



Colorado Level of Care Validation Study Tool

Items in Green indicate a skip pattern

Items in Red indicate additional directions for assessors

Activities of Daily Living (ADLs)

I. Bathing

Current ULTC 100.2 Item:

1. The ability to shower, bathe, or take sponge baths for the purpose of maintaining adequate hygiene.

- 0=The client is independent in completing the activity safely
- 1=The client requires oversight help or reminding; can bathe safely without assistance or supervision, but may not be able to get into and out of the tub alone
- 2=The client requires hands on help or line of sight standby assistance throughout bathing activities in order to maintain safety, adequate hygiene, and skin integrity
- 3=The client is dependent on others to provide a complete bath

Alternative Items Being Considered:

2. Does the participant have any difficulties with showering or bathing self (The ability to bathe self in shower or tub, including washing, rinsing, and drying self. Does not include transferring in/out of tub/shower)?

[Code for the most usual performance in the 2-day assessment period]

- Independent**- Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance**- Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance**- Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance**- Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance**- Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent**- Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted** (Provide rationale below)
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable
 - Participant refused

II. Dressing

Current ULTC 100.2 Item:

1. The ability to dress and undress as necessary. This includes the ability to put on prostheses, braces, anti-embolism hose or other assistive devices and includes fine motor coordination for buttons and zippers. Includes choice of appropriate clothing for the weather. Difficulties with a zipper or buttons at the back of a dress or blouse do not constitute a functional deficit.

- 0= The client is independent in completing activity safely.



- 1=The client can dress and undress, with or without assistive devices, but may need to be reminded or supervised to do so on some days.
- 2= The client needs significant verbal or physical assistance to complete dressing or undressing, within a reasonable amount of time.
- 3= The client is totally dependent on others for dressing and undressing

Alternative Items Being Considered:

2.A Upper Body- Does the participant have any difficulties dressing his/her upper body (The ability to remove shirt or pajama top. Includes buttoning three buttons)?

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Task attempted but not completed
 - Not applicable
 - Participant refused

2.B Lower Body- Does the participant have any difficulties dressing his/her lower body (The ability to dress and undress below the waist, including fasteners. Does not include footwear.)?

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Task attempted but not completed
 - Not applicable
 - Participant refused

2.C Footwear- Does the participant have any difficulties putting on or taking off footwear (The ability to put on and take off socks and shoes or other footwear that are appropriate for safe mobility)?

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.



- Substantial/maximal assistance**- Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent**- Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted** (Provide rationale below)
 - Due to medical condition
 - Due to safety concerns
 - Task attempted but not completed
 - Not applicable
 - Participant refused

III. Toileting

Current ULTC 100.2 Item:

1. The ability to use the toilet, commode, bedpan or urinal. This includes transferring on/off the toilet, cleansing of self, changing of apparel, managing an ostomy or catheter and adjusting clothing.

- 0= The client is independent in completing activity safely.
- 1=The client may need minimal assistance, assistive device, or cueing with parts of the task for safety, such as clothing adjustment, changing protective garment, washing hands, wiping, and cleaning.
- 2= The client needs physical assistance or standby with toileting, including bowel/bladder training, a bowel/bladder program, catheter, ostomy care for safety, or is unable to keep self and environment clean.
- 3=The client is unable to use the toilet. The client is dependent on continual observation, total cleansing, and changing of garments and linens. This may include total care of catheter or ostomy. The client may or may not be aware of own needs.

Alternative Items Being Considered:

2.A Does the participant have any difficulties with toilet hygiene (The ability to maintain perineal hygiene, adjust clothes before and after using toilet, commode, bedpan, urinal. If managing ostomy, include wiping opening but not managing equipment)?

- Independent**- Participant completes the activity by him/herself with no assistance from helper (skip to 2.D.)
- Setup or clean-up assistance**- Helper *sets up or cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance**- Helper provides *verbal cues or touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance**- Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance**- Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent**- Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted** (Provide rationale below)
 - Due to medical condition
 - Due to safety concerns
 - Task attempted but not completed
 - Not applicable
 - Participant refused

2.B Is the participant unable to keep self clean after toileting?

- Yes No Not Applicable

2.C Is the participant unable to keep toilet environment clean?

- Yes No Not Applicable



2.D Toilet Transfer: The ability to safely get on and off a toilet or commode.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Task attempted but not completed
 - Not applicable
 - Participant refused

2.E Does the participant need assistance to manage equipment or devices related to bladder or bowel care (e.g., urinal, bedpan, indwelling catheter, intermittent cauterization, ostomy, incontinence pads/ undergarments)?

- Yes No Not Applicable

IV. Mobility

Current ULTC 100.2 Item:

1. The ability to move between locations in the individual's living environment inside and outside the home. Note: Score client's mobility without regard to use of equipment other than the use of prosthesis.

- 0=The client is independent in completing activity safely.
- 1=The client is mobile in their own home but may need assistance outside the home.
- 2=The client is not safe to ambulate or move between locations alone; needs regular cueing, stand-by assistance, or hands on assistance for safety both in the home and outside the home.
- 3=The client is dependent on others for all mobility.

Alternative Items Being Considered:

[Code for all questions in this section using the most usual performance in the past 2-days.]

2.A Does the participant primarily use a wheelchair for mobility?

- Yes No [Skip to 2.C]

Comments: _____

2.B Indicate the type of wheelchair/scooter used for this assessment:

- Manual Motorized wheelchair/scooter



2.C Select the longest distance the participant is able to walk/wheel.

[If unable to walk/wheel, select 50 feet and code accordingly in 2.D]

- Walk/wheel 150 feet (45 m):** Once standing for walking or seated in wheelchair, the ability to walk/wheel at least 150 feet (45 meters) in a corridor or similar space.
- Walk/wheel 100 feet (30 m):** Once standing for walking or seated in wheelchair, the ability to walk/wheel at least 100 feet (30 meters) in a corridor or similar space.
- Walk/wheel 50 feet (15 m) with two turns:** Once standing for walking or seated in a wheelchair, the ability to walk/wheel at least 50 feet (15 meters) and make two turns.

2.D Code the participant's level of independence for walk/wheeling the distance selected in 2.C.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up or cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues or touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.

2.E Car transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up or cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues or touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable
 - Participant refused

[If primary means of mobility is wheelchair or scooter, skip to Section V. Transfer]



2.F 1 step (curb): The ability to step over a curb or up and down one step

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable
 - Participant refused

2.G 12 steps-interior: The ability to go up and down 12 interior steps with a rail.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable
 - Participant refused

2.H Four steps-exterior: The ability to go up and down 4 exterior steps with a rail.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.



- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable
 - Participant refused

V. Transfer

Current ULTC 100.2 Item:

1. **The physical ability to move between surfaces:** from bed/chair to wheelchair, walker or standing position; the ability to get in and out of bed or usual sleeping place; the ability to use assisted devices for transfers. Note: Score client's mobility without regard to use of equipment.
 - 0=The client is independent in completing activity safely.
 - 1=The client transfers safely without assistance most of the time, but may need standby assistance for cueing or balance; occasional hands on assistance needed.
 - 2=The client transfer requires standby or hands on assistance for safety; client may bear some weight.
 - 3=The client requires total assistance for transfers and/or positioning with or without equipment.

Alternative Items Being Considered:

2. **Chair/Bed-to-Chair Transfer-** The ability to safely transfer from a chair (or wheelchair). The chairs are placed at right angles to each other.
 - Independent-** Participant completes the activity by him/herself with no assistance from helper
 - Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
 - Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
 - Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
 - Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
 - Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
 - Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable



VI. Eating

Current ULTC 100.2 Item:

- 1. The ability to eat and drink using routine or adaptive utensils.** This also includes the ability to cut, chew and swallow food. Note: If a person is fed via tube feedings or intravenously, check box 0 if they can do independently, or box 1, 2, or 3 if they require another person to assist.
- 0=The client is independent in completing activity safely.
 - 1=The client can feed self, chew and swallow foods but may need reminding to maintain adequate intake; may need food cut up; can feed self if food brought to them, with or without adaptive feeding equipment.
 - 2=The client can feed self but needs line of sight standby assistance for frequent gagging, choking, swallowing difficulty; or aspiration resulting in the need for medical intervention. The client needs reminder/assistance with adaptive feeding equipment; or must be fed some or all food by mouth by another person.
 - 3=The client must be totally fed by another person; must be fed by another person by stomach tube or venous access.

Alternative Items Being Considered:

2.A The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. This includes modified food consistency. If the individual is fed using only tube feeding and/or IV, enter "Activity Not Attempted".

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable

[If any answer was selected other than Activity Not Attempted, Skip to 2.C.]

2.B Tube feeding- That ability to manage all equipment/supplies related to obtaining nutrition.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up* or *cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues* or *touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.



- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable

2.C The ability to manage all equipment/supplies related to obtaining nutrition.

- Independent-** Participant completes the activity by him/herself with no assistance from helper
- Setup or clean-up assistance-** Helper *sets up or cleans up*; participant completes activity. Helper assists only prior to or following the activity.
- Supervision or touching assistance-** Helper provides *verbal cues or touching/steadying* assistance as participant completes activity. Assistance may be provided throughout the activity or intermittently.
- Partial/moderate assistance-** Helper does *less than half* the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.
- Substantial/maximal assistance-** Helper does *more than half* the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- Dependent-** Helper does *all* of the effort. Participant does none of the effort to complete the task.
- Activity not attempted (Provide rationale below)**
 - Due to medical condition
 - Due to safety concerns
 - Due to environmental constraints
 - Task attempted but not completed
 - Not applicable

Supervision

VI. Behaviors

Current ULTC 100.2 Item:

1. The ability to engage in safe actions and interactions and refrain from unsafe actions and interactions (Note, consider the client's inability versus unwillingness to refrain from unsafe actions and interactions).

- 0=The client demonstrates appropriate behavior; there is no concern.
- 1=The client exhibits some inappropriate behaviors but not resulting in injury to self, others and/or property. The client may require redirection. Minimal intervention is needed.
- 2=The client exhibits inappropriate behaviors that put self, others or property at risk. The client frequently requires more than verbal redirection to interrupt inappropriate behaviors
- 3=The client exhibits behaviors resulting in physical harm for self or others. The client requires extensive supervision to prevent physical harm to self or others.

Alternative Items Being Considered:

2.A Participant displays disruptive or dangerous behavioral symptoms not directed towards others, including self-injurious behaviors (e.g., hitting or scratching self, attempts to pull out IVs, pacing).

- Yes No

2.B Participant displays physical behavioral symptoms directed toward others (e.g., hitting, kicking, pushing).

- Yes No



2.C Participant displays verbal behavioral symptoms directed towards others (e.g., threatening, screaming at others).

- Yes No

VIII. Memory & Cognition

Current ULTC 100.2 Item:

1. The age appropriate ability to acquire and use information, reason, problem solve, complete tasks or communicate needs in order to care for oneself safely.
 - 0=The client demonstrates appropriate behavior; there is no concern.
 - 1=The client can make safe decisions in familiar/routine situations, but needs some help with decision making support when faced with new tasks, consistent with individual's values and goals.
 - 2=The client requires consistent and ongoing reminding and assistance with planning, or requires regular assistance with adjusting to both new and familiar routines, including regular monitoring and/or supervision, or is unable to make safe decisions, or cannot make his/her basic needs known.
 - 3=The client needs help most or all of the time.

Alternative Items Being Considered

2.A Repetition of 3 words- Ask participant, "I am going to say three words for you to remember. Please repeat the words after I have said all three. The words are: sock, blue, and bed. Now tell me the three words."

Number of words repeated by participant after first attempt:

- Three Two One None

After the participant's first attempt say: "I will repeat each of the three words with a cue and ask you about them later: sock, something to wear; blue, a color; bed, a piece of furniture." You may repeat the words up to two more times.

2.B Ask participant: "Please tell me what year it is right now." Participant's answer is:

- Correct Missed by 1 year Missed by 2 to 5 year
 Missed by more than 5 years or no answer

2.C Ask participant: "What month are we in right now?" Participant's answer is:

- Accurate within 5 days Missed by 6 days to 1 month
 Miss by more than 1 month or no answer

2.D Ask participant: "What day of the week is today?" Participant's answer is:

- Accurate Incorrect

2.E Ask participant: Let's go back to the first question. What were those three words that I asked you to repeat? If unable to remember a word, give cue (i.e., something to wear; a color; a piece of furniture) for that word.

Recalls "sock"?

- Yes, no cue required
 Yes, after cueing ("something to wear")
 No, could not recall

**2.F** Recalls “blue”?

- Yes, no cue required
- Yes, after cueing (“a color”)
- No, could not recall

2.G Recalls “bed”?

- Yes, no cue required
- Yes, after cueing (“a piece of furniture”)
- No, could not recall

2.H Does the participant have any difficulty with memory (e.g., retain relevant functional information), attention (e.g., ability to stay focused on task), problem solving, planning, organizing or judgment?

- Yes
- No [Skip to 2.N]
- Unknown [Skip to 2.N]

2.I Please describe the participant’s difficulty with memory.

- No impairment
- Mildly impaired: Demonstrates some difficulty.
- Moderately impaired: Demonstrates marked difficulty.
- Severely impaired: Demonstrates extreme difficulty.
- Unable to answer

2.J Please describe the participant’s difficulty with attention.

- No impairment
- Mildly impaired: Demonstrates some difficulty.
- Moderately impaired: Demonstrates marked difficulty.
- Severely impaired: Demonstrates extreme difficulty.
- Unable to answer

2.K Please describe the participant’s difficulty with problem solving.

- No impairment
- Mildly impaired: Demonstrates some difficulty.
- Moderately impaired: Demonstrates marked difficulty.
- Severely impaired: Demonstrates extreme difficulty.
- Unable to answer

2.L Please describe the participant’s difficulty with planning.

- No impairment
- Mildly impaired: Demonstrates some difficulty.
- Moderately impaired: Demonstrates marked difficulty.
- Severely impaired: Demonstrates extreme difficulty.
- Unable to answer

2.M Please describe the participant’s difficulty with organizing.

- No impairment
- Mildly impaired: Demonstrates some difficulty.
- Moderately impaired: Demonstrates marked difficulty.
- Severely impaired: Demonstrates extreme difficulty.
- Unable to answer



2.N Ability to make decisions regarding daily tasks, such as picking out an outfit, deciding when and what to eat, or selecting what to do throughout the day.

- No impairment
- Mildly impaired: Demonstrates some difficulty.
- Moderately impaired: Demonstrates marked difficulty.
- Severely impaired: Demonstrates extreme difficulty.
- Unable to answer

2.O Participant's ability to express ideas or wants

- Expresses complex messages without difficulty and with speech that is clear and easy to understand
- Exhibits some difficulty with expressing needs and ideas (e.g., some words or finishing thoughts) or speech is not clear
- Frequently exhibits difficulty with expressing needs and ideas
- Rarely/never expresses self or speech is very difficult to understand
- Unable to assess
- Unknown



Coding Questions, Issues, and Concerns