaining to Diagnoses, ADLs, HRS Table, Communication, and Substance Use.

*\* While notes are not required on the Functional Screen, they are useful to explain certain selections, especially in the event that a screen outcome is appealed. The examples included on this document are suggestions only.*

**1.** Shinya has a cognitive impairment from a confirmed diagnosis of microcephaly and lives at an adult family home. He has no physical impairments. When it comes to using the toilet, he needs to be reminded by his support staff to go to the bathroom every two hours or he would experience incontinence. He also needs to be reminded to wipe after a bowel movement and flush the toilet. The screener observes Shinya independently transfer on and off his toilet and notices that he uses a raised toilet seat and grab bars. The screener gathers collateral information from Shinya’s support staff and determines that the equipment that is present in the bathroom was installed to make the home more accessible and that Shinya does not need to use the grab bar or raised toilet seat. What selection should the screener make for the Toileting ADL on Shinya’s LTCFS?

|  |  |
| --- | --- |
| A) | 1: Help is needed to complete the task safely but **helper DOES NOT have to be physically present throughout the task**.   * Primary Diagnosis: **A9** Other Congenital Disorders, that may meet state or federal definitions of DD * Secondary Diagnosis: None * No Adaptive Equipment |
| B) | 1: Help is needed to complete the task safely but **helper DOES NOT have to be physically present throughout the task**.   * Primary Diagnosis: **A9** Other Congenital Disorders, that may meet state or federal definitions of DD * Secondary Diagnosis: None * Uses Toilet Grab Bars/Rails * Uses Commode or Other Adaptive Equipment​ |
| C) | 2: Help is needed to complete the task safely and **helper DOES need to be present throughout the task**.   * Primary Diagnosis: **A9** Other Congenital Disorders, that may meet state or federal definitions of DD * Secondary Diagnosis: None​ * No Adaptive Equipment |
| D) | ​2: Help is needed to complete the task safely and **helper DOES need to be present throughout the task**. ​   * Primary Diagnosis: **A9** Other Congenital Disorders, that may meet state or federal definitions of DD * Secondary Diagnosis: None * Uses Toilet Grab Bars/Rails * Uses Commode or Other Adaptive Equipment |

Rationale: The correct answer is A. To select adaptive equipment on the LTCFS, an individual must need, have, and use it. To select a “2” for Toileting, an individual must need cues, hands on assistance and/or supervision with all components of Toileting. When an individual only requires assistance with some components of Toileting, a “1” is appropriate. Although Shinya has and uses adaptive equipment, he does not need it. Shinya needs cues to initiate toileting, wiping, and flushing but does not need help with all components as he is able to transfer on/off of his toilet independently.

Reference: Module 5.10

***Screener Note Example:*** *Toileting: Due to cognitive impairment from microcephaly, Shinya needs reminders to use the toilet, wipe adequately, and flush. A raised toilet seat and grab bar are present in his bathroom, but he does not need to use these.*

**2.** Zlatko has confirmed diagnoses of autism spectrum disorder and intellectual disability. He needs to be physically assisted by his mother for all aspects of bathing due to his cognitive impairment. He experiences symptoms of sensory overload when water, scented soap, or a washcloth touches his body when he is bathing. When this occurs, he will bite his arms and pull his hair out. This has led to multiple injuries and infections requiring medical interventions. His mother has developed an informal plan to support Zlatko that is implemented when he bathes every other day. Zlatko’s mother provides him with a fidget spinner to occupy his hands, uses unscented soap, and uses a soft sponge. Since implementing these interventions, Zlatko has stopped harming himself. He does not wander or exhibit offensive/violent behaviors. What selection should the screener make for Behaviors Requiring Interventions on the HRS Table on Zlakto’s LTCFS?

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|  |  |
| --- | --- |
| A) | Not Applicable |
| B) | 1-3 times/month |
| C) | Weekly |
| D) | 2-6 times/week |
| E) | * 1. times/day |

Rationale: The correct answer is D. To record a behavior on the HRS Table, all of the following criteria must be present: the person has a cognitive impairment, interventions are required from another person, and a behavior plan to prevent or respond to the behavior. The frequency selected should be the option that most accurately reflects the frequency of help needed from another person. Due to Zlatko’s cognitive impairment, his mother provides interventions as part of an informal behavior support plan to address him biting himself and pulling his hair out in order to prevent injury to his body when bathing. Interventions to prevent the behaviors include having Zlatko hold a fidget spinner, using unscented soap, and using a soft sponge. These interventions occur every other day, or 2-6 times per week, when he bathes.

Reference: Modules 7.5 and 7.11

***Screener Note Example:*** *Behaviors: Due to cognitive impairment, participant needs interventions for the following self-injurious behaviors when he bathes that have resulted in injury to his body: biting self and pulling out his hair. Interventions are needed and occurring 2-6x week a part of a behavior support plan.*

**3.** Which of the following skilled nursing tasks may be selected on the HRS Table if completed outside of an individual’s home or current residence?

|  |  |
| --- | --- |
| A) | Manual lymphatic drainage and massage |
| B) | Tracheostomy Care |
| C) | IV chemotherapy |
| D) | Transfusions |
| E) | None of the above |

Rationale: The correct answer is D. The HRS Table records skilled nursing tasks primarily provided in the person’s home/residence, not in a hospital, clinic, or office. Transfusions are an exception to this guidance and may be selected on the HRS Table if provided at a residence, in a clinic, or at a hospital. Manual lymphatic drainage and massage, tracheostomy care, and IV chemotherapy may only be selected if they are provided in an individual’s home or residence.

Reference: Module 7.3; HRS Supplement

***Screener Note Example:*** *Transfusions: Hope receives blood transfusions every two weeks at a clinic for her sickle cell anemia.*

**4.** Geraldine is diagnosed with nicotine dependence. She does not currently use or have a history of using illicit drugs or alcohol. The screener should select **K1: Substance Use disorder** and select 2 for the substance use question.

|  |  |
| --- | --- |
| A) | True |
| B) | False |

Rationale: The correct answer is B. The screener should use the Diagnosis Table and Diagnoses Cue Sheet when determining how to code diagnoses on the LTCFS. Nicotine dependence is coded as K6. For the purposes of the LTCFS, nicotine dependence is not considered substance use.

Reference: Diagnoses Cue Sheet and Module 9.5

***Screener Note Example:*** *Substance Use: Geraldine is diagnosed with nicotine dependence but has no substance use concerns.*

**5.** Dwight has right sided weakness as a result of a verified diagnosis of a cerebrovascular accident (CVA). When completing transfers in and out of bed, he uses the electrical function of his hospital bed and a transfer handle to transfer independently. He would need physical assistance from another person to get out of bed if it were not for the presence of the electrical function. What selection should be made for the Transferring ADL on Dwight’s LTCFS?

|  |  |
| --- | --- |
| A) | 0: Person is **independent** in completing the activity safely.   * No Adaptive Equipment |
| B) | 0: Person is **independent** in completing the activity safely.   * Uses Grab Bar(s), Bed Bar, or Bed Railing |
| C) | 1: Help is needed to complete the task safely but **helper DOES NOT have to be physically present throughout the task**.   * Primary Diagnosis: **E3** Cerebral Vascular Accident (CVA, stroke) with onset at age 22 or AFTER * Secondary Diagnosis: None * No Adaptive Equipment |
| D) | 1: Help is needed to complete the task safely but **helper DOES NOT have to be physically present throughout the task**.   * Primary Diagnosis: **E3** Cerebral Vascular Accident (CVA, stroke) with onset at age 22 or AFTER * Secondary Diagnosis: None * Uses Grab Bar(s), Bed Bar, or Bed Railing |

Rationale: The correct answer is D. When an individual has a lift chair or other mechanical device (such as an electric hospital bed), and cannot independently transfer without it, a “1” should be selected for Transferring. To select adaptive equipment on the LTCFS, the individual must need, have, and use it. If Dwight did not have the electrical function of his hospital bed, he would need help from another person to transfer. He needs, has, and uses his transfer handle.

Reference: Module 5.11

***Screener Note example: Transfers:*** *Dwight needs to hold a transfer handle and use the electrical function of his hospital bed in order to safely complete transfers in and out of his bed due to his CVA.*

**6.** Which of the following is NOT an example of an assistive communication device that may be considered when selecting “**1: Can fully communicate with the use of an assistive device”** for the Communication section of the LTCFS?

|  |  |
| --- | --- |
| A) | Battery-powered artificial larynx |
| B) | Word and picture board |
| C) | A non-English speaker using phone interpretation services to fully communicate with an English speaker |
| D) | Speech generating device |

Rationale: The correct answer is C. **Communication includes the ability to express oneself in one's own language**, including non-English languages. Phone interpretation services for communicating with an individual who speaks another language are not considered an assistive communication device on the LTCFS. A battery-powered artificial larynx, a word and picture board, and a speech generating device are all examples of assistive communication devices that may be considered when selecting “1” for an individual who is able to fully communicate with the use of an assistive device as their only means of communicating their feelings and ideas in detail.

Reference: Module 8.2

*Screener Note Example: Communication: Member is able to fully communicate.*

**7.** Choose which sub-module of the HRS Table listed on the top row may be selected for each of the following tasks listed in the left-hand column. Please select only one HRS option for each task provided.

|  | IV Medications, Fluids or IV Line Flushes | Medication Administration | Medication Management | Oxygen and/or Respiratory Treatments | Other Wound Cares |
| --- | --- | --- | --- | --- | --- |
| Applying a pain patch |  |  |  |  |  |
| Putting medication for a nebulizer treatment into a nebulizer |  |  |  |  |  |
| Monitoring for seizure activity |  |  |  |  |  |
| Flushing a G-tube that is only used for medications after a medication is administered through the G-tube |  |  |  |  |  |
| Applying an ointment to a boil |  |  |  |  |  |
| Drawing blood to check INR levels |  |  |  |  |  |
| Using an inhaler |  |  |  |  |  |
| Administering antibiotics through a PICC line |  |  |  |  |  |
| Reminders to test blood sugar levels |  |  |  |  |  |
| Injecting insulin |  |  |  |  |  |

Rationale:

IV Medications, Fluids, or IV Line Flushes: Administering an antibiotic through a PICC line is a component of IV Medications, Fluids, or IV Line Flushes.

Medication Administration: Applying a pain patch, flushing a G-tube that is only used for medications after a medication is administered through the G-tube, using an inhaler, and injecting insulin are components of Medication Administration.

Medication Management: Monitoring for seizure activity, drawing blood to check INR levels, and reminders to complete blood sugar testing are components of Medication Management.

Oxygen and/or Respiratory Treatments: Putting medication for a nebulizer treatment into a nebulizer line is a component of Oxygen and/or Respiratory Treatments.

Other Wound Cares: Applying an ointment to a boil is a component of Other Wound Cares.

Reference: Modules 7.13, 7.14, 7.15, 7.18, and 7.27