



Delegation of Resident Interviews During Isolation

Resident name: _____ Interviews assigned to: _____

Date interview must be completed: _____ Date completed: _____

Instructions:

- Interact with the resident using his or her preferred language.
- Be sure the resident can hear you and use cue cards as needed.
- Make certain to complete the interviews in a quiet and private way. Avoid interruptions and/or background noise, if possible.
- Ask the questions **exactly as written** and record the resident’s response.
- If the resident is hesitant, remind him or her that we ask these questions of every resident so that we can take the best care of them in the best possible way.
- If the resident chooses not to answer, accept the refusal and move on to the next question.

BIMS (Brief Interview of Mental Status)

Interview: Ask the resident: *“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.”*

Checkmark the words repeated on the first attempt (any order): **Sock** **Blue** **Bed**

After the resident’s first attempt, regardless of the resident’s response, repeat the words with the following cues:

“Sock, something to wear; blue, a color; and bed, a piece of furniture.”

You may repeat the words and cues up to two more times to help them remember the words. You will be asking them this question again towards the end of the BIMS interview.

Ask resident: *“Please tell me what year it is right now.”* **Record the response:** _____

Ask resident: *“What month are we in right now?”* **Record the response:** _____

Ask resident: *“What day of the week is today?”* **Record the response:** _____

Ask resident, *“Let’s go back to an earlier question. What were those three words I asked you to repeat?”*

If unable to remember a word, give a cue (something to wear, a color, a piece of furniture) for that word.

Checkmark the resident’s response:

Able to recall “sock”	No, could not recall	Yes, after cueing	Yes, no cue required
Able to recall “blue”	No, could not recall	Yes, after cueing	Yes, no cue required
Able to recall “bed”	No, could not recall	Yes, after cueing	Yes, no cue required

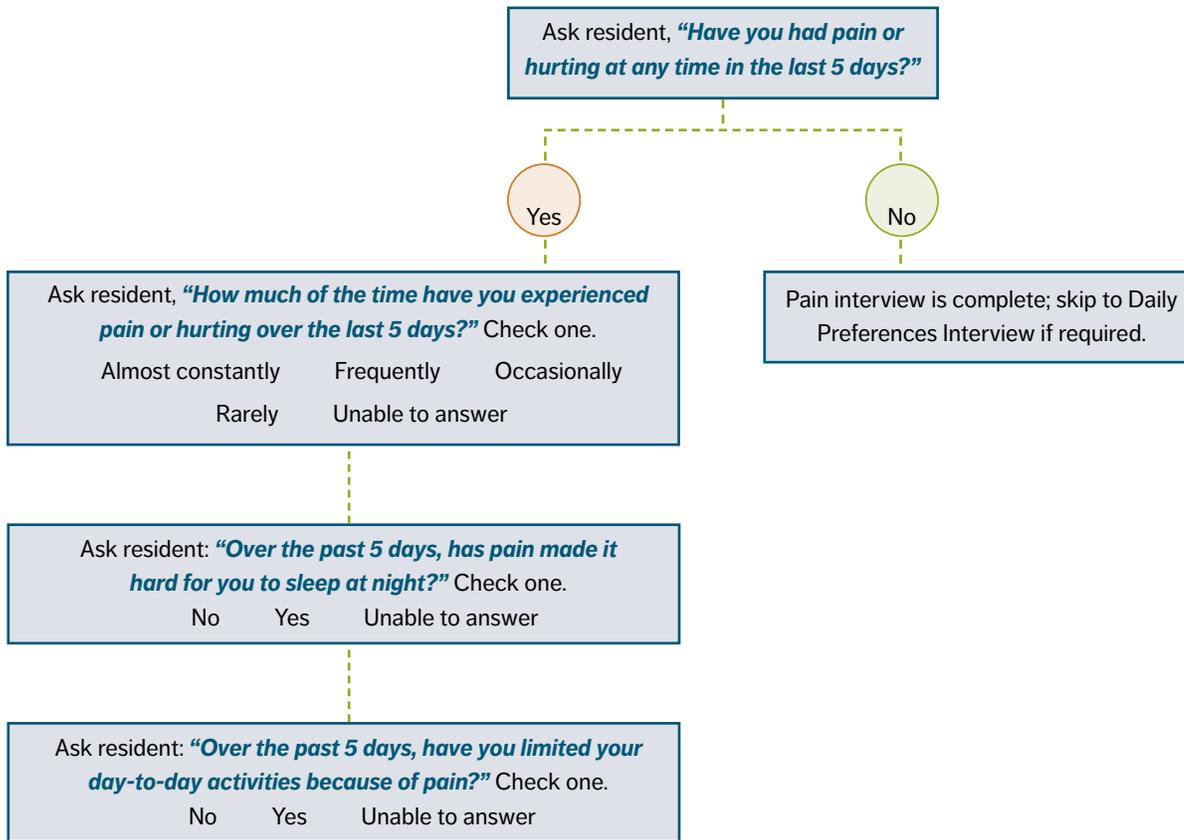
Mood Interview

Say to the resident, **“Over the last 2 weeks, have you been bothered by any of the following problems?”**

If symptom is present, then ask **“About how often have you been bothered by this?”** Read each item and use Mood Symptom Frequency cue card as needed.

Question	Checkmark Response: Yes or No	Checkmark the Frequency Response <i>(use Mood Symptom Frequency cue card)</i>
<i>“Little interest or pleasure in doing things”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Feeling down, depressed, or hopeless”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Trouble falling or staying asleep, or sleeping too much”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Feeling tired or having little energy”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Poor appetite or overeating”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Feeling bad about yourself – or that you are a failure or have let yourself or your family down”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Trouble concentrating on things, such as reading the newspaper or watching television”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Moving or speaking so slowly that other people could have noticed. Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)
<i>“Thoughts that you would be better off dead, or of hurting yourself in some way”</i>	Yes No	Never or 1 day 2-6 days (several days) 7-11 days (half or more of the days) 12-14 days (nearly every day)

Pain Interview



Using the facility's numeric or verbal pain scales, ask the resident question one below. If the resident is not able to answer the first question, then proceed to question two. Do not complete both.

1. Ask resident, **"Please rate your worst pain over the last 5 days on a zero to ten scale, with zero being no pain and ten being the worst pain you can imagine."**
Record the response: _____
OR
2. If resident could not answer the numeric pain rating, ask **"Please rate the intensity of your worst pain over the last 5 days."**
Check one Mild Moderate Severe Very severe, horrible Unable to answer

Daily Preferences Interview

Ask resident, *“While you are in this facility...”*

Coding (use Daily Preferences and Activity Preference cue card)	Select one code to indicate the resident's response	Daily Preference
<ol style="list-style-type: none"> 1. Very important 2. Somewhat important 3. Not very important 4. Not important at all 5. Important, but can't do or no choice 		“...how important is it to you to choose what clothes to wear?”
		“...how important is it to you to take care of your personal belongings or things?”
		“...how important is it to you to choose between a tub bath, shower, bed bath, or sponge bath?”
		“...how important is it to you to have snacks available between meals?”
		“...how important is it to you to choose your own bedtime?”
If no response or non-responsive, mark n/a		“...how important is it to you to have your family or a close friend involved in discussions about your care?”
		“...how important is it to you to be able to use the phone in private?”
		“...how important is it to you to have a place to lock your things to keep them safe?”

Activity Preferences Interview

Ask resident, *“While you are in this facility...”*

Coding (use Daily Preferences and Activity Preferences cue card)	Select one code to indicate the resident's response	Daily Preference
<ol style="list-style-type: none"> 1. Very important 2. Somewhat important 3. Not very important 4. Not important at all 5. Important, but can't do or no choice 		“...how important is it to you to have books, newspaper, and magazines to read?”
		“...how important is it to you to listen to music you like?”
		“...how important is it to you to be around animals such as pets?”
		“...how important is it to you to keep up with the news?”
		“...how important is it to do things with groups of people?”
		“...how important is it to you to do your favorite activities?”
If no response or non-responsive, mark n/a		“...how important is it to you to go outside and get fresh air when the weather is good?”
		“...how important is it to you to participate in religious services or practices?”

Mood Symptom Frequency Cue Card

Never or 1 day

2-6 days (several days)

7-11 days (half or more of the days)

12-14 days (nearly every day)

Daily Preferences and Activity Preferences Cue Card

1. Very important
2. Somewhat important
3. Not very important
4. Not important
5. Important, but can't do or no choice