

## Resource Utilisation Groups- Activities of Daily Living Definitions

Instructions: Assess RUG-ADL at the following intervals

**Episode start** = Assess RUG-ADL at admission to the service. Record the score as soon as possible after admission (within 24hrs).

**Phase Change** = Assess RUG-ADL when a patient/client condition changes and the phase of care changes. However this assessment is useful if completed every 24hrs as there are times when a patient/client functioning changes without the phase changing. For example patient/client may become increasingly physically dependant without the phase changing.

**Episode end** = When the patient/client is separated from service due to death, discharge or transfer. When the patient/client is deceased leave the scores blank.

RUG -ADL Item	Score	Definition
<b>BED MOBILITY</b>		<b>Ability to move in bed after the transfer into bed has been completed.</b>
Independent or supervision only	1	Able to readjust position in bed, and perform own pressure area relief, through spontaneous movement around bed or with prompting from carer. No hands-on assistance required. May be independent with the use of a device.
Limited physical assistance	3	Able to readjust position in bed, and perform own pressure area relief, with the assistance of one person.
Other than two persons physical assist	4	Requires the use of a hoist or other assistive device to readjust position in bed and provide pressure relief. Still requires the assistance of one person for task.
Two or more persons physical assist	5	Requires 2 or more assistants to readjust position in bed, and perform pressure area relief.
<b>TOILETING</b>		<b>Includes mobilising to the toilet, adjustment of clothing before and after toileting and maintaining perineal hygiene without the incidence of incontinence or soiling of clothes. If level of assistance differs between voiding and bowel movement, record the lower performance.</b>
Independent or supervision only	1	Able to mobilise to toilet, adjusts clothing, cleans self, has no incontinence or soiling of clothing. All tasks are performed independently or with prompting from carer. No hands-on assistance required. May be independent with the use of a device.
Limited physical assistance	3	Requires hands-on assistance of one person for one or more of the tasks.
Other than two persons physical assist	4	Requires the use of a catheter/uridome/urinal and/or colostomy/bedpan/commode chair and/or insertion of enema/suppository. Requires assistance of one person for management of the device.
Two or more persons physical assist	5	Requires two or more assistants to perform any step of the task.
<b>TRANSFER</b>		<b>Includes the transfer in and out of bed, bed to chair, in and out of shower/tub. Record the lowest performance of the day/night.</b>
Independent or supervision only	1	Able to perform all transfers independently or with prompting of carer. No hands-on assistance required. May be independent with the use of a device.
Limited physical assistance	3	Requires hands-on assistance of one person to perform any transfer of the day/night.
Other than two persons physical assist	4	Requires use of a device for any of the transfers performed in the day/night. Requires only one person plus a device to perform the task.
Two or more persons physical assist	5	Requires 2 or more assistants to perform any transfer of the day/night.
<b>EATING</b>		<b>Includes the tasks of cutting food, bringing food to mouth and chewing and swallowing food. Does not include preparation of the meal.</b>
Independent or supervision only	1	Able to cut, chew and swallow food, independently or with supervision, once meal has been presented in the customary fashion. No hands-on assistance required. If individual relies on parenteral or gastrostomy feeding that he/she administers him/herself then Score 1.
Limited assistance	2	Requires hands on assistance of one person to set up or assist in bringing food to the mouth and/or requires food to be modified (soft or staged diet).
Extensive assistance/ total dependence/ tube fed	3	Person needs to be fed meal by assistant, or the individual does not eat or drink full meals by mouth but relies on parenteral/ gastrostomy feeding and does not administer feeds by him/herself.

### Triggers:

1. This assessment may be used to describe acuity and may be used to justify additional staffing.
2. In a community service a high (16-18) RUG-ADL may trigger a referral for a hospital bed or aged care facility placement.
3. RUG-ADL assessment changes may trigger Occupational Therapy assessment or increased equipment in the community or inpatient setting

**References:** Eagar, K., Gordon, R., Green, J., & Smith, M. (2004). An Australian casemix classification for palliative care: lessons and policy implications of a national study. *Palliative Medicine*, 18, 227-233.