

OASIS ITEM	
<p>(M1800) Grooming: Current ability to tend safely to personal hygiene needs (i.e., washing face and hands, hair care, shaving or make up, teeth or denture care, fingernail care).</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0 - Able to groom self unaided, with or without the use of assistive devices or adapted methods. <input type="checkbox"/> 1 - Grooming utensils must be placed within reach before able to complete grooming activities. <input type="checkbox"/> 2 - Someone must assist the patient to groom self. <input type="checkbox"/> 3 - Patient depends entirely upon someone else for grooming needs. 	
ITEM INTENT	
<p>Identifies the patient's ability to tend to personal hygiene needs, excluding bathing, shampooing hair, and toileting hygiene.</p> <p>The intent of the item is to identify the patient's ABILITY, not necessarily actual performance. "Willingness" and "compliance" are not the focus of these items. These items address the patient's ability to safely perform grooming, given the current physical and mental/emotional/cognitive status, activities permitted, and environment. The patient must be viewed from a holistic perspective in assessing ability to perform ADLs. Ability can be temporarily or permanently limited by:</p> <ul style="list-style-type: none"> - physical impairments (e.g., limited range of motion, impaired balance) - emotional/cognitive/behavioral impairments (e.g., memory deficits, impaired judgment, fear) - sensory impairments, (e.g., impaired vision or pain) - environmental barriers (e.g., accessing grooming aids, mirror and sink). 	
TIME POINTS ITEM(S) COMPLETED	
<p>Start of care</p> <p>Resumption of care</p> <p>Discharge from agency – not to an inpatient facility</p>	
RESPONSE—SPECIFIC INSTRUCTIONS	
<ul style="list-style-type: none"> • The patient's ability may change as the patient's condition improves or declines, as medical restrictions are imposed or lifted, or as the environment is modified. The clinician must consider what the patient is <i>able to do</i> on the day of the assessment. If ability varies over time, choose the response describing the patient's ability more than 50% of the time period under consideration. • The grooming scale presents the most independent level first, then proceeds to the most dependent. Read each response carefully to determine which one best describes what the patient is currently able to do. • Grooming includes several activities. The frequency with which selected activities are necessary (i.e., washing face and hands vs. fingernail care) must be considered in responding. Patients able to do more frequently performed activities (e.g. washing hands and face) but unable to do less frequently performed activities (trimming fingernails) should be considered to have more ability in grooming. • In cases where a patient's ability is different for various grooming tasks, select the response that best describes the patient's level of ability to perform the majority of grooming tasks. • Response 2 includes standby assistance or verbal cueing. 	
DATA SOURCES / RESOURCES	
<ul style="list-style-type: none"> • Observation/demonstration is the preferred method • Patient/caregiver interview • Physical assessment • Environmental assessment 	