# Acuity-Based Staffing Tool (ABST) Provider Guide

# September 2022



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### Introduction

All Oregon Community-Based Care (CBC) facilities were required to select an Acuity-Based Staffing Tool (ABST) by February 2022. This tool is used to help determine the appropriate number of direct care staff necessary to provide care and services to residents, based on individual resident acuity. Facilities could choose to use the Oregon Department of Human Services (ODHS) Acuity-based Staffing Tool (ABST) or another technology-based ABST.

By July 1, 2022, facilities were required to fully implement the selected ABST and complete an ABST evaluation for all residents. If a facility chose not to use the **ODHS ABST**, and selected a different technology based ABST, they needed to ensure the ABST incorporated **all the Activities of Daily Living (ADLs) listed in this document**.

This provider guide sets forth the function and intended use of the ODHS ABST as **well as providing CBC facilities with the specific information that must be** addressed with any electronic-based ABST.

## What is the ODHS ABST

The ODHS ABST is an important source of data when staffing a facility. However, the ODHS ABST is not a staffing tool that provides the final staffing plan numbers for a facility. Instead, the ODHS ABST provides one of several data points a facility should review to develop and routinely update the facility staffing plans.

The ODHS ABST provides *an estimate* of the time needed to provide resident care. The ODHS is intended to be one of several sources that assist providers in meeting the requirements of Oregon's acuity-based staffing regulation. Said another way, the ODHS ABST isn't a staffing tool; instead, it's an estimate of the amount of time it takes to provide residents scheduled and unscheduled care.

## **Facility Staffing Analysis**

Per OAR 411-054-0070(1):

"Each facility must have qualified awake direct care staff, sufficient in number to meet the 24-hour scheduled and unscheduled needs of each resident. Direct care staff provide services for residents that include assistance with activities of daily living, medication administration, residentfocused activities, supervision, and support." When scheduling staff and considering resident acuity, the measure of time it takes to provide resident care is one factor in developing the staffing plan. Facilities are required by administrative rule to provide *enough staff to meet resident needs*. To accurately count the number of staff needed to meet resident' needs, providers should consider factors that include, but are not limited to:

- The number of two-person transfers
- The design and architecture of the facility, e.g., are there long hallways, or is the floor plan compact, are rooms designed around center common areas that allow for better visual monitoring, more difficult to view, detached buildings, distinct and segregated areas, etc.
- The skill level of staff
- Resident acuity
- The behavioral presentations of residents
- The number of new move-ins
- Any disruptions to normal operations, include illness outbreak, broken elements at the facility (e.g., the elevator is out), weather events, etc.
- Staff breaks
- Other tasks (charting, reading service plans, participating in meetings, training new caregivers)
- Use of Universal Workers
- Fire evacuation

Remember, the overall goal is to have enough staff available to meet the scheduled and unscheduled needs of residents. This involves considering many factors; estimating the time needed to provide care is important, *however* not the only factor to consider. Facilities must be able to demonstrate and communicate to the Department exactly how their staffing system works.

## The Long-Term Care (LTC) Facility Portal

Oregon Department of Human Services Home Facility Tools - Support

#### Long-term Care (LTC) Facility Portal



Welcome to the Long-term Care (LTC) Facility Portal. This portal allows staff from licensed Residential Care and Assisted Living Facilities to access both the Quality Metrics Application (QMA) and the Acuity-based Staffing Tool as required by Oregon House Bill 3359.

In order to access these applications, representatives must register and be verified by the ODHS Safety, Oversight and Quality (SOQ) unit. To begin the process, click on the "Register" button in the top right corner of this page and complete all required information. You will receive notification of your status via email. If you have any questions, please click on the "support" link at the top of this page.



Welcome to the ODHS Long-Term Care (LTC) Facility Portal. Once Residential Care and Assisted Living staff are registered and received approval to access the LTC portal those staff will have access to both the Quality Metrics Application (QMA) and the Acuity-Based Staffing Tool (ABST) databases.

Providers who have approved access to a facility in the QMA database. automatically have the same access in the ABST application. To access the QMA or ABST database, representatives must register and be verified by the ODHS Safety, Oversight and Quality (SOQ) staff. ABST registration, access and data entry processes are outlined on the following pages.

### **Staff Access to Facility Records: Adding and Removing**

The LTC Portal contains confidential information. Safeguards have been established, including an authorization process for accessing facility records and removing facility staff from facility record access. **The facility Administrator of Record is the only individual who may request access to the facility database for themselves and other staff.** 

The facility Administrator of Record is the only person authorized to submit requests to add or remove facility staff access to facility records. The **facility Administrator of Record** must send requests by email to:

<u>QualityMetrics.Acuity@odhsoha.oregon.gov</u>. Please include the following information in the email:

- Employee name
- Employee email
- Facility Name(s)
- Authorization for access to facility(s) database.

Facilities are responsible for informing the Department of administrative changes.

**Note:** If your facility has a change of Administrator, an administrator reference summary must be completed and approved by the Department prior to the new Administrator of Record gaining access to the facility database.

The new Administrator of Record is required to fill out the Administrator Reference Summary (w/ Instructions for Submitting Administrator Changes) form SDS 0566. You can access a copy of this form on the CBC Licensing website at: <u>https://www.oregon.gov/dhs/PROVIDERS-</u> <u>PARTNERS/LICENSING/CBC/Pages/forms.aspx</u>.

Please send the completed form, required documentation and a copy of administrator license to <u>CBC.Team@odhsoha.oregon.gov</u>. The CBC team will review documentation and communicate with requestor on status.

# Determining Which Facility Staff Have Access to Facility Database

The facility administrator is responsible for authorizing and ensuring appropriate facility staff have access to the facility database. If an employee needs to be removed, the Administrator of Record should email the Department at: <u>QualityMetrics.Acuity@odhsoha.oregon.gov</u>; include the employee names and email addresses.

To determine who has access to a facility database records:

• Select the arrow next to your name in the upper right-hand corner of the screen and select the "My Account" option.

Oregon Department of Human Services Home Facility Tools	▼ Support		Your Name
My Account			
Profile	Profile		Edit Profile
Email	First Name *	Last Name *	
Password			
Facilities	UserName	Phone Number	

- From the My Account Page select the "Facilities" tab on the left. Select the green "View Facility Details" button for the facility you have approved access too.
- The Facility Details page contains a list of users that have approved access to the facility.

acility Name				
		Facility Type	Facility ID	
QMA Test Facility		Assisted Living Facility	50RDHSTES	Т
dministrator Name	Phone		Email	
Safety, Oversight and Quality Unit	503-945	-5600	QualityMetrics.Acuity@dl	nsoha.state.or.us
ddress		City	State	Zip
PO Box 14530		Salem	OR	97309
PO Box 14530 f any of the above information is incorrect, please co lease visit the Support page for the best way to conti	ntact the Safety, Oversight o	Salem and Quality Unit to have the informa I Quality Unit.	OR tion updated.	97309

Name, email address and phone information intentionally omitted from screen print.

**Note:** To remove an employee's access to the facility data records the Administrator of Record should email <u>QualityMetrics.Acuity@odhsoha.oregon.gov</u> requesting the employee access be removed. Include the facility name and employee name.

### **Step 1: Registering and Accessing the ABST**

- Open a browser and go to the ABST page of the Long-term Care Facility Portal website: https://ltcfacilityportal.oregon.gov/ABST
- Facilities which have already used the Long-term Care Facility Portal to enter Quality Metrics data, should use the same login information to sign in to the ABST application (*skip to Step 2*).
- If your facility does not already have an account, you will need to register by clicking the green "Register" button at the top right corner of the screen.

Oregon Department of Human Services Home Support			Login Register
	Oregon Depa of Human Ser Log In	rtment rvices	
	Email Address		
	Password		
	Remember me	?	
	Log In		
	Forgot your passwo	ord?	
	Register as a new u	iser	

- Enter information in all the required fields.
- Choose and confirm a secure password you will remember.
- Click the green "Register" button beneath the entered registration information.

	)(	Oregon of Huma	Department In Services		
То	register for access to the LT the requested in	TC Facility Portal Information and cl	and the tools contained within, please pro ick the "Register" button below.	ovide	
First	Name *	0	Last Name *		)
Phor	ne Number		Email Address *		
Pass	sword *	۲	Confirm Password *	•	

- You will receive a confirmation link in the email you used to register with; click the link in the confirmation email to finalize registration.
- Return to the ABST page of the Long-term Care Facility Portal website to log in:<u>https://ltcfacilityportal.oregon.gov/ABST</u>

#### Step 2: Accessing the ABST -- Logging In

- Enter your email and password.
- Click the green "Log In" button beneath the entered log in information.

#### **Step 3: Finding Your Facility**

• For facilities who have already used the Long-term Care Facility Portal to enter their Quality Metrics data, you should see your facility in the "Your Facilities" section (*skip to Step 4*).

- If your facility does not automatically appear in the "Your Facilities" section, select the "My Account" blue hyperlinked text in the top, middle of the section.
- Click "Facilities" at the bottom of the menu list on the left of the screen

**Note:** Your profile information should be automatically populated in the "Profile" section).

Oregon Department of Human Services Home Facility Tools	✓ Support	
My Account		
Profile	Profile	Edit Profile
Email	First Name *	Last Name *
Password		
Facilities	UserName	Phone Number
Oregon Department	Quick Links	
of Human Services	QMA Provider Instructions	ADRC of Oregon
	CRO Facilities Dags	Long Term Care Ombudemen Brogram

- Click the green "Request Access to a Facility" button on the right side of the screen.
- Type your facility name into the search bar and then click the blue "Search" button on the right.

Request	Access to a Fac	ility		Search Close
Facility ID	Facility Name	Facility Type	Address	City
50R307	A Touch of Grace	RCF	2156 Brookhurst Street	Medford
50M098	Aaren Brooke Place	RCF	995 N Oregon St	Ontario
70M001	Adams House Assisted Living	ALF	121 Cordelia Drive	Myrtle Creek

• Your facility name should show up; click anywhere in the gray bar where your facility information is listed.

	Request A	Access to	a Facil	ity aa	aren brooke	Se	earch Close	
My A	Facility ID	Facility Name	e	Facility Type	Addr	ress	City	
Profile Email	50M098 1 Record Found	Aaren Brooke	Place	RCF	995	N Oregon St	Ontario	a Facility
Passw_	c		1 Record Fo	ound				
Passw_ Facilitie	s agon Depar	tment	1 Record Fo	Links				
Passw Facilitie	s egon Depar Human Ser	tment vices	1 Record Fo Quick QMA Provis	bund Links der Instructions		ADRC of Ore	egon	
Passw_ Facilitie	s egon Depar Human Ser or recete Wintos ipartment of Hum People with Disat	tment vices sasuries nan Services jilties	1 Record For Quick QMA Provid CBC Facilit	bund Links der Instructions ies Page		ADRC of Ore Long-Term (	egon Care Ombudsm	an Program
Passw_ Facilitie	s egon Depar Human Ser Gepsort With Disab spartment of Hum People with Disab y, Oversight and ( 530	tment vices Asiumes han Services pilities Quality Unit	1 Record Fo Quick QMA Provid CBC Facilit DHS Office Quality	ound Links der Instructions ies Page e of Safety, Oversig	ht and	ADRC of Ore Long-Term ( Long-Term (	egon Care Ombudsm Care Facillty His	an Program

- If you are unable to locate your facility, send an email to: <u>QualityMetrics.Acuity@odhsoha.oregon.gov</u> and administrative support staff will create a facility profile.
- Click the blue "Confirm" button in the top right corner of the window to confirm your facility access request.

**Note:** Establishing a facility profile requires additional time; typically, expect 24 to 48 hours before an account is available to request facility access. Your email should automatically populate in the "User Email" section and your facility's full information should automatically populate in the "Facility Information" section. You should see a pending request for your facility on the "Facilities" page of your account.

- To learn if your facility access request has been approved, you can check the ABST page of the Long-term Care Facility Portal website: <a href="https://ltcfacilityportal.oregon.gov/ABST">https://ltcfacilityportal.oregon.gov/ABST</a>. In addition, you will receive a notification email at the email associated with your account once a request has been approved.
  - If no facility is listed on the home page after you log in, go to "My Account" and then select "Facilities" to learn the status of your request.

My Account			
Profile			Request Access to a Facilit
Email	Request Status	Request Da	ate Facility Name
Password	Pending	7/7/2021	Aaren Brooke Place
Facilities	1 Record Found		
	Quick Links		
Oregon Department of Human Services	Quick Links	ns	ADRC of Oregon
Oregon Department of Human Services AGING & PEOPLE WITH DISABILITIES regon Department of Human Services Aging & People with Disabilities	Quick Links QMA Provider Instruction CBC Facilities Page	ns	ADRC of Oregon Long-Term Care Ombudsman Program
Oregon Department of Human Services AGING & PEOPLE WITH DISABILITIES Oregon Department of Human Services Aging & People with Disabilities ttn: Safety, Oversight and Quality Unit	Quick Links QMA Provider Instruction CBC Facilities Page DHS Office of Safety, Ov	ns rersight and	ADRC of Oregon Long-Term Care Ombudsman Program Long-Term Care Facility History Searc
Oregon Department of Human Services AGING & PEOPLE WITH DISABILITIES Oregon Department of Human Services Aging & People with Disabilities ttn: Safety, Oversight and Quality Unit O Box 14530	Quick Links QMA Provider Instruction CBC Facilities Page DHS Office of Safety, Ov Quality	ns rersight and	ADRC of Oregon Long-Term Care Ombudsman Progr Long-Term Care Facility History Sea

**Note:** Requests to add or remove facility staff access to a facility's ABST database are approved by SOQ staff once they are submitted by the Administrator of Record. Please refer to requesting and removing facility staff action section outlined in this Guide.

#### **Step 4: Accessing Your Facility**

• Select your facility name listed under "Facility Name" header.

### Acuity Based Staffing Tool (ABST)

Please select from your If you feel that the list be facility access requests	approved facilities, listed below, to be slow is incomplete or inaccurate, plea and/or request access to a new facilit	egin entering data for the staffing use visit the <b>My Account</b> page to v ty.	tool. view the status of your existing
Facility ID	Facility Name	Address	Residents
50RDHSTEST	QMA Test Facility	PO Box 14530	0
Record Found	2		

The Acuity-based Staffing Tool (ABST) is designed to assist facilities in ensuring they have adequate numbers of staff to meet the scheduled and unscheduled needs of residents at all times (See OAR 411-054-0070(1)).

#### **Facility Sections**

- You will see your facility's information at the bottom and a sections list at the top.
- The term "section" is used to provide an option to create either multiple sections or buildings to determine staffing for distinct facility areas, for example units or cottages.
- If your facility does not have separate building sections, floors, etc., you can establish one section naming it "Main.".
- When visiting this page for the first time, 0 sections are listed.
- Add a facility section by clicking the blue "Add Facility Section" button in the top right corner.

a raciinty section may be a separate building, purposes of determining needed staffing. W	wing, floor, or neighborhood within a facility. Faci thin the ABST, each section has a maximum of 250	ity sections can be used to group together residents for t ) residents.
Name	Occupancy	Search Add Facility Sec
Records Found		
Records Found  Facility Information		
Records Found  Facility Information  acility Name	Facility Type	Facility ID
Records Found  Facility Information  aciity Name  QMA Test Facility	Facility Type Assisted Living Facility	Facility ID 50RDHSTEST
Contract Provides A contract on the second	Facility Type Assisted Living Facility Phone E	Facility ID 50RDHSTEST

• Enter section name and click the blue "Save" button in the top right of the window.

Create Facility Section		Save Close
Fields marked with a * are required.	Facility Name	
	QMA Test Facility	

- Enter all section(s) necessary for your facility.
- As each section is entered, they appear in a list on the top of the Facility Details page.
- Once you have completed entering your section(s), click the section you would like to open.

Once you are in a facility section, you can add resident specific information. Once the resident specific information has been added, this is where you update unique resident Activities of Daily Living (ADL) care needs.



The following screen prints show facility section details and a completed individual resident record.



Jane Doe Complete



#### **Resident Details**

#### Jane Doe Complete

Delete

Back to Section



#### Edit Questions

#	Question	Task Time	Frequency/week	Caregiving Time/week	Status
1	How much time is spent on personal hygiene such as shaving and mouth care?	20 minutes	14	4.67 hours	Complete
2	How much time is spent on grooming, such as nail care and brushing hair?	30 minutes	13.5	6.75 hours	Complete
3	How much time is spent on dressing and undressing?	10 minutes	15.75	2.62 hours	Complete
4	How much time is spent helping with bowel and bladder management?	0 minutes	0	0 minutes	Complete
5	How much time is spent with bathing?	1.33 hours	2	2.67 hours	Complete
6	How much time is spent transferring in or out of bed or a chair?	20 minutes	14	4.67 hours	Complete
7	How much time is spent repositioning in bed or chair?	10 minutes	14	2.33 hours	Complete
8	How much time is spent on ambulation, escorting to and from meals or activities?	10 minutes	13	2.17 hours	Complete

9	How much time is spent supervising, cueing, or supporting while eating?	0 minutes	0	0 minutes	Complete
10	How much time is spent with medication administration, passing out medications?	10 minutes	14	2.33 hours	Complete
11	How much time is spent providing non-drug interventions for pain management?	0 minutes	0	0 minutes	Complete
12	How much time is spent providing treatments? (e.g. skin care, wound care, antibiotic treatment)	0 minutes	0	0 minutes	Complete
13	How much time is spent cueing or redirecting due to cognitive impairment or dementia?	10 minutes	15.75	2.62 hours	Complete
14	How much time is spent ensuring non-drug interventions for behaviors?	0 minutes	0	0 minutes	Complete
15	How much time is spent assisting with leisure activities?	0 minutes	0	0 minutes	Complete
16	How much time is spent monitoring physical conditions or symptoms?	35 minutes	7	4.08 hours	Complete
17	How much time is spent monitoring behavioral conditions or symptoms?	0 minutes	0	0 minutes	Complete
18	How much time is spent assisting with communication, assistive devices for hearing, vision, speech?	15 minutes	14	3.5 hours	Complete
19	How much time is spent responding to call lights?	0 minutes	0	0 minutes	Complete
20	How much time is spent on safety checks, fall prevention?	10 minutes	21	3.5 hours	Complete
21	How much time is spent completing resident specific housekeeping or laundry services performed by care staff?	0 minutes	0	0 minutes	Complete
22	How much time is spent providing additional care services, such as smoking assistance or pet care?	0 minutes	0	0 minutes	Complete

#### **Archiving Resident Detail Information**

In circumstances where a resident is no longer living at a facility, creating a distinct archive or discharge section is advised.

When a resident is no longer living at a facility, the ABST resident details data should be moved to prevent "skewing" of caregiver time data.

As stated in OAR 411-054-0025(8)(b), resident records must be kept for a minimum of three years after the resident is no longer in the facility. ABST records should be archived similarly.

Oregon Department of Human Services Home Facility Tools - Support			
Facility Details	Acuity Based Staffi	ng Home	
S Facility Sections			
A facility section may be a separate building, wing, floor, or neighborhood within a facility. Facility sections can be used to group together residents for the purposes of determining needed staffing. Within the ABST, each section has a maximum of 250 residents.			
	Search Add Facil	ity Section	
Section Name ↓	Occupancy		
Archive Records	3		
Floor #1	4		
Floor #3	3		
3 Records Found			
S Facility Information			

**NOTE:** The best practice to provide evidence of quarterly resident record updates and resident change of condition is to export and maintain electronic copies of resident detail records.

#### **Moving Resident Records Within Facility Sections**

When a resident moves from a distinct section or area of a facility to a different location the corresponding resident detail data should be moved.

The following steps describe the steps for moving a resident record from floor #1 to floor #3.

• Select Floor #1

Oregon Department of Human Services Home Facility	Tools - Support	
acility Details		Acuity Based Staffing Home
Sections		
A facility section may be a separate building purposes of determining needed staffing. V	g, wing, floor, or neighborhood within a facility. Facility sections can be us Vithin the ABST, each section has a maximum of 250 residents.	ed to group together residents for the
A facility section may be a separate building ourposes of determining needed staffing. V	g, wing, floor, or neighborhood within a facility. Facility sections can be use Within the ABST, each section has a maximum of 250 residents.	ed to group together residents for the Search Add Facility Section
A facility section may be a separate building ourposes of determining needed staffing. V Section Name ↓	g, wing, floor, or neighborhood within a facility. Facility sections can be use Within the ABST, each section has a maximum of 250 residents. <b>Occupancy</b>	ed to group together residents for the Search Add Facility Section
A facility section may be a separate building ourposes of determining needed staffing. V Section Name J Archive Records	g, wing, floor, or neighborhood within a facility. Facility sections can be use Vithin the ABST, each section has a maximum of 250 residents. Occupancy 3	ed to group together residents for the Search Add Facility Section

3

3 Records Found

Floor #3



• Select resident's name (e.g., Jane Doe)

• Select the up/down arrow to toggle to other facility sections (e.g., Floor #3.)

The record (resident details) for Jane Doe were moved from Floor #1 to Floor #3. Follow these steps to move resident records to the desired facility section, including an archives section, when you need to move resident records when a resident is no longer at the facility.

Edit Resident		Save
Fields marked with a * a	re required.	
	Resident Name/Identifier	
	Jane Doe	
	Facility Section *	
	Floor #3 ÷	

# Activities of Daily Living (ADLs), Determining Resident Care Levels

You are ready to begin entering data for the individual resident profile you have opened. Consider the following elements as you review each ADL and enter resident-specific information regarding the amount of caregiving assistance each individual resident needs for each activity.

#### Time of Task - Estimated average staff times are included for ADLs 1 - 9.

As a starting point we recommend using "average time" estimates as provided for ADLs **1 - 9**. When completing estimated staff time needed for resident ADL assistance, consider the level of support an individual resident requires for each ADL (e.g., minimum, moderate, full, and additional.) In some cases, entering a higher estimate than the average minimum staff time data provided may be more appropriate. Use the most accurate estimate for each resident and each ADL.

**Note:** The estimated average staff time for ADLs was taken from the *State of Massachusetts Time Study for Personal Care Attendant Services* this information is available at: <u>https://www.masslegalservices.org/content/pca-time-task-and-pca-operating-standards</u>. When additional estimated average staff time information is available, this guide will be revised to include the information. In addition, the Department plans to include estimated average staff time information into the ABST application when it is possible to make updates to the ABST application.

Additional Time – A place to capture the amount of additional time or additional staff time, (e.g., two-person assist) needed to complete an ADL. The additional time data entry point allows you to capture and document the circumstances where more than average time or staff are needed to assist a resident with an ADL.

# Frequency of Activity – Capture the number of times or frequency per shift during a week that a resident requires ADL assistance.

- If a resident does not require assistance with a specific ADL, you must place a zero within the time of task and save the data before continuing to the next ADL.
- When you are finished entering data either select the blue "Next" button or the blue "Save & Exit" button.

Time of Task		minutes	Additional Ti	me 🕐	minutes.
	CU CU	minutes			minutes
low often do	es this activity occur f	or each da	y/shift below	? (if zero, leave e	mpty)
	Day	Swing		NOC	
Monday					
luesday					
Vednesday					
hursday					

• When you save and close the question box after entering data you will see information has been added to the Graphical Summary, and the resident will be marked "Complete" in the Status column of the Resident Questions section.

**NOTE**: You can edit each ADL by re-opening the ADL, updating the information, and selecting the blue "Save and Close" button. You can also delete a resident profile by selecting the blue "Delete" button.

• To leave a resident profile, select the gray "Back to Section" button in the top right corner.

Oregon Department of Human Services Home Facility Tools - Support		Avera ch -
Resident Details	Edit Delete Bac	ck to Section
Resident #1 Complete		
S Graphical Summary		
Caregiving Time Summary/Week		
Day Day NOC		

# Resident Level of Care, Activities of Daily Living (ADLs) and Average Time for ADLs

The ABST includes 22 questions regarding ADLs where you will need to determine the level of care each resident needs as well as an average amount of staff time needed to assist with ADLs. Each of the following ADLs include an industry standard time range for the specific ADL.

- **Independent** Resident can complete ADLs without assistance.
- **Minimal assist** Cueing, set up or stand by assist.
- **Moderate assist** Hands on assistance to complete a task, resident able to assist some.
- **Full assist** Resident is unable to perform any part of the task and needs a caregiver to perform the task for them.
- Additional Time Enter the amount of additional time or additional staff time, (e.g., two-person assist) needed to complete an ADL. The additional time data entry point allows you to capture and document the circumstances where more than average time or additional staff are needed to assist a resident with an ADL.

As you enter resident-specific data into the acuity tool use the definitions listed below for each of the 22 ADLs listed and an estimated average staff time range required for each level of care. If a resident does not require assistance for an ADL, a zero should be noted. The estimated average staff time for **ADLs 1 - 9** provided below was taken from the *State of Massachusetts Time Study for Personal Care Attendant Services*.

**NOTE**: Multiple staff can access and use the ODHS ABST at the same time, working with, reviewing, or revising data entry. The system will save all changes made by the multiple users. Users can not be in the same resident profile making changes at the same time, these changes will not be saved.

- 1. How much time is spent on personal hygiene such as shaving and mouth care?
  - Minimal to full assistance with maintaining personal hygiene, includes setup for grooming tasks:
  - Oral care, brushing teeth, denture care, mouth rinse
  - Hand washing and drying
  - Shaving
  - Washing and drying face.

(Note: Does not include hygiene associated with toileting or incontinent care.)

#### Range: 10 to 25 min.

Care Level	Average Time
Minimal assist –	Less than 10
Moderate assist	10 - 15
Full assist	16 - 25

- 2. How much time is spent on grooming such as nail care and brushing hair?
  - Minimal to full assistance with grooming tasks.
  - Nail care, including trimming, filing nails and painting nails.
  - Brushing, combing, styling hair.
  - Applying or removing makeup.
  - Applying lotion not prescribed as a treatment.

#### Range: 10 to 25 min.

Care Level	Average Time
Minimal assist –	Less than 10
Moderate assist	10 - 15
Full assist	16- 25

- 3. How much time is spent on dressing and undressing?
  - Minimal to full assistance with dressing, undressing or both, includes set up or laying out clothing for the day.
  - Dressing, undressing morning and evening.
  - Assistance with partial dressing, socks, shoes, buttons, zippers.
  - Assistance with putting on and/or taking off compression stockings, braces or other personal supportive devices including orthotics or prosthesis.
  - Assistance throughout the day with changing soiled clothing (pants, shirts), or redressing a resident.

#### Range: 7 to 30 min.

0	
Care Level	Average Time
Minimal assist –	Less than 7
Moderate assist	7 -15
Full assist	16 - 30

#### 4. How much time is spent helping with bowel and bladder management?

- Minimal to full assistance with toileting tasks or incontinent care, includes frequency of performing tasks.
- Transferring on and off the toilet, commode or performing incontinent care for a bed bound resident.
- Assistance with use of a commode, bedpan, or urinal.
- Assistance with cleaning, changing, or emptying toileting equipment, including catheter, foley bag, urostomy, etc.
- Assistance with performing hygiene related to toileting assistance or incontinent care, peri-care, brief changes, changing soiled clothing, hand washing.

#### Range: 6 to 25 min.

Care Level	Average Time
Minimal assist –	Less than 6
Moderate assist	6 - 15
Full assist	16 - 25

#### 5. How much time is spent with bathing?

- Minimal to full body assistance with bathing tasks.
- Taking full-body bath, including set-up, transfers in/out of tub and toweling dry.
- Taking shower, including stand by assistance for safety, shampooing hair, set-up, transfer in/out of shower, and toweling dry.
- Giving bed bath including set up.
- Shampooing hair, including set-up and hair drying.

#### Range: 15 to 60 min.

Care Level	Average Time
Minimal assist –	Less than 15
Moderate assist	15 - 30
Full assist	31 - 60

#### 6. How much time is spent transferring in or out of bed or a chair?

- Minimal stand by assist to full assistance with transfers, accounting for frequency and time spent with transferring.
- Transferring between surfaces to/from bed, chair, wheelchair.
- Transferring with a mechanical device, such as a Hoyer lift, sit to stand, transfer board.

(Note: Does not include transferring associated with toileting or bathing assistance.)

#### Range: 3 to 15 min.

Care Level	Average Time
Minimal assist –	1 - 3
Moderate assist	4 - 10
Full assist	11 - 15

#### 7. How much time is spent helping reposition in bed or chair?

- Minimal to full assistance repositioning in bed, includes frequency and duration.
- Minimal to full assistance repositioning in a chair or wheelchair.
- Includes movement to and from lying or sitting position, turning side to side, and positioning the body while in bed, chair, or wheelchair.
- Movement to and from lying or sitting position, turning side to side and positioning body while in bed, chair, or wheelchair.

(Note: Does not include transferring as a means for repositioning.)

#### Range: 3 to 10 min.

Care Level	Average Time
Minimal assist –	1 - 3
Moderate assist	4 - 7
Full assist	8 - 10

# 8. How much time is spent on ambulation, escorting to and from meals or activities?

- Minimal stand by assistance for safety to full assistance in a wheelchair, including:
- Ambulation Staff walking with the resident to and from the dining room for meals and activities.
- Escorting Staff are pushing the resident to and from the dining room and activities.

Range: 3 to 15 min.

0	
Care Level	Average Time
Minimal assist –	1 - 3
Moderate assist	4 - 10
Full assist	11 - 15

#### 9. How much time is spent supervising, cueing, or supporting while eating?

- Cutting up food items, preparing thickened beverages.
- One on one assistance provided during the meal to eat.
- Tray delivery and pick-up.
- Meal reminders.
- Frequent cueing to eat during a meal, redirecting when a resident leaves the table, providing meals or snacks "on the go."
- Providing snacks, food, and liquids throughout the day in addition to regular mealtimes.

#### Range: 10 to 30 min.

Care Level	Average Time
Minimal assist –	Less than 10
Moderate assist	11 - 20
Full assist	21 - 30

# 10. How much time is spent with medication administration, passing out medications?

- Preparing the medications through popping, pouring, injection the medication.
- Administering the medication to the resident (right resident, right reason, right medication, right dose, right route, right time, right documentation.)
- Documenting the task is completed.

# 11. How much time is spent providing non-drug interventions for pain management?

 Attempting non-drug interventions noted in the resident's service plan, such as sitting with the resident one-on-one as distraction, inviting resident to participate in an activity, offering food, heat, or ice to assist in minimizing pain.

# 12. How much time is spent providing treatments? (e.g., skin care, wound care, antibiotic treatment.)Examples include:

- Applying barrier cream.
- Treatment for rashes, yeast infections, minor abrasions.
- Dressing changes, including wound dressings, leg wraps, bandage changes for minor skin tears or scrapes.
- Stoma and catheter care (not to include emptying or draining the bags.)
- Nebulizer or other breathing treatments.
- Maintenance and cleaning (per manufactures instruction) of any resident specific medical equipment used during treatments.
- Assisting with oxygen use, tubing, flow regulation, changing tanks, changing from concentrator to portable tanks.

(Note: includes only treatments provided by care staff or med techs.)

# 13. How much time is spent cueing or redirecting due to cognitive impairment or dementia?

#### Examples include:

- Assisting a resident to find their own room.
- Redirecting a resident who is exit seeking.
- Redirecting a resident who is engaging in negative behaviors that could harm the resident or other residents in the community (e.g., altercations with other residents.)
- Redirecting or cueing a resident to engage in activities.

#### 14. How much time is spent ensuring non-drug interventions for behaviors?

- Engaging the resident in a group or one-on-one activity.
- Offering a snack or a meal.
- Providing ADL assistance.
- Taking the resident for a walk or going outside.

#### 15. How much time is spent assisting with leisure activities?

- Providing 1:1 activity with the resident.
- Assisting a resident (mentally or physically) to enable them to participate in group activities.

• Setting up individual activity, including turning on/off the TV, turning on/off music, setting resident up for puzzles, drawing etc.

#### 16. How much time is spent monitoring physical conditions or symptoms?

- Daily or weekly weights with parameters for physician notification
- Meal monitoring
- Any chronic or acute illness or conditions requiring additional time spent monitoring.

#### 17. How much time is spent monitoring behavioral conditions or symptoms?

- Time spent responding to repetitive requests or calling out.
- Time documenting on behavioral log.
- Time spent monitoring a change in behavior.

# 18. How much time is spent assisting with communication, assistive devices for hearing, vision, speech?

- Cleaning glasses.
- Assisting with hearing devices, putting in, taking out hearing aids, maintenance.
- Time spent preparing or communicating with communication board.

#### 19. How much time is spent responding to call lights?

• How many times during the day on average does the resident use the call light, five times a day, 10 times a day, greater than 10 times or never?

#### 20. How much time is spent on safety checks, fall prevention?

- Ensuring fall prevention measures are in place, for example fall mat in place, tab alarm, bed noodle, walker, and wheelchair placement.
- Ensuring clear pathways for ambulation.
- Safety checks (defined based on risk level of resident.)
- One-on-one supervision.
- Responding to tab alarms.

# 21. How much time is spent performing resident specific housekeeping or laundry services performed by care staff?

• To include tasks not routinely completed by housekeeping, such as additional laundry due to incontinence, frequent restroom checks, daily bed making and garbage removal.

- 22. How much time is spent providing additional care services, such as smoking assistance, pet care or escorts to medical appointments?
  - Assistance with smoking.
  - Assistance with pet care, including walking a dog or cleaning a cat box.
  - Escort to medical appointments.

# Logging Into the ODHS ABST Database

Step 1: Log In-

Comparison Department Home Supervised		Loss Burne
(	Cregon Department of Human Services Log In Creat Autors Remember ne?	
Oregon Department	Quick Links	ACRC of Design
Oregan Department of Human Services - Aging B People with Dubblines	CBC Facilities Page DHS Office of Solary, Oversight and Quality	Long-Term Care Ontbudonan Program
PO Bus 14530 Salars, OR 97305-04353	Degas Department of Human Services	Degar Hate and Community-Raised Services

Step 2: Access Your Facility

the second second diversity of the second			
Hease select from your a f you feel that the list be acility access requests a	pproved facilities, listed below, to be low is incomplete or inaccurate, plea ind/or request access to a new facili	egin entering data for the staffing use visit the My Account page to v ty.	tool. view the status of your existing
Facility ID	Facility Name	Address	Residents
SORDHSTEST	OMA Test Facility	PO Box 14530	0



Facility Details				Acuity Based Staffing H
				Search Add Facility Se
Name	Occup	ancy		
Section 1	1			
Record Found				
Facility Information				
Facility Name	Facility Typ	•	Facility ID	
QMA Test Facility	Assisted I	iving Facility	SORDHSTEST	
Administrator Name	Phone	Email		
Safety, Oversight and Quality Unit	503-945-5600	Qua	lityMetrics.Acuity@dhi	oha.state.or.us
Address	City		State	Zip
PO Box 14530	Salem		OR	97309

#### **Step 4: Adding Residents**

- Begin data entry by adding the first resident.
- Select the blue "Add Resident" button in the top right corner of the "Residents" section located under the "Graphical Summary."
- Enter the resident's full name, last name first (e.g., Smith, John) in the top field titled "ResidentName/Identifier."
- Select the correct section in the "Facility Section" drop down menu.
- Select the blue "Save" button in the top right corner of the window.
- The resident will now appear in the "Residents" section.
- You will complete Step 4 for all current and future residents.
- Each resident will have an individual record profile.

Create Resident	Save
Fields marked with a * are required.	
Eacility Section *	
Section 1	•

#### Step 5: Entering Resident Data

• Select a resident profile ("Record") to enter resident specific staff time for each ADL.

**Note:** If you have multiple residents entered, instead of scrolling through the list you can search for a specific resident by typing their name into the search bar above the resident profile list and selecting the blue "Search" button to the right of the search bar.



- The first part of the resident profile will show the "Graphical Summary". This is a bar graph summarizing the amount of caregiving time inputted into the ABST per shift per day of the week. To see exact time hover over the graph.
- The second part of the resident profile includes Resident specific ADLs.
- This is where you will enter data. Scroll down to see all **22** questions.

**NOTE**: You can hide or show both the Graphical Summary and the Resident Questions sections by selecting the white circle with the small carrot symbol in it on the left side of green bar or clicking on the green bar which toggles or shows the collapsible sections.



- To begin entering data, select a question in the question list by selecting the question text.
- Another option is to select the blue "Start Questions" button above the list, and it will take you to the first ADL on the list that has an "Incomplete" status. See below:

e	sident Details			Edit Delete Bi	ack to Section
		Jane De	00 🚥		
9	Graphical Summary				
5	Resident Questions				
	-	Start O	uestions		
	Question	Task Time	Frequency/week	Caregiving Time/week	Status
1	Question How much time is spent on personal hygiene such as shaving and mouth care?	Task Time	Frequency/week	Caregiving Time/week	Status

#### **Data entry – Determining Individual Resident Details**

The following screen print is an example of the data entry considerations for determining the caregiver time to assist a resident with dressing and undressing.

#### Question 3



Close

Time of Task		Additional Time ⑦						
10		minutes			minutes			
How often does this activity occur for each day/shift below? (if zero, leave empty)								
	Day	Swing		NOC				
Monday	1	1.25						
Tuesday	1	1.25						
Wednesday	1	1.25						
Thursday	1	1.25						
Friday	1	1.25						
Saturday	1	1.25						
Sunday	1	1.25						

This example indicates the caregiver time is ten minutes and the resident requires dressing and undressing assistance on day and swing shifts. In many circumstances the frequency of a task occurrence per shift would be "1" or blank when time is not required for assistance.

In this example, we want to illustrate the option to use percentages when determining the amount of time required for a task. As illustrated above, the task frequency (1.25) is greater than ten minutes for day shift. Using a percentage increases swing shift staff time to 12.5 minutes. Using a percentage of time allows for variability with scheduling staff time on different shifts.

When choosing to save and exit as shown in the screen print above; the amount of time for task three is shown as 10 minutes, the task occurs 15.75 times during a seven-day work week, considering all three shifts and the total amount of caregiver time required for this task is 2.62 hours.

3 How much time is spent on dressing and undressing? 10 minutes 15.75 2.62 hours Complet	3	How much time is spent on dressing and undressing?	10 minutes	15.75	2.62 hours	Complete
--	---	--	------------	-------	------------	----------

If a resident does not receive caregiver assistance for an ADL, please enter "0" for the task time and choose next; leave other data entry areas blank or empty.

Question 14			Next	Save & Exit	Close
How much time is spent ensuring non-drug int	ervention	s for behaviors?			
Time of Task		Additional Time 🕐			
0	minutes			r	minutes

How often does this activity occur for each day/shift below? (if zero, leave empty)

**NOTE:** The ODHS ABST calculates the minimum amount of staff time (minutes) required to provide direct care for each resident, for day, swing, and NOC shifts. Facilities can use this data to consider direct care staffing requirements. The ODHS ABST does not provide a calculation for the total number of staff needed per shift. Please be aware total caregiver time does not indicate when two staff or more are required.

#### **Step 6: Reviewing Data**

The Facility Section Details page provides a summary of weekly caregiving time per facility section:

- Number of Residents ("Occupancy").
- Total Caregiving Time.
- The combined resident data appears in the Graphical Summary.
- If you hover your mouse over the bar graphs in the Graphical Summary on a day of the week, a small summary box will appear to display the number of caregiving hours needed per shift for that day.
- The Facility Section Details page shows all residents who have been added to the section.
- Resident status will indicate either a **red "Incomplete"** (one or more questions have not been answered) or a **green "Complete"** (all 22 questions have been answered).



• The screen image above shows that when you hover your pointer tool over a specific day on the graph a box pops-up. The box displays information showing caregiver time per Day, Swing or NOC.

**NOTE**: If you need to edit or delete the section, select the blue "Edit" or "Delete" buttons at the top right of the page.

### **Frequency of Updates to ABST**

As per <u>411-054-0037 Acuity-Based Staffing Tool (Amended 06/24/2022)</u>:

(3) FREQUENCY OF UPDATES: No later than July 1, 2022, an ABST assessment must be completed for each resident. Following this deadline, facilities must review the ABST tool for each resident:

- (a) Before a resident move in, with amendments as appropriate within the first 30 days to address a resident's needs.
- (b) Whenever there is a significant change of condition as defined in OAR 411-054-0005.
- (c) No less than quarterly, preferably at the same time the resident's service plan is updated, as required by OAR 411-054-0034.

## **ODHS ABST Export Data Enhancement**

In July 2022 web developers added a data export enhancement to the ODHS ABST. This export feature will be put into production and available to ODHS ABST users in September 2022.

The export enhancement was added by the web application development team in response to provider requests. The export feature enables ODHS ABST users to export ABST data in a Microsoft EXCEL format, providing an option print data entry information. There are three different options for exporting data:

- Export all data,
- Export individual resident data, or
- Export all data within a specific section.

#### **Export All Data**

Facility Details (Main Page) select the blue button labeled "Export All Data". **Export All Data**- exports all resident data in the ODHS ABST tool into a single Excel file. **Note:** Export Data *does not* include total caregiver time.

Oregon Department of Human Services Home Facility Tools - Support	
acility Details	Export All Data Acuity Based Staffing Home
Sections	
facility section may be a separate building, wing, floor, or neighborhood within a fa urposes of determining needed staffing. Within the ABST, each section has a maximu	cility. Facility sections can be used to group together residents for the um of 250 residents.
	Search Add Facility Section
Section Name ↓	Occupancy
Resident Archive Section	2
Test Floor #1	4
Test Floor #2	3
Test Floor #3	3
Records Found	

#### **Export Individual Resident Data**

Select desired resident record from section screen. To the right of the Resident Detail header select the blue button labeled "Export Data", for individual resident data. **Export Data** will export all 22 ADLs for specific resident selected.

Resident Details		Edit Export Data Delete Back to Section
	Jane Doe Complete	
S Graphical Summary		

#### **Export All Data Within a Specific Section**

Select the desired facility section from Facilities Details page. On the Facility Section Details page under the green "Resident" header is a blue button labeled "Export Residents", select this to export data for this section. **Export Residents** exports all resident data within selected section.



**Note:** The data export feature allows facilities to archive historical data. Facilities can save downloaded Excel files or print the files for facility records.

Appendix A includes definitions for ODHS ABST Microsoft EXCEL export data.

### Using ODHS ABST Data to Prepare a Staffing Plan

As mentioned earlier in the Guide, the ODHS ABST calculates the minimum amount of staff time (minutes) required to provide direct care for each resident, for day, swing, and NOC shifts. Facilities can use this data to consider direct care staffing requirements. The ODHS ABST does not provide a calculation for the total number of staff needed per shift.

A facility "section" may be a separate building, wing, floor, or neighborhood within a facility. Facility sections can be used to group together residents for the purposes of determining needed staffing. Within the ABST, each section has a maximum of 250 residents.

The image on the following page summarizes one week, seven days, three shifts (Day, Swing, NOC) of caregiver time for Test Floor #3.

There are three residents in the section named Test Floor #3. The total caregiver time is 95.31 hours.

Total caregiver time per shift:	Total caregiver time per resident:
Day Shift: 49.22	Mary Smith: 41.3 hours
Swing Shift: 34.98	John Doe: 34.2 hours
NOC Shift: 11.13	Bob Smith: 19.81 hours

The ODHS ABST is designed for three eight-hour shifts, however if a facility schedules caregivers based on two 12- hour shifts, the swing shift time should be split (divided in half) between the first (day) and second (NOC) shift.



The facility should gather ABST data along with any staffing analysis information to develop a staffing plan. A facility staffing plan is required to be posted in a routinely accessible and noticeable location to residents and visitors and must be available for inspection at all times per OAR -0025(5).

At a minimum the posted facility staffing plan should include information indicating the number of staff working on shift to provide direct care to meet the scheduled and unscheduled needs of residents. As per OAR 411-054-0005(27):

"Direct Care Staff" means a facility employee whose primary responsibility is to provide personal care services to residents. These personal care services may include:

- (a) Medication administration.
- (b) Resident-focused activities.
- (c) Assistance with activities of daily living (ADLs).
- (d) Supervision and support of residents.
- (e) Serving meals, but not meal preparation.

If the facility is using universal workers to meet the scheduled and unscheduled needs of residents, the facility will need to increase staffing numbers above ABST. As per OAR054-0005(96):

"Universal Worker" means a facility employee whose assignments include other tasks (for example, housekeeping, laundry, or food service) in addition to providing direct resident services. Universal Worker does not include administrators, clerical, or administrative staff, building maintenance staff, or licensed nurses who provide services as specified in OAR 411- 054-0034.

Below are two examples of posted facility staffing plans.

#### Example #1 data review:

- Single floor Facility
- ABST Data:
  - Day Shift: 49.22
  - Swing Shift: 34.98
  - NOC Shift: 11.13
- Facility shifts 8 hours with 30-minute break for total time of 7.5 hours.
- No two-person transfers

	Day	Swing	Night
	6 am –2 pm	2 pm- 10 pm	10 pm- 6 am
Caregivers	5	3	1
Med Tech	2	2	1

#### Example #2 Data Review:

- Facility has 3 different building sections to staff.
- Facility shifts 8 hours with 30-minute break for total time of 7.5 hours.
- Facility has 1 two-person transfer resident.
- ABST Data
  - Day Shift: 49.22
  - Swing Shift: 34.98
  - NOC Shift: 11.13

	Day	Swing	NOC	Other
	6 am- 2pm	2 pm- 10 pm	10 pm- 6 am	6 pm- 10 pm
First Floor				
Caregiver	1	1	1	
Second Floor				
Caregiver	1	1	1	
Third Floor				
Caregiver	1	1	1	
<b>Caregiver- float between floors</b>	1			
Med Tech	2	2	1	
Universal worker helps with				1
shower ADL				
Total	6	5	4	1

# ODHS ABST Frequently Asked Questions and Answers (FAQs)

The Department received a variety of questions asking for guidance on how to determine specific staffing requirements based on individual facility ODHS ABST data. However, the ODHS ABST is not a staffing tool in and of itself. The ODHS ABST provides one data point for facilities to analyze when developing and routinely updating the staffing plan.

The tool does not calculate the number of staff needed per shift. The tool calculates the amount of staff time (minutes) required to provide direct care for each resident, for day, swing, and NOC shifts. In addition, the tool provides the total caregiver time required for all residents within a specific facility section (e.g., floor, unit, distinct area); including breakout information for caregiver time for each shift.

# How do we track tasks that overlap each other? For example, fall prevention and safety checks often occur while other types of care are being provided.

Time for each task should be estimated and documented under a resident's specific ADLs (1-22). It is important to record direct staff time required for residents scheduled and unscheduled needs. It is okay to record "0" time for a specific ADL if the direct staff time for all individual resident care needs is reflected within the resident's record.

#### How do we account for staff who are multi-tasking while providing care?

Caregiver time assisting more than one resident at a time should be allocated for each individual resident. The ODHS ABST data represents the amount of staff time required to perform individual tasks for each resident.

#### The ODHS ABST includes questions pertaining to medication administration and treatment. Should med tech staff time be included as direct care staff time when determining the number of staff needed?

Yes, if med tech staff time is spent administrating medications as stated in ODHS ABST ADL #10, "How much time is spent with medication administration, passing out medications?" **OR** (*See next page*.)

Providing medical treatment as reflected under ODHS ABST ADL #12, "How much time is spent providing treatments? (e.g., skin care, wound care, antibiotic treatment).

**Note:** To help distinguish between caregiving and med tech time, facilities can create a section labeled "Med Techs". Within this section list every resident and only answer questions 10, 12 and any question med techs are responsible for resident care. Answer the other questions with a zero. For the other "sections" in the ABST answer zero for questions 10, 12 and any question answered in med tech section. This would allow facilities to distinguish between med tech and caregiving time.

#### How do we break down caregiver time by shift?

The ODHS ABST indicates the amount of time needed per shift in the graphical summary section. This can be found in the facility section details and within each individual resident. To view the times associated to specific days, hover your pointer tool over the graph to show time per shift. A data export enhancement will be available September 2022 allowing for exporting data via Microsoft Excel.

#### How do the hours reflected in the ODHS ABST correspond to the number of staff we should schedule? If we have 40 hours needed for day shift, do we need one caregiver for those 40 hours?

The ODHS ABST provides an estimate of the time it takes to perform a care task. The ODHS ABST output; total caregiver time required to complete the 22 ADLs, is a data point to be considered along with other factors to estimate how many staff are needed to meet residents' needs. Please refer to the FAQs introduction for a more complete list of factors. **Do we have to account for care that is provide by hospice or agency caregiver?** 

Yes, the ODHS ABST accounts for all required caregiver time necessary to provide for resident's scheduled and unscheduled needs regardless of whether care is provided by permanent or agency staff.

#### How do we capture hours when a resident has Hospice or Home Health?

The ODHS ABST captures an estimate of the time it takes to perform the entered care tasks. For example, a resident's service plan calls for bathing assistance four days a week. The ODHS ABST value for those tasks is 20 minutes per bathing assistance. The resident is also receiving hospice services and hospice is scheduled to provide bathing assistance twice weekly.

The administrator might determine to reduce the staff time need to assist with scheduled care needs by 20 minutes for the twice weekly bathing assistance hospice provides. If hospice did not show up the facility would be responsible providing bathing assistance.

# What is the best way to show additional ancillary support for resident ADLs such as psychosocial support provided by activities etc.?

If a resident requires adaptations to participate in activities as part of their service plan, you should enter this time in the leisure activity ADL.

Question 1	5			Next	Save & Exit	Close
How much ti	me is spent assisting v	vith leisure activities?				
Time of Task			Additional Time 🝞			
15		minutes	15		m	inutes
How often does	this activity occur for each	day/shift below? (if zero, leav	ve empty)			
	Day	Swing	NC	C		
Monday	1					

# How do I determine caregiver time for tasks when staff spend varying amounts of time for the same task, depending on the shift or weekday?

The following example is a screen print which indicates staff are assisting with cueing or redirecting the resident 10 minutes on day shift. On swing shift however the resident requires additional support time. Using a multiplier of 1.25 for swing shift, 12.5 minutes is calculated for direct caregiver support time on swing shift.

Question 13	3			Next Save & Exi	t Close
How much tin	ne is spent cueing o	r redirecting due to cogniti	ve impairment or dementia?		
Time of Task		Ad	ditional Time 🕐		
10		minutes			minutes
How often does t	this activity occur for eac	h day/shift below? (if zero, leave er	mpty)		
	Day	Swing	NOC		
Monday	1	1.25			
Tuesday	1	1.25			
Wednesday	1	1.25			
Thursday	1	1.25			
Friday	1	1.25			
Saturday	1	1.25			
Sunday	1	1.25			

# **Community-Based Care (CBC) Survey, Licensing Complaint Unit and Corrective Action Coordination**

#### **CBC Survey**

Community Based Care (CBC) survey utilizes a consistent process to assess staffing levels in Assisted Living and Residential Care facilities, including Memory Care Communities, when determining if a facility has qualified awake caregivers sufficient in number to meet the 24-hour scheduled and unscheduled needs of each resident.

CBC surveyors will assess the staffing levels of a facility, at a minimum, each time the department conducts a relicensure survey.

Initial review of staffing levels will be conducted on a select sample of residents chosen by the survey team. Resident samples will be based on resident acuity and facility census. Samples will include approximately 10 percent of the resident population, with a minimum of two.

Survey will request documentation which supports the use of the acuitybased tool for all sampled residents. This documentation, as well as a review of individual resident clinical records, interviews and observations conducted while on survey, will serve as the basis for evaluating facility staffing levels, and will include a determination of whether the facility is:

- Using an acuity-based staffing tool that recommends staffing timenecessary to meet the scheduled and unscheduled needs of the residents 24 hours a day, seven days a week;
- Using the acuity-based tool to recalculate staffing patterns;
- Consistently staffing to the levels indicated by the acuity-based staffing tool; and
- Consistently meeting the scheduled and unscheduled needs of all residents 24 hours a day, seven days a week.

#### Licensing Complaint Unit (LCU) Compliance Specialists

When complaints regarding resident safety or staffing levels are received, a screener will obtain information regarding concerns about resident safety or inadequate staffing levels. Once a complaint is completed it is assigned to a Compliance Specialist (CS). Initial contact will be made by the CS within five business days after receiving the complaint assignment. A CS will complete an onsite review of staffing level information to assess whether staffing is adequate while reviewing the same four criteria noted above for the survey determination process. Completed LCU reports are sent to the Corrective Action Coordinator (CAC) assigned to the facility.

### **Operations and Policy Analyst (OPA)**

When a Community Based Care (CBC) facility, including endorsed Memory Care Communities, receives notice regarding a failure to adequately staff qualified awake caregivers sufficient in number to meet the 24-hour scheduled and unscheduled needs of each resident, an OPA will contact the facility and request information to develop a facility-specific staffing plan.

### **Corrective Action Coordinator (CAC)**

When the CAC receives a completed ABST survey or LCU report, they review the information following report review guidelines, requesting additional information when needed to complete their analysis and determine the necessary facility follow-up. The CAC prepares sanctions and final report information and coordinates required distribution and followup. One distinction, survey sends out final surveyor reports to facilities prior to CAC review and follow-up.

#### License Conditions

SB 714 requires the Department to place a condition on the facility's license as provided in <u>ORS 441.736 (1)(b)(A), (B), (C)</u>, when a facility has been found non-compliant with <u>OAR 411-054-0037</u>. The document issued will provide specific conditions that the facility must implement and will outline the requirements for withdrawal of the condition.

Once the facility believes it has met the requirements for withdrawal the facility must notify the Department, in writing, assertion of substantial compliance and request a reinspection or revaluation.

Once the request is received the Department has 15 business days to reinspect or reevaluate the facility to determine if the facility has achieved substantial compliance. It is important for the facility to respond to and to provide any additional information the Department has requested.

Within five business days after the completion of the reinspection or reevaluation the facility will be notified by telephone or electronic means. If the Department finds the facility has achieved substantial compliance the Department shall withdraw the order.

If after reinspection or reevaluation, the Department determines the violation continues to exist, the Department may not withdraw the order and is not obligated to reinspect or reevaluate the facility again for at least 45 business days after the first inspection or reevaluation.

**Questions regarding instructions** for registering, accessing, or using the ODHS ABST application should be directed to:

#### QualityMetrics.Acuity@odhsoha.oregon.gov

You can request this document in other languages, large print, braille or a format you prefer. Contact the Community-Based Care team of the Safety, Oversight and Quality unit of the ODHS Office of Aging and People with Disabilities at 503-373-2227 or email <u>CBC.Team@odhsoha.oregon.gov</u>. We accept all relay calls or you can dial 711.

# **Appendix A**

### **ABST Export Column Definitions**

**Shift Time Calculations:** Total time (in minutes) for each shift. Numbers correspond to shift types as follows:

- 1: Day
- 2: Swing
- 3: NOC

For example, a column of WedShift2Time would be display the total time for that answer in the Wednesday Swing shift.

Shift times are calculated by adding the inputted Time of Task (the "**TaskTime**" column) and Additional Time ("**AdditionalTime**" column) then multiplying them by the entered number of occurrences for that shift etc.

#### How much time is spent on grooming, such as nail care and brushing hair?

Time of Task		Additional Time 🕐		
0 mir		minutes		minutes
How often does	this activity occur for each	day/shift below? (if zero, lea	ave empty)	
	Day	Swing	NOC	
Monday				
Tuesday				

#### Answer/Data Exports

Answers can be exported for a single resident by clicking the "Export Data" button when viewing details for that Resident.

# Resident Details Export Data Back to Section

Or for an entire Facility by clicking the "Export All Data" when viewing details for that Facility.

#### Facility Details

Export All Data Delete Back to List

This will automatically download a spreadsheet with answers for all questions for that resident, or for all residents for that facility, respectively. Each row in the spreadsheet is an answer.

# **Column Definitions**

**QuestionText:** The text of the question associated with the answer.

**ResidentName:** The name of the resident associated with the answer.

**ResidentStatus:** The status of the resident associated with the answer Possible statuses are:

- "New": The resident has no answers entered for any of its questions.
- "Incomplete": The resident has answers entered for some but not all of its questions.
- "Complete": The resident has answers entered for all of its questions.

**ResidentTotalCareTime:** The total amount (in minutes) of time per week per ADL for the associated resident.

**FacilitySectionName**: The name of the facility section where the resident resides.(building, wing, hall, etc.)

**FacilityID:** The unique Facility ID of the facility associated with the answer.

FacilityName: The name of the facility associated with the answer.

**ResidentTotalMonShift1Time, ResidentTotalMonShift2Time, etc.:** The total time entered for all caregiving related to all ADL's for each shift for the resident across all its answers. See "Shift Time Calculations" above.

SystemID: The unique database id (primary key) of the answer.

**TotalFrequency:** The total number of occurrences of the tasks/activities for the answer inputted for an answer. For example, if a user answered that the task/frequency occurs once per day, the TotalFrequency would be 7. See image below.

How often does this activity occur for each day/shift below? (if zero, leave empty) NOC Swing Day Monday 1 Tuesday 1 1 Wednesday 1 Thursday Friday 1 Saturday 1 Sunday 1

**TaskTime**: The number of minutes it takes to complete a task/activity.

Time of Task



AdditionalTime: The number of minutes it takes to complete a task/activity not initially scheduled; includes additional staff time. See the image below.

Additional Time 🕐



**TotalTaskTime:** The total minutes of TaskTime and AdditionalTime.

**TotalCaregivingTime:** All minutes of caregiving time. Calculated by multiplying the TotalTaskTime (the total time a task should take) by the TotalFrequency.

**MonShift1Time, MonShift2Time, MonShift3Time, etc.:** Total time in minutes to complete all tasks/activities for a resident on a given day and shift.

CreatedDate: The date and time the answer was created. If no CreatedDate

is displayed, then no answer has been entered for this question and resident.

**CreatedBy:** The id of the user who created the task. This will be an OR# if the record was created by a ODHS user in the admin application, or the SystemID of the user (displayed as ID- XXX) if created by an external user. If no CreatedBy is displayed, then no answer has been entered for this question and resident.

**CreatedByName:** The name of the user who created the task.

**CreatedByEmail:** The email/username of the user who created the answer. Provided in case the user changes their name after creating the record.

**LastEditDate:** The date and time the answer was last edited. If no LastEditDate is displayed, then this answer has been created but not yet edited, or no answer has been entered for the question and resident.

LastEditByName: The name of the user who last edited the answer.

**LastEditByEmail:** The email/username of the user who last edited the answer. Provided in case the user changes their name after creating the record.

#### **Resident Export**

Additionally, an export can be downloaded of all residents for a facility section by clicking the "Export Residents" button above the table of residents shown on the Facility Section's Details.

			Search	Export Residents
Status↓	Resident Name/Identifier ↓	Total Caregiving Time		
Incomplete	John Doe	2.49 hours		

This will automatically download a spreadsheet with all residents for the facility section, with each row in the spreadsheet being a resident.

Unlike the answers/data exports, this export will be filtered by whatever search terms have been searched for in the table and sorted on whatever sorting columns clicked in that table.

#### **Column Definitions**

Name: The name of the resident.

**TotalCareTimeDisplay:** The TotalCareTime of the resident, displayed in hours instead of minutes.

**SystemID:** The unique database id (primary key) of the resident.

**CreatedDate:** The date and time (UTC) that the resident was created.

**CreatedBy:** The id of the user who created the resident. This will be an OR# if the record was created by a ODHS user in the admin application, or the SystemID of the user (displayed as ID- XXX) if created by an external user.

CreatedByName: The name of the user who created the resident.

**CreatedByEmail:** The email/username of the user who created the resident. Provided in case the user changes their name after creating the record.

**LastEditDate:** The date and time (UTC) that the answer was last edited. If no LastEditDate is displayed, then this answer has been created but not yet edited.

**LastEditBy:** The id of the user who last edited the resident. This will be an OR# if the record was created by a ODHS user in the admin application, or the SystemID of the user (displayed as ID- XXX) if created by an external user.

LastEditByName: The name of the user who last edited the resident?.

**LastEditByEmail:** The email/username of the user who last edited the resident. Provided in case the user changes their name after creating the record.

Status: The status of the resident. Possible statuses are:

- "New": The resident has no answers entered for any of its questions.
- "Incomplete": The resident has answers entered for some but not all of its questions.
- "Complete": The resident has answers entered for all of its questions.

**TotalCareTime:** The total amount (in minutes) of caregiving time inputted for all answers for this resident. This time is calculated for each answer by multiplying the total inputted time a task should take by the total number of inputted occurrences of the task/activity for this answer.

How much time is spent on grooming, such as nail care and brushing hair?

Time of Task		Additional Time 🔞		
0	minutes		minutes	

**FacilitySectionName:** The name of the facility section where the resident is located.

FacilityName: The name of the facility associated with the resident.

**MonShift1Time, MonShift2Time, MonShift3Time, etc.:** The total time entered for each shift for the resident across all its answers. See "Shift Time Calculations" above.

How often does this activity occur for each day/shift below? (if zero, leave empty)

	Day	Swing	NOC
Monday			

# **Appendix B**

### **Relevant OAR Guidance for ADLs:**

ODHS Aging and People with Disabilities and Developmental Disabilities – Chapter 411:

**Division 54 Residential Care and Assisted Living Facilities** 

**Division 57 Endorsed Memory Care Communities**