

Inpatient Rehabilitation Facilities Quality Reporting Program Provider Training



Section C: Cognitive Patterns

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Today's Presenter



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Section C: Objectives

- Illustrate a working knowledge of Section C: Cognitive Patterns.
- Articulate the intent of Section C.
- Demonstrate application of the BIMS with a partner.
- Interpret the coding options for each new item and when they would be applied.
- Apply coding instructions in order to accurately code practice scenarios.

Section C: New Items

- All items in Section C are **new**.
 - **C0100**, Should Brief Interview for Mental Status Be Conducted?
 - **C0200–C0500**, Brief Interview for Mental Status (BIMS).
 - **C0600**, Should Staff Assessment for Mental Status Be Conducted?
 - **C0900**, Memory/Recall Ability.
- Section C is assessed on admission.

Section C: Intent

Determine the patient's:

- Attention.
- Orientation.
- Ability to register and recall new information.

Section C: Accuracy & Reliability

- Structured cognitive test is more accurate and reliable than observation alone.
- Prevents mislabeling based on appearance or assumed diagnosis.
- Provides insight into the patient's current condition that will enhance good care.
- Assists in identifying needed supports.

C0100

Should Brief Interview for Mental Status (BIMS) Be Conducted?

C0100 Item Rationale

- Identifies if the interview will be attempted.
- The BIMS is a structured cognitive interview.
- Most patients are able to attempt the interview.

C0100. Should Brief Interview for Mental Status (C0200-C0500) be conducted? (3-day assessment period)
Attempt to conduct interview with all patients.

C0100. Should Brief Interview for Mental Status (C0200-C0500) be conducted? (3-day assessment period)

Attempt to conduct interview with all patients.

Enter Code

☐

0. **No** (patient is rarely/never understood) → *Skip to C0900. Memory/Recall Ability*
1. **Yes** → *Continue to C0200. Repetition of Three Words*

C0100 Steps for Assessment

1. Determine if the patient is rarely/never understood verbally or in writing.
 - If rarely/never understood, skip to **C0900**, Memory/Recall Ability.
2. Make every effort to provide an interpreter if needed.

C0100 Coding Instructions

- Code whether the cognitive interview should be attempted with the patient.

C0100. Should Brief Interview for Mental Status be Attempted? (3-day assessment period)	
Attempt to conduct interview with all patients.	
Enter Code <input type="checkbox"/>	<div>0. No (patient is rarely/never understood) → Skip to C0900. Memory/Recall Ability</div> <div>1. Yes → Continue to C0200. Repetition of Three Words</div>

0. No (patient is rarely/never understood) → Skip to C0900. Memory/Recall Ability
1. Yes → Continue to C0200. Repetition of Three Words

C0100 Coding Tips

- If it is not possible for a needed interpreter to participate on the day of the interview, code C0100=0 to indicate interview was not attempted.
- Complete **C0900**, Staff Assessment of Mental Status, instead.
- Includes patients who use American Sign Language (ASL).

C0200–C0500

Brief Interview for Mental Status (BIMS)

C0200–C0500 Item Rationale

- Decreases the chance of incorrect labeling of cognitive ability and improves detection of delirium.
- Misdiagnosis may result in appropriate communication techniques, worthwhile activities, and therapies not being offered.
- Awareness of possible impairment may be important for maintaining a safe environment and providing safe discharge planning.

C0200–C0500 Item Rationale (cont.)

- Cognitively intact patients may appear to be cognitively impaired because of:
 - Extreme frailty.
 - Hearing impairment.
 - Lack of social interaction.
- Some patients may appear to be more cognitively intact than they actually are.

C0200–C0500 Item Rationale (cont.)

- Provides a direct understanding of patient function that may:
 - Enhance future communication and assistance.
 - Direct nursing interventions to facilitate greater independence.

Structure of the BIMS

- Consists of three components:
 - **C0200**, Repetition of Three Words.
 - **C0300**, Temporal Orientation.
 - **C0400**, Recall.
- Results are compiled into a Summary Score.

Basic Interview Instructions for the BIMS

1. Interview any patient not screened out by item C0100.
2. Conduct the interview in a private setting.
3. Be sure the patient can hear you.
4. Sit so that the patient can see your face.
5. Give an introduction before starting the interview.

Basic Interview Instructions for the BIMS (cont.)

6. If the patient expresses concern, he or she may be more comfortable if you reply:
 - “We ask these questions of everyone so we can make sure that our care will meet your needs.”
7. Conduct the interview in one sitting and in the order provided.
8. If the patient chooses not to answer a particular item, accept his or her refusal, and move on to the next questions.

Stopping the Interview

- Stop the interview if necessary.
- Stop the interview after completing (C0300C) “Day of the Week” if:
 - All responses nonsensical.
 - No verbal or written response to any of the questions up to this point.
 - No verbal or written response to some questions and nonsensical responses to other questions.

Stopping the Interview (cont.)

If the interview is stopped, do the following:

1. **Code “-” (dash)** in C0400A, C0400B, and C0400C.
2. **Code 99** in the summary score in C0500.
3. **Code 1, yes**, in C0600, Should the Staff Assessment for Mental Status (C0900) Be Conducted?
4. Complete the Staff Assessment for Mental Status.

The BIMS in Writing

- If the patient's primary method of communication is in written format, the BIMS can be administered in writing.
- The administration of the BIMS in writing should be limited to this circumstance.

C0200–C0500 Coding Tips

- Nonsensical responses should be coded as zero.

DEFINITION:

ONSENSICAL RESPONSE

Any response that is unrelated, incomprehensible, or incoherent; it is not informative with respect to the item being rated.

C0200–C0500 Examples of Incorrect and Nonsensical Responses (1)

- Interviewer asks patient to state the year.
- The patient replies that it is 1935.
- This answer is incorrect but related to the question.

Coding: This answer is coded **0, incorrect**, but would NOT be considered a nonsensical response.

Rationale: The answer is wrong, but it is logical and relates to the question.

C0200–C0500 Examples of Incorrect and Nonsensical Responses (2)

- Interviewer asks patient to state the year.
- The patient says, “Oh what difference does the year make when you’re as old as I am?”
- The interviewer asks the patient to try to name the year, and the patient shrugs.

Coding: This answer is coded **0, incorrect**, but would NOT be considered a nonsensical response.

Rationale: The answer is wrong because refusal is considered a wrong answer, but the patient’s comment is logical and clearly relates to the question.

C0200–C0500 Examples of Incorrect and Nonsensical Responses (3)

- Interviewer asks the patient to name the day of the week.
- Patient answers, “Sylvia, she’s my daughter.”

Coding: The answer is coded **0, incorrect**; the response is illogical and nonsensical.

Rationale: The answer is wrong, and the patient’s comment clearly does not relate to the question. It is nonsensical.



BIMS Video



C0200

Repetition of Three Words

C0200 Item Rationale

- Ask patient to repeat three words:
 - Sock.
 - Blue.
 - Bed.
- The inability to repeat three words on first attempt may indicate:
 - Memory impairment.
 - Hearing impairment.
 - Language barrier.
 - Inattention that may be a sign of delirium.

C0200 Steps for Assessment

1. Ask the question exactly as written.
2. Immediately prompt for a response.
3. If the patient repeats all three words correctly on the first attempt:
 - Reinforce recall by repeating the words with category cues.
 - This reinforcement is essential to evaluate the patient's ability to recall later in the interview.
 - Code the response.
 - Move on to the next interview question (C0300).

C0200 Steps for Assessment (cont.)

4. If the patient recalled two or fewer words on the first attempt:
 - Make a second attempt using category cues.
 - Prompt using category cues.
5. If the patient does not recall all the words on the second attempt:
 - Make a third attempt.
 - Repeat the words and use cues.



Category Cue

- A phrase that puts a word in context.
 - Helps prompt patient's recall ability.
 - Stimulates learning.
 - Fosters memory even among patients able to repeat the words immediately.
- Cues for C0200 are:
 - For sock: something to wear.
 - For blue: a color.
 - For bed: a piece of furniture.
- May be provided verbally or in writing.

C0200 Steps for Assessment (cont.)

6. If the patient does not repeat all three words after three attempts:
- Re-assess ability to hear.
 - If the patient can hear, move on to the next question.
 - If the patient is unable to hear, attempt to maximize hearing before proceeding.

C0200 Assessment Guidelines

- Words may be recalled in any order and in any context.
 - Repeating words in a sentence counts as repeating the words.
- Score the number of words repeated on the first attempt only.
 - Do not score the number of repeated words on the second or third attempt.
 - Do not record the number of attempts that the patient needed to complete.

C0200 Assessment Guidelines (cont.)

- If the interviewer cannot say words clearly, have another staff member conduct the interview.
- The BIMS may be conducted in writing, in limited circumstances.
- Consult Section C of the IRF-PAI Manual for guidance.

C0200 Coding Instructions

Record the maximum number of words that the patient correctly repeated on the **first attempt only**.

C0200. Repetition of Three Words	
Enter Code <input type="checkbox"/>	<p>Ask patient: "I am going to say three words for you to remember. Please repeat them and bed. Now tell me the three words."</p> <p>Number of words repeated by patient after first attempt:</p> <ul style="list-style-type: none">3. Three2. Two1. One0. None <p>After the patient'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.</p>
	<p>Number of words repeated by patient after first attempt:</p> <ul style="list-style-type: none">3. Three2. Two1. One0. None

C0200 Practice Coding Scenario (1)

- **Interviewer:** “The words are sock, blue, and bed. Now please tell me the three words.”
- **Patient:** “Bed, sock, and blue.”
- **Interviewer:** Repeats the three words with category cues by saying, “That’s right, the words are sock, something to wear; blue, a color; and bed, a piece of furniture.”

C0200 Practice Coding Scenario (2)

- **Interviewer:** “The words are sock, blue, and bed. Now please tell me the three words.”
- **Patient:** “Sock, bed, black.”
- **Interviewer:** Repeats the three words plus the category cues, “Let me say the three words again. They are sock, something to wear; blue, a color; and bed, a piece of furniture. Now tell me the three words.”
- **Patient:** “Oh yes, that’s right, sock, blue, bed.”

C0200 Practice

Coding Scenario (3)

- **Interviewer:** “The words are sock, blue, and bed. Now please tell me the three words.”
- **Patient:** “Blue socks belong in the dresser.”
- **Interviewer:** Repeats the three words plus the category cues.

C0300

Temporal Orientation:
Year, Month, Day

C0300 Item Rationale

- A lack of temporal orientation may:
 - Lead to decreased communication or participation in activities.
 - Be frustrating or frightening.
- Staff can provide reorientation aids and verbal reminders that may reduce anxiety.

C0300 Item Rationale (cont.)

- Reorienting those who are disoriented or at risk of disorientation may be useful in treating symptoms of delirium.
- Patients who are not oriented may need further assessment for delirium, especially if this fluctuates or is recent in onset.

C0300 Definition

DEFINITION:

TEMPORAL ORIENTATION

In general, the ability to place oneself in correct time. For the BIMS, it is the ability to indicate the correct date in current surroundings.

C0300 Steps for Assessment

1. Ask each of the three questions one at a time.
 - C0300A: Current year.
 - C0300B: Current month.
 - C0300C: Day of the week.
2. Allow up to 30 seconds for a response.
3. Do not provide clues.
4. If patients specifically ask for clues, tell them you need to know if they can answer without any assistance.

C0300A Coding: Year

- Assess ability to report the correct year.
- **Code 0** if the patient does not answer.

C0300. Temporal Orientation: Year, Month, Day	
Enter Code <input type="checkbox"/>	A. Ask patient: "Please tell me what year it is right now." Patient's answer is: 3. Correct 2. Missed by 1 year 1. Missed by 2 to 5 years 0. Missed by more than 5 years or no answer
Enter Code <input type="checkbox"/>	B. Ask patient: "What month are we in right now?" Patient's answer is: 2. Accurate within 5 days 1. Missed by 6 days to 1 month 0. Missed by more than 1 month or no answer
Enter Code <input type="checkbox"/>	C. Ask patient: "What day of the week is today?" Patient's answer is: 1. Correct 0. Incorrect or no answer

A. Ask patient: "Please tell me what year it is right now."
Patient's answer is:
3. **Correct**
2. Missed by 1 year
1. Missed by 2 to 5 years
0. Missed by more than 5 years or no answer

C0300A Practice Coding Scenario

Date of interview is April 1, 2016.

- **Patient:** “’16.”
- **Interviewer:** “Can you tell me the full year?”
- **Patient:** “’16.”
- **Interviewer:** “Can you tell me the full year, for example, nineteen-eighty-two.”
- **Patient:** “2016.”

C0300B Coding: Month

- Assess ability to report the correct month.
- Count the current day as day 1.

C0300. Temporal Orientation: Year, Month, Day

Enter Code <input type="checkbox"/>	A. Ask patient: "Please tell me what year it is right now?" Patient's answer is: 3. Correct 2. Missed by 1 year 1. Missed by 2 to 5 years 0. Missed by more than 5 years or no answer
Enter Code <input type="checkbox"/>	B. Ask patient: "What month are we in right now?" Patient's answer is: 2. Accurate within 5 days 1. Missed by 6 days to 1 month 0. Missed by more than 1 month or no answer
Enter Code <input type="checkbox"/>	C. Ask patient: "What day of the week is today?" Patient's answer is: 1. Correct 0. Incorrect or no answer

B. Ask patient: "What month are we in right now?"

Patient's answer is:

2. Accurate within 5 days

1. Missed by 6 days to 1 month

0. Missed by more than 1 month or no answer

C0300B Coding Tips

- Write the patient's response in the margin and go back later to count days if you are unsure whether the date given is within 5 days.

C0300B Practice Coding Scenario

- Date of interview is June 2, 2016.
- The patient states that it is May.



C0300C Coding: Day

- Assess the patient's ability to report the correct day of the week.

C0300. Temporal Orientation: Year, Month, Day	
Enter Code <input type="checkbox"/>	A. Ask patient: "Please tell me what year it is." Patient's answer is: 3. Correct 2. Missed by 1 year 1. Missed by 2 to 5 years 0. Missed by more than 5 years or no answer
Enter Code <input type="checkbox"/>	B. Ask patient: "What month are we in right now?" Patient's answer is: 2. Accurate within 5 days 1. Missed by 6 days to 1 month 0. Missed by more than 1 month or no answer
Enter Code <input type="checkbox"/>	C. Ask patient: "What day of the week is today?" Patient's answer is: 1. Correct 0. Incorrect or no answer

C. Ask patient: "What day of the week is today?"
 Patient's answer is:
 1. Correct
 0. Incorrect or no answer

C0300C Practice Coding Scenario

- Date of interview is Monday, June 27, 2016.
- The patient states that it is “Tuesday.”

C0400

Recall

C0400 Item Rationale

- Patients with cognitive impairment can be helped to recall if provided cues.
- Providing memory cues can:
 - Maximize individual function.
 - Decrease frustration for those patients who respond.

C0400 Steps for Assessment

1. Ask the patient to repeat the words from the earlier question.
 - Read question as it appears on the IRF-PAI.
2. Allow up to 5 seconds for spontaneous recall of each word.
3. Provide category cues for any word not correctly recalled after 5 seconds.
4. Use category cues only after patient is unable to recall one or more words.
5. Allow up to 5 seconds after category cue for recall.

C0400 Assessment Guidelines

- Each word is coded separately.
 - C0400A is Sock.
 - C0400B is Blue.
 - C0400C is Bed.
- Recall without cueing:
 - Patient names the item on the first attempt.
 - Patient may list other items in the same category.
 - Interviewer does not provide cues.
- Recall with cueing:
 - Interviewer must give a cue.
 - Patient says the item in a list of other terms.

C0400 Coding Instructions

- **Code 2, Yes, no cue required:**
 - Correctly remembers the word without cueing.
- **Code 1, Yes, after cueing:**
 - Requires category cue to remember the word.
- **Code 0, No, could not recall:**
 - Cannot recall the word even after cueing.
 - Responds with a nonsensical answer.
 - Chooses not to answer the item.

C0400 Coding Tips

- If on the first try (without cueing), the patient names multiple items in a category, one of which is correct, they should be coded as **correct** for that item.
- If interviewer gives patient the cue and patient then names multiple items in that category, code as **could not recall**, even if the correct item was in the list.

C0400 Coding Scenario

- **Patient:** “Socks, shoes, bed.”
- **Interviewer:** “One word was a color.”
- **Patient:** “Oh, the shoes were blue.”

How would you code C0400?

C0400. Recall	
Enter Code <input type="checkbox"/>	<p>Ask patient: <i>"Let's go back to the first question. What were those three words that I asked you to repeat?"</i> If unable to remember a word, give cue (i.e., something to wear; a color; a piece of furniture) for that word.</p> <p>A. Recalls "sock?"</p> <ul style="list-style-type: none">2. Yes, no cue required1. Yes, after cueing ("something to wear")0. No, could not recall
Enter Code <input type="checkbox"/>	<p>B. Recalls "blue?"</p> <ul style="list-style-type: none">2. Yes, no cue required1. Yes, after cueing ("a color")0. No, could not recall
Enter Code <input type="checkbox"/>	<p>C. Recalls "bed?"</p> <ul style="list-style-type: none">2. Yes, no cue required1. Yes, after cueing ("a piece of furniture")0. No, could not recall

C0400 Practice Coding Scenario

The patient is asked to recall the three words.

- **Patient:** “I don’t remember.”
- **Interviewer:** “One word was something to wear.”
- **Patient:** “Clothes.”
- **Interviewer:** “OK, one word was a color.”
- **Patient:** “Blue.”
- **Interviewer:** “OK, the last word was a piece of furniture.”
- **Patient:** “Couch.”

C0500

BIMS Summary Score

C0500 Item Rationale

- Decreases the chance of incorrect labeling of cognitive ability.
- Improves detection of delirium.
- Provides staff with a more reliable estimate of patient function.
- Allows staff interactions with patients that are based on patient ability.

C0500 Item Rationale (cont.)

- The BIMS is a brief screener that aids in detecting cognitive impairment. It does not assess all possible aspects of cognitive impairment.
- The final determination of the level of impairment should be made by the patient's physician or mental health care specialist; however, these practitioners can be provided specific BIMS results and the following guidance.

C0500 Item Rationale (cont.)

- The BIMS total score is highly correlated with Mini-Mental State Exam (MMSE; Folstein, Folstein, & McHugh, 1975) scores. Scores from a carefully conducted BIMS assessment where patients can hear all questions and the patient is not delirious suggest the following distributions:
 - 13–15: cognitively intact.
 - 08–12: moderate impairment.
 - 00–07: severe impairment.

C0500 Item Rationale (cont.)

Abrupt changes in cognitive status (as indicative of a delirium) often signal an underlying potentially life-threatening illness, and a change in cognition may be the only indication of an underlying problem.



C0500 Steps for Assessment

After completing C0200–C0400:

- Add up the values for all BIMS questions.
- Lowest possible summary score is **00**.
- Maximum possible summary score is **15**.

C0500. BIMS Summary Score

Enter Score

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Add scores for questions C0200-C0400 and fill in total score (00-15)

Enter 99 if the patient was unable to complete the interview

C0500 Assessment Guidelines

- Do not add up the total score while you are interviewing the patient.
- Focus your full attention on the interview.
- Apply the guidelines for determining if the interview is complete or incomplete.
- Total score reflects cognitive status.
 - 13–15 Cognitively Intact.
 - 08–12 Moderate Impairment.
 - 00–07 Severe Impairment.



C0500 Coding Instructions

- Code the total score as a two-digit number.
- Include leading zero (0) for scores less than **10**.
- The score will range from **00** to **15**.
- **Code 99** if unable to complete the interview.
- A zero score does not mean the interview was incomplete.

C0500 Coding Tips

- Occasionally, a patient can communicate but chooses not to participate in the BIMS and therefore does not attempt any of the items in the section.
- This would be considered an incomplete interview; enter code 99 for **C0500**, Summary Score, and complete the staff assessment of mental status.



C0500 Practice Coding Scenario

The patient's scores on items C0200–C0400 were as follows:

• C0200 (repetition)	3
• C0300A (year)	2
• C0300B (month)	2
• C0300C (day)	1
• C0400A (recall “sock”)	2
• C0400B (recall “blue”)	2
• C0400C (recall “bed”)	0

BIMS Completion Guidelines

- For the BIMS to be complete:
 - Patient has to attempt to answer at least four of the items in C0200 through C0400.
 - The answers have to be relevant.
 - To be relevant, a response **only** has to be **related** to the question (logical).
 - Responses do **not** have to be correct.
- A score of zero (**00**) does not mean the BIMS is incomplete.



What Constitutes an Incomplete Interview?

- Patient can communicate but chooses not to participate in the BIMS.
- Patient gives a nonsensical response to four or more items in C0200–C0400.
- An incorrect but relevant answer is not a nonsensical response or no answer.

Incomplete Interview Guidelines

- Conduct C0200 and C0300 with all patients attempting the interview.
- Stop the interview after C0300 if the patient:
 - Refuses to answer.
 - Provides nonsensical responses to **all items** in C0200 and C0300.

Incomplete Interview Coding Instructions (cont.)

- If the interview is finished (attempt C0400) but incomplete:
 - Code any relevant response(s) as appropriate.
 - Code all nonsensical responses or no answer as **0**.
 - Code **C0500**, Summary Score, as **99** to indicate an incomplete interview.
- Complete the Staff Assessment for Mental Status.

Role Play:

Practice Administering the BIMS

BIMS Role Play Instructions

1. Work with the participant to your right.
2. Scripts will be provided to each pairing.
3. Read over your script but do not share with your partner.
4. Participant with script 1 will role play the patient being interviewed. Participant with script 2 will role play staff administering the BIMS interview.
5. Spend 10 minutes coding the BIMS.
6. Switch roles after you complete the first BIMS.
7. Be prepared to share your experience.

Role Play: Debrief

BIMS Video

Visit the CMS YouTube Channel to view the BIMS video and other videos about interviewing techniques:

- <https://www.youtube.com/watch?v=DAj3TA5w11Y>

C0600

Should the Staff
Assessment for Mental
Status Be Conducted?

C0600 Item Rationale

- Mental status can vary among persons unable to communicate or who do not complete the interview.
- Must observe the behavior of patients unable to complete the BIMS.
- Incorrect diagnosis or missed impairment may prevent appropriate communication, activities, and therapies from being offered.
- Abrupt changes in cognitive status often signal an underlying potentially life-threatening illness, and a change in cognition may be the only indication of an underlying problem.

C0600 Steps for Assessment

- Review the C0500 Summary Score.
- Determine if the BIMS was completed successfully or was incomplete.
- Conduct the Staff Assessment only if the Summary Score is **99**.
- A score of **99** indicates the BIMS could not be completed.

C0600 Coding Instructions

- **Code 0, No.**
 - Interview completed.
 - Summary score equals **00–15**.
- **Code 1, Yes.**
 - Interview not completed.
 - Summary score is **99**.

C0600. Should the Staff Assessment for Patient's Ability to Complete Brief Interview for Mental Status be Conducted?	
Enter Code <input type="checkbox"/>	<div>0. No (patient was able to complete Brief Interview for Mental Status) → Skip to GG0100. Prior Functioning: Everyday Activities</div> <div>1. Yes (patient was unable to complete Brief Interview for Mental Status) → Continue to C0900. Memory/Recall Ability</div>

C0600 Coding Tips

- If a patient is scored 00 on **C0500**, BIMS Summary Score, then **C0900**, Memory/Recall Ability, should be completed.

C0900

Memory/Recall Ability

C0900 Item Rationale

An observed “memory/recall problem” may indicate:

- Cognitive impairment.
- Need for additional support with reminders to support increased independence.
- Delirium, if this represents a change from the patient’s baseline.

C0900 Steps for Assessment

1. Ask the patient about each item in C0900:
 - Is it fall, winter, spring, or summer?
 - What is the name of this place?
2. Ask the patient to show the way to his or her room.
3. Observe the patient's ability to find the way.

C0900 Steps for Assessment (cont.)

4. For patients with limited communication skills, ask direct care staff across all shifts and family or significant other about recall ability.
5. Review the medical record.
6. Observe the patient.
 - Staff across all shifts and departments.
 - Others with close contact with the patient.

C0900 Coding Instructions

- Check each item the patient recalls.
- Check **Z**, None of the above, if patient recalls none of the items listed.

C0900. Memory/Recall Ability	
↓ Check all that the patient was normally able to recall	
<input checked="" type="checkbox"/>	A. Current season
<input checked="" type="checkbox"/>	B. Location of own room
<input type="checkbox"/>	C. Staff names and faces
<input checked="" type="checkbox"/>	E. That he or she is in a hospital/hospital unit
<input type="checkbox"/>	Z. None of the above were recalled

Section C: Summary

- Try to complete the BIMS on all patients.
- Follow the instructions in the IRF-PAI manual.
- Only complete Item C0900 (Memory/Recall) if the patient refuses to answer or gives you nonsensical responses.

Section C: Action Plan

- Educate staff about the BIMS.
- Practice conducting the BIMS interviews with staff.
- Practice coding a variety of scenarios with staff.
- Review and update processes/procedures that may need to change in preparation for the implementation.
- Evaluate current documentation to ensure terminology aligns with items in the IRF-PAI v1.4.

Questions?