

## Section B Hearing, Speech, and Vision

### Intent

To document the resident's ability to hear (with assistive hearing devices, if they are used), understand, and communicate with others and whether the resident experiences visual limitations or difficulties related to diseases common in aged persons.

### Care Area Triggers

B0200, B0700, B0800 – Communication  
B1000 – Vision

### RUG IV Categories

B0100 – Special Care High  
B0700 – Reduced Physical Function

### Care Plans

Communication, Hearing Impaired  
Communication, Speech Impaired  
Visual Impairment

<b>B0100. Comatose</b>	
	<b>Persistent vegetative state/no discernible consciousness</b>
	<b>0. No</b> → Continue to B0200, Hearing
	<b>1. Yes</b> → If yes, skip to G0110, Activities of Daily Living (ADL) Assistance

**B0100. Comatose**                      **RUG – Special Care High**                      Skip item

Must have neurological diagnosis of a coma or persistent vegetative state documented by the physician.

### Comatose (Coma)

Pathological state in which neither arousal (wakefulness, alertness) nor awareness exists. The person is unresponsive and cannot be aroused; he/she does not open his/her eyes, does not speak, and does not move his/her extremities on command or in response to noxious stimuli (e.g., pain).

### Persistent Vegetative State

Sometimes residents who were comatose after an anoxic-ischemic injury (i.e., injury caused by not enough oxygen to the brain) from a cardiac arrest, head trauma, or massive stroke regain wakefulness but do not evidence any purposeful behavior or cognition. Their eyes are open and they may grunt, yawn, pick with their fingers, and have random body movements. Neurological exam shows extensive damage to both cerebral hemispheres.

### Persistent vegetative state/no discernible consciousness

**0. No:** If a diagnosis of coma or persistent vegetative state is not present during the 7-day look-back period. → Continue to B0200, Hearing

- 1. Yes:** If the record indicates that a physician, nurse practitioner or clinical nurse specialist has documented a diagnosis of coma or persistent vegetative state that is applicable during the 7-day look-back period. → If yes, skip to G0110, Functional Status

<b>B0200. Hearing</b>	
	<b>Ability to hear</b> (with hearing aid or hearing appliances, if normally used) <b>0. Adequate</b> -no difficulty in normal conversation, social interaction, listening to TV <b>1. Minimal Difficulty</b> - difficulty in some environments (e.g. when person speaks softly or setting is noisy) <b>2. Moderate Difficulty</b> - speaker has to increase volume and speak distinctly <b>3. Highly Impaired</b> - absence of useful hearing

**B0200. Hearing                      CAT - Communication**

To evaluate the resident’s ability to hear, understand, and communicate with others, with assistive devices, if used, and with environmental adjustments if necessary  
 Environmental adjustments include reducing noise by lowering the volume on televisions or radios and installing amplification devices on televisions.  
 Evaluate hearing ability after resident has hearing aid in place if used.

**Ability to hear (with hearing aid or hearing appliances, if normally used) last 7 days**

**0. Adequate**

No difficulty in normal conversation, social interaction, or listening to TV. The resident hears all normal conversational speech and telephone conversation and announcements in group activities.

**1. Minimal Difficulty**

Difficulty in some environments (when a person speaks softly or the setting is noisy). The resident hears speech at conversational levels but has difficulty hearing when not in quiet listening conditions or when not in one-on-one situations. The resident’s hearing is adequate after environmental adjustments are made, such as reducing background noise by moving to a quiet room or by lowering the volume on television or radio.

**2. Moderate Difficulty**

Speaker has to increase volume and speak distinctly. Although hearing-deficient, the resident compensates when the speaker adjusts tonal quality and speaks distinctly; or the resident can hear only when the speaker’s face is clearly visible.

**3. Highly Impaired**

Absence of useful hearing. The resident hears only some sounds and frequently fails to respond even when the speaker adjusts tonal quality, speaks distinctly, or is positioned face-to-face. There is no comprehension of conversational speech, even when the speaker makes maximum adjustments.

<b>B0300. Hearing Aid</b>	
	<b>Hearing aid or other hearing appliance used in above assessment</b> <b>0. No</b> <b>1. Yes</b>

**B0300. Hearing Aid**

**Hearing aid or other hearing appliance used in above 7-day assessment**

- 0. No    1. Yes**

<b>B0600. Speech Clarity</b>	
	<b>Select best description of speech pattern</b> <b>0. Clear Speech-</b> distinct, intelligible words <b>1. Unclear Speech-</b> slurred, mumbled words <b>2. No Speech-</b> absence of spoken words

### **B0600. Speech Clarity**

Quality of resident's speech, not the content or appropriateness-just words spoken

- 0. Clear Speech** Distinct, intelligible words.
- 1. Unclear Speech** Slurred or mumbled words.
- 2. No Speech** Absence of spoken words

<b>B0700. Makes Self Understood</b>	
	<b>Ability to express ideas and wants –</b> Consider both verbal and non-verbal expression <b>0. Understood</b> <b>1. Usually Understood-</b> difficulty communicating some words or finishing thoughts BUT is able if prompted or given time <b>2. Sometimes Understood-</b> ability is limited to making concrete requests <b>3. Rarely/Never Understood</b>

### **B0700. Makes Self Understood CAT – Communication RUG – Reduced Physical Function**

Able to express or communicate requests, needs, opinions, and to conduct social conversation in his or her primary language, whether in speech, writing, sign language, gestures, or a combination of these. Deficits in ability to make one's self understood (expressive communication deficits) can include reduced voice volume and difficulty in producing sounds, or difficulty in finding the right word, making sentences, writing, and/or gesturing.

**Ability to express ideas and wants** Consider both verbal and non-verbal expression.

- 0. Understood** - Resident expresses requests and ideas clearly.
- 1. Usually Understood** - Resident has difficulty communicating some words or finishing thoughts but is able if prompted or given time. He or she may have delayed responses or may require some prompting to make self understood.
- 2. Sometimes Understood** - Ability is limited to making concrete requests regarding at least basic needs such as food, drink, sleep, toilet.
- 3. Rarely/Never Understood** - At best, understanding is limited to staff interpretation of highly individual, resident-specific sounds or body language.

<b>B0800. Ability To Understand Others</b>	
	<p><b>Understanding verbal content</b>, however able (with hearing aid or device if used)</p> <p><b>0. Understands</b>-clear comprehension</p> <p><b>1. Usually Understands</b>- misses some part/intent of message BUT comprehends most conversation</p> <p><b>2. Sometimes Understands</b>-responds adequately to simple, direct communication only</p> <p><b>3. Rarely/Never Understands</b></p>

**B0800. Ability to Understand Others**

**CAT - Communication**

Assess in the resident’s preferred language. If the resident uses a hearing aid, hearing device or other communications enhancement device, the resident should use that device during the evaluation of the resident’s understanding of person-to-person communication. Interact with the resident and observe his or her understanding of other’s communication.

**Understanding verbal content**, however able (with hearing aid or device if used)

**0. Understands**

Clear comprehension. Clearly comprehends the speaker and demonstrates comprehension by words or actions.

**1. Usually Understands**

**CAT – Cognitive Impairment/Dementia**

Misses some part/intent of message BUT comprehends most conversation. May have periodic difficulties integrating information but generally demonstrates comprehension by responding in words or actions.

**2. Sometimes Understands**

**CAT – Cognitive Impairment/Dementia**

Responds adequately to simple, direct communication only. Demonstrates frequent difficulties integrating information. Understands better when speaker rephrases or simplifies message or uses gestures.

**3. Rarely/Never Understands**

**CAT – Cognitive Impairment/Dementia**

Demonstrates very limited ability to understand communication. Staff has difficulty determining whether or not resident comprehends messages, based on verbal and nonverbal responses.

<b>B1000. Vision</b>	
	<p><b>Ability to see in adequate light</b> (with glasses or other visual appliances)</p> <p><b>0. Adequate</b>- sees fine detail, including regular print in newspapers/ books</p> <p><b>1. Impaired</b>- sees large print, but not regular print in newspapers/books</p> <p><b>2. Moderately Impaired</b> – limited vision; not able to see newspaper headlines but can identify objects</p> <p><b>3. Highly Impaired</b>-object identification in question, but eyes appear to follow objects</p> <p><b>4. Severely Impaired</b>-no vision or sees only light, colors, or shapes; eyes do not appear to follow objects</p>

**B1000. Vision**

**CAT – Visual Function**

Ability to see in adequate light and glasses if used. Assumes adequate lighting and assistance of visual appliances, if used.

Ask resident to look at regular-sized print in a book or newspaper with whatever visual appliance he normally uses for close vision (glasses, magnifying glass).

Ask resident to read aloud, starting with larger headlines and ending with the finest, smallest print.

If resident is unable to communicate or follow directions, observe resident’s eye movements to see if his eyes seem to follow movement and objects.

**Ability to see in adequate light** (with glasses or other visual appliances)

**0. Adequate** Sees fine detail, including regular print in newspapers/ books

**1. Impaired** Sees large print, but not regular print in newspapers/books

**2. Moderately Impaired**

Limited vision; not able to see newspaper headlines but can identify objects

**3. Highly Impaired** Object identification in question, but eyes appear to follow objects

**4. Severely Impaired**

No vision or sees only light, colors, or shapes; eyes do not appear to follow objects

<b>B1200. Corrective Lenses</b>	
	<b>Corrective lenses (Contact, glasses, or magnifying glass) used in above assessment</b>
	<b>0. No</b>
	<b>1. Yes</b>

**B1200. Corrective Lenses**

**Corrective lenses (Contact, glasses, or magnifying glass) used in above 5 day assessment**

**0. No 1. Yes**

Copyright © 2016 *LTCS* Books, Inc. All rights reserved. [www.LTCSBooks.com](http://www.LTCSBooks.com)