

Long-Term Care Survey Alert

ASSESS YOUR MDS KNOWLEDGE: To Code Or Not To Code Resisting Care In E4

Whether you do so depends on this key factor.

Question: A resident with dementia refuses bathing or a medication within the MDS lookback period for Section E4 (behavioral symptoms). Would you code that as resisting care?

Answer: Yes, according to the RAI manual. Code at E4e instances where a resident resists taking medications/injections, ADL assistance or help with eating.

Next question: A cognitively intact resident refuses to take his oral chemotherapy medication, saying he's discussed the pros and cons with his alternative health practitioner and wants to come up with another plan. The resident becomes irate with the nurse who tries to discuss the risks and benefits of chemo with him. Would you code this resident as resisting care?

Answer: No. You don't code instances "where the resident has made an informed choice" not to receive care and "reacts negatively as staff try to reinstitute treatment," states the RAI manual.

Care gem: What if a resident with dementia refuses a medication? "Staff can leave the person alone for a short time--depending on the sensitivity of the medication--and return to encourage him in taking the medicine," advises survey consultant **Reta Underwood** in Buckner, KY. "A person with mild to moderate dementia oftentimes forgets that someone came in earlier and offered the medication the first time and usually agrees to take it the second time," she says.