

MDS Alert

Behavioral Assessment: Check Out The New And Improved Behavioral Assessment In The Draft MDS 3.0

Differentiate between behaviors that are problematic vs. those that aren't.

Behavioral Symptoms: Section E
Conditional on RUGs analysis *

E2. Behavioral Symptom--Presence & Frequency

Note presence of symptoms and their frequency in the last 5 days:

- a. Physical behavioral symptoms directed toward others (e.g., hitting, kicking, pushing, scratching, grabbing, abusing others sexually)
- b. Verbal behavioral symptoms directed toward others (e.g., threatening others, screaming at others, cursing at others)

Coding:

0. Not present in last 5 days

1. Present 1--"2 days

2. Present 3 or more days

c. Other behavioral symptoms not directed toward others (e.g., physical symptoms such as hitting or scratching self, pacing, rummaging, public sexual acts, disrobing in public, throwing or smearing food or bodily wastes, or verbal/vocal symptoms like screaming, disruptive sounds)

E3. Overall Presence of Behavioral Symptoms in the Last 5 Days

Were any behavioral symptoms in questions E2 coded 1 or 2?

0. No ? Skip to E6, Rejection of Care

1. Yes ? Considering all of E2, Behavioral Symptoms, answer E4 and E5 below

E4. Impact on Resident

Did any of the identified symptom(s):

a. Put the resident at significant risk for physical illness or injury?

0. No

1. Yes

b. Significantly interfere with the resident's care?

0. No

1. Yes

c. Significantly interfere with the resident's participation in activities or social interactions?

0. No

1. Yes

E5. Impact on Others

Did any of the identified symptom(s):

a. Put others at significant risk for physical injury?

0. No

1. Yes

b. Significantly intrude on the privacy or activity of others?

0. No

1. Yes

c. Significantly disrupt care or living environment?

0. No

1. Yes

E6. Rejection of Care--Presence & Frequency

In the last 5 days, did the resident reject evaluation or care (e.g., bloodwork, taking medications, ADL assistance) that is necessary to achieve the resident's goals for health and well-being? Do not include behaviors that have already been addressed (e.g., by discussion or care planning with the resident or family), and/or determined to be consistent with resident values, preferences, or goals.

0. No

1. Yes, present 1-2 days

2. Yes, present 3 or more days

E7. Wandering--Presence & Frequency

In the last 5 days, has the resident wandered?

0. No - Skip to E9, Change in Behavioral Symptoms

1. Yes, present 1-2 days

2. Yes, present 3 or more days

E8. Wandering--Impact

a. Does the wandering place the resident at significant risk of getting to a potentially dangerous place (e.g., stairs, outside of the facility)?

0. No

1. Yes

b. Does the wandering significantly intrude on the privacy or activities of others?

0. No

1. Yes

Source: Draft MDS 3.0 form ([www.cms.hhs.gov/Nursing Home QualityInits/Downloads/MDS30FinalReport.pdf](http://www.cms.hhs.gov/NursingHomeQualityInits/Downloads/MDS30FinalReport.pdf)). The final form may differ.