

Long-Term Care Survey Alert

RISK MANAGEMENT: Cognitive Impairment QI On The Rise? Give Your Overall Care Approach And Environment A Check-Up

If you don't, you're setting your facility up for a survey fall.

Think of a high cognitive impairment quality indicator as a red flag signaling surveyors to take a hard look at your facility's quality of care and life. The good news is that you can also use the QI to beat them to the review.

Beware: Surveyors have now been trained to consider the relationship between cognitive decline and deficient activities programming and care practices. And the new Psychosocial outcome Severity Guide that went into effect in June "allows surveyors to assign a severity level for a deficiency based on any adverse psychosocial effects"--if they can tie them to that deficiency, cautions **Jennifer Gross, RN, BSN**, a consultant with **LTCQ Inc.** in Lexington, MA. That means you need to do your homework to figure out why a high incidence of residents became "cognitively impaired" as defined by the quality indicator over the short haul, which you wouldn't normally expect to see.

First check the MDS coding accuracy to see if the quality indicator gives a true picture of residents in your facility, suggests **Steven Littlehale, RN, MSN**, chief clinical officer for **LTCQ Inc.** in Lexington, MA.

If you believe the cognitive impairment QM/QI is accurate, take a look at your overall environment. For example, a monotonous, inflexible environment takes a toll on people's cognition and mood. After awhile, boredom becomes a chronic state of mind and people disconnect from their environment--and it's hard to engage them, cautioned **Judah Ronch, PhD**, in a recent **Centers for Medicare & Medicaid Services'** Webcast on the new Psychosocial Outcome Severity Guide.

Use it or lose it: Cognitive decline can occur if staff may have been "fostering more dependence" and providing less opportunity for the residents to "engage in the life of the facility or participate in their own care," says Gross. That type of approach could have a negative impact on cognitive functioning by promoting learned helplessness and isolation, she notes. "If what makes you sharp [mentally] is taken away from you, you may lose ground in your cognitive functioning." Also take a look at your protocols for evaluating each resident who shows signs of cognitive decline from one MDS assessment to another--or in between assessments.