

# B0700: Makes Self Understood

## B0700. Makes Self Understood

Enter Code

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**Ability to express ideas and wants**, consider both verbal and non-verbal expression

0. **Understood**

1. **Usually understood** - difficulty communicating some words or finishing thoughts **but** is able if prompted or given time

2. **Sometimes understood** - ability is limited to making concrete requests

3. **Rarely/never understood**

## Item Rationale

### Health-related Quality of Life

- Problems making self understood can be very frustrating for the resident and can contribute to social isolation and mood and behavior disorders.
- Unaddressed communication problems can be inappropriately mistaken for confusion or cognitive impairment.

### Planning for Care

- Ability to make self understood can be optimized by not rushing the resident, breaking longer questions into parts and waiting for reply, and maintaining eye contact (if appropriate).
- If a resident has difficulty making self understood:
  - Identify the underlying cause or causes.
  - Identify the best methods to facilitate communication for that resident.

## DEFINITION

### **MAKES SELF UNDERSTOOD**

Able to express or communicate requests, needs, opinions, and to conduct social conversation in their primary language, whether in speech, writing, sign language, gestures, or a combination of these. Deficits in the 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.

## B0700: Makes Self Understood (cont.)

### Steps for Assessment

1. Assess using the resident's preferred language or method of communication.
2. Interact with the resident. Be sure they can hear you or have access to their preferred method for communication. If the resident seems unable to communicate, offer alternatives such as writing, pointing, sign language, or using cue cards.
3. Observe their interactions with others in different settings and circumstances.
4. Consult with the primary nurse assistants (over all shifts) and the resident's family and speech-language pathologist.

### Coding Instructions

- **Code 0, understood:** if the resident expresses requests and ideas clearly.
- **Code 1, usually understood:** if the resident has difficulty communicating some words or finishing thoughts **but** is able if prompted or given time. They may have delayed responses or may require some prompting to make self understood.
- **Code 2, sometimes understood:** if the resident has limited ability but is able to express concrete requests regarding at least basic needs (e.g., food, drink, sleep, toilet).
- **Code 3, rarely or never understood:** if, at best, the resident's understanding is limited to staff interpretation of highly individual, resident-specific sounds or body language (e.g., indicated presence of pain or need to toilet).

### Coding Tips and Special Populations

- This item cannot be coded as Rarely/Never Understood if the resident completed any of the resident interviews, as the interviews are conducted during the look-back period for this item and should be factored in when determining the residents' ability to make self understood during the entire 7-day look-back period.
- While B0700 and the resident interview items are not directly dependent upon one another, inconsistencies in coding among these items should be evaluated.