

# **Person—level of functional independence, Resource Utilisation Groups— Activities of Daily Living total score code N[N]**

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# Person—level of functional independence, Resource Utilisation Groups— Activities of Daily Living total score code N[N]

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	Level of functional independence (total RUG-ADL score)
<b>METEOR identifier:</b>	681502
<b>Registration status:</b>	<a href="#">Health</a> , Superseded 17/10/2018
<b>Definition:</b>	A person's level of functional independence to carry out activities of daily living safely and autonomously, as represented by a total Resource Utilisation Groups-Activities of Daily Living score-based code.
<b>Data Element Concept:</b>	<a href="#">Person—level of functional independence</a>
<b>Value Domain:</b>	<a href="#">Resource Utilisation Groups—Activities of Daily Living total score code N[N]</a>

## Value domain attributes

## Representational attributes

<b>Representation class:</b>	Code
<b>Data type:</b>	Number
<b>Format:</b>	N[N]
<b>Maximum character length:</b>	2

## Collection and usage attributes

**Guide for use:**

The Resource Utilisation Groups - Activities of Daily Living (RUG-ADL) is a four item scale measuring a person's motor function for activities of daily living including:

- bed mobility
- toileting
- transfers
- eating.

For bed mobility, toileting and transfers, valid values are:

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, valid values are:

1 - Independent or supervision only

2 - Limited assistance

3 - Extensive assistance/total dependence/tube fed

Note: a score of 4 or 5 is not valid.

Scores are summed for the four ADL variables, i.e. bed mobility, toileting, transfers and eating. A total RUG-ADL score ranges from a minimum score of 4 to a maximum score of 18.

## Source and reference attributes

**Submitting organisation:** Independent Hospital Pricing Authority

## Data element attributes

## Source and reference attributes

**Submitting organisation:** Independent Hospital Pricing Authority

**Reference documents:** Fries BE, Schneider DP et al. 1994. Refining a case-mix measure for nursing homes: Resource Utilization Groups (RUG-III). Medical Care 32: 668-685.

## Relational attributes

**Related metadata references:**

Supersedes [Person—level of functional independence, Resource Utilisation Groups— Activities of Daily Living total score code N\[N\]](#)

[Health](#), Superseded 25/01/2018

[Tasmanian Health](#), Superseded 06/05/2020

Has been superseded by [Person—level of functional independence, Resource Utilisation Groups— Activities of Daily Living total score code N\[N\]](#)

[Health](#), Superseded 18/12/2019

See also [Person—level of functional independence, Resource Utilisation Groups - Activities of Daily Living score code N](#)

[Health](#), Superseded 17/01/2020

**Implementation in Data Set Specifications:** [Admitted subacute and non-acute hospital care NBEDS 2018-19](#)  
[Health](#), Superseded 17/10/2018

**Implementation start date:** 01/07/2018

**Implementation end date:** 30/06/2019

**Conditional obligation:**

Only the Resource Utilisation Groups - Activities of Daily Living (RUG-ADL) scores at admission are required to be reported for maintenance care episodes.

RUG-ADL scores at palliative care phase start should be reported for all palliative care phases.

Only required to be reported for episodes of admitted patient care with [Hospital service—care type, code N\[N\]](#) recorded as:

- Code 3, Palliative care; or
- Code 6, Maintenance care.

Not required to be reported for patients aged 17 and under at admission.

**DSS specific information:**

For episodes of admitted patient care with [Hospital service—care type, code N\[N\]](#) recorded as Code 3, Palliative care, the RUG-ADL scores must be reported for each [palliative care phase](#) if the episode of admitted patient care had more than one phase.