

Washington Omaha System Users Group  
Procedure for systematic, standardized assessments and use of pathways  
Effective April 15, 2010

Always assess signs/symptoms, rate KBS, and use core pathways for documenting three problems for the pregnant woman/parent/caregiver population:

- Pregnancy (if pregnant)
- Postpartum (if up to 6 weeks postpartum)
- Caretaking/parenting (if parenting – may also be used during pregnancy)

(For a one time visit, only one problem needs to be assessed and documented.)

For the pregnant women/parent/caregiver population receiving 2 or more visits, assess signs/symptoms for five problems. If addressing one or more of the problems, the problem(s) signs/symptoms and KBS ratings should be documented, and core pathway(s) should be added to the careplan. This applies to all actual, potential, and health promotion problems.

- Mental health
- Abuse
- Substance use
- Income
- Health care supervision

For the pregnant women/parent/caregiver population receiving 2 or more visits, assess and use six additional problems as described for the core pathways, when addressing the problem intensively:

- Communication with community resources (e.g. when clients have difficulty accessing resources beyond the scope of the income problem)
- Interpersonal relationship (e.g. when intervening because the client is abusive or unable to maintain a relationship; or having serious relationship issues)
- Nutrition (e.g. specific nutrition needs requiring intensive intervention such as gestational diabetes or failure to thrive)
- Residence (e.g. home safety issues beyond the scope of the Caretaking/parenting problem, or homelessness issues)
- Sanitation (e.g. mold issues, homes with serious sanitation issues that threaten health)
- Family planning (e.g. clients needing specific family planning interventions beyond the scope of the health care supervision problem; family planning project)

Always assess signs/symptoms, rate KBS, and use core pathways for documenting four problems for all infants and children:

- Growth and development
- Abuse
- Neglect
- Health care supervision

Timing of KBS ratings: At least on admission and discharge, and whenever KBS ratings change. Also, agencies can specify time intervals (e.g. interval from admission date, or specified June/Dec dates)

These are core minimum standards. Agencies may elect to assess additional problems and expand on pathways.