Clinical assessment tool code AAAAAA

Exported from METEOR (AIHW's Metadata Online Registry)

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Identifying and definitional attributes

Metadata item type:	Value Domain
METEOR identifier:	477780
Registration status:	Independent Hospital Pricing Authority, Superseded 11/10/2012
Definition:	A code set describing the measurement scale or schema used to clinically assess a patient's level of functioning.

Representational attributes

Representation class:	Code
Data type:	String
Format:	AAAAAA
Maximum character length:	6

	Value	Meaning
Permissible values:	FIMCOG	Functional Independence Measure (FIM) - Social cognition subscale total
	FIMMOT	Functional Independence Measure (FIM) - Motor subscale total
	HONADL	Health of the Nation Outcome Scale (HoNOS) Problems with Activities of Daily Living
	HONBEH	Health of the Nation Outcome Scale (HoNOS) Overactive, Aggressive, Disruptive Behaviour
	HONTOT	Health of the Nation Outcome Scale (HoNOS) total
	RUGTOT	Resource Utilisation Groups - Activities of Daily Living (RUG-ADL) total

Collection and usage attributes

Guide for use: This data element is required to be recorded for all subacute and non-acute care type episodes when reporting to the Admitted subacute and non-acute ABF DSS.

Functional Independence Measure (FIM)
The FIM is an assessment of the patient's severity of disability. FIM is comprised of 18 items,
grouped into two subscales – motor and cognitive.

The motor subscale includes:
• Eating
• Grooming
• Bathing
• Dressing, upper body
• Dressing, lower body
• Toileting
• Bladder management
• Bowel management
• Transfers - Bed/chair/wheelchair
• Transfer - Toilet
• Transfers - Bath/shower
• Walk/wheelchair
• Stairs
The social cognitive subscale includes:
• Comprehension

• Expression
• Social interaction
• Problem solving
• Memory

Each item is scored on a 7 point ordinal scale ranging from a score of 1 to a score of 7. The higher
the score, the more independent the patient is in performing the task associated with that item.
Value Meaning
1 Total assistance with helper
2 Maximal assistance with helper
3 Moderate assistance with helper
4 Minimal assistance with helper
5 Supervision or setup with helper
6 Modified independence with no helper
7 Complete independence with no helper

FIMMOT
The sum of the 13 motor scale items of the FIM assessment tool.

FIMCOG
The sum of the 5 cognitive scale items of the FIM assessment tool.

The FIMCOG and FIMMOT assessment is required to be recorded at the commencement of the
episode of care for all rehabilitation and geriatric evaluation and management (GEM) care type
episodes.

Health of the Nation Outcome Scale (HoNOS)
HoNOS is a clinical assessment tool used by mental health professionals to evaluate psychiatrichealth service users. Together, they rate various aspects of mental and social health, each on a scale of 0-4.
Value Meaning
0 No problems within the period stated
1 Minor problem requiring no action
2 Mild problem but definitely present
3 Moderately severe problem
4 Severe to very severe problem
The scales are as follows:
• Behavioural disturbance
• Non-accidental self injury
• Problem Drinking or Drug Use
• Cognitive Problems
• Problems related to physical illness or disability
• Problems associated with hallucinations and delusions
• Problems associated with depressive symptoms
• Other mental and behavioural problems
• Problems with social or supportive relationships
• Problems with activities of daily living
• Overall problems with living conditions
• Problems with work and leisure activities and the quality of the daytime environment

HONADL
The rating given to the problems with activities of daily living scale in the HoNOS assessment.

HONBEH
The rating given to the overactive, aggressive, disruptive behaviour scale in the HoNOS
assessment.

HONTOT
The sum of all 12 scales of the HoNOS assessment tool.

The HoNOS overactive/aggressive/disruptive behaviour score (HONBEH), plus either the HoNOS

problems with activities of daily living score (HONADL) or total score (HONTOT) are required to
be recorded for all psycho geriatric care type episodes. All Health of the Nation Outcomes Scales
for elderly people (HoNOS65+) can also be used for this data element.

Resource Utilisation Groups – Activities of Daily Living (RUG-ADL)
The RUG-ADL is a 4 item scale measuring motor function for activities of daily living including
bed mobility, toileting, transfer and eating.Scores are summed for the 4 ADL variables: bed mobility, toilet use, transfer and eating. A total of RUG-ADL scores ranges from a minimum 4 and maximum 18

For bed mobility, toileting and transfers:
1 - Independent or supervision only
3 - Limited physical assistance
4 - Other than two persons physical assist
5 - Two or more person physical assist
Note: a score of 2 is not valid.
For eating:
1 - Independent or supervision only
2 - Limited assistance
3 - Extensive assistance/total dependence/tube fed

RUGTOT
The sum of all 4 items of the RUG-ADL assessment.

The RUGTOT assessment is required to be recorded for all palliative care type episodes, at the
commencement of the episode of care and the commencement of every subsequent phase thereafter
in the same episode.

The RUGTOT assessment is also required to be recorded at the commencement of the episode of
care for all maintenance care type episodes.

Collection Methods: The method of collection and rating of each clinical assessment tool must comply with the guidelines related to each individual assessment tool.

For example, the FIM assessment must be completed by the multi disciplinary team within 72 hours
of admission. The HoNOS assessment must be completed within 72 hours of the episode
commencing. The RUG-ADL assessment must be completed within 24 hours of the episode
commencing or a new palliative care phase commencing.

The clinical assessment must be collected at the commencement of each subacute or non-acute
episode of care.

For palliative care type episodes it must be collected at the commencement of the episode of care
and the commencement of every subsequent phase thereafter in the same episode. It is optional to record the clinical assessment at the end of the episode.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Origin:

Relational attributes

Related metadata references:	Has been superseded by Clinical assessment tool code N.N Independent Hospital Pricing Authority, Standard 11/10/2012
Data elements implementing this value domain:	Episode of admitted patient care—clinical assessment tool used, code AAAAAA Independent Hospital Pricing Authority, Superseded 11/10/2012