

MDS Alert

Clip And Save: Section P2 Offers Template For Mental Health Services

But before you code, check the definitions.

Reviewing Section P2 helps you identify services that surveyors might expect your facility to provide for a resident with mental health needs.

Check out the description of each of the mental health intervention programs below.

P2. Intervention Programs for Mood, Behavior, Cognitive Loss (7-day lookback)

P2a. **Special Behavior Symptom Evaluation Program** -- A program of ongoing, comprehensive, interdisciplinary evaluation of behavioral symptoms (such as the symptoms described in Item E4).

The purpose of such a program is to attempt to understand the "meaning" behind the resident's behavioral symptoms in relation to the resident's health and functional status, and social and physical environment. The ultimate goal of the evaluation is to develop and implement a plan of care that serves to reduce distressing symptoms.

P2b. **Evaluation by a Licensed Mental Health Specialist in the Last 90 Days** -- An assessment of a mood, behavior disorder, or other mental health problem by a qualified clinical professional such as a psychiatrist, psychologist, psychiatric nurse, or psychiatric social worker depending on state practice acts.

Do not code this item for routine visits by the facility social worker. Evaluation may take place at the nursing facility, private office, clinic, community mental health center, etc.

Each state licenses independent providers of mental health services who can provide care in the facility, at home, at the office or in the clinic.

The term "psychiatric social worker" (synonymous with clinical social worker) refers to someone with training in clinical mental health practice that is qualified to practice as a psychotherapist. Depending on state licensure requirements, a psychiatric/clinical social worker functions as an independent practitioner or under consultation, usually to a psychiatrist.

P2c. Group Therapy -- Resident regularly attends sessions at least weekly. Therapy is aimed at helping to reduce loneliness, isolation, and the sense that one's problems are unique and difficult to solve. The session may take place either at the nursing facility (e.g., support group run by the facility's social worker) or outside the facility (e.g., group program at community mental health center, Alcoholics Anonymous meeting at a local church, Parkinson's disease support group at local hospital). This item doesn't include group recreational or leisure activities.

P2d. Resident-Specific Deliberate Changes in the Environment to Address Mood/Behavior Patterns -- Adaptation of the milieu focused on the resident's individual mood/behavior/cognitive pattern.

Examples include placing a banner labeled "wet paint" across a closet door to keep the resident from repetitively emptying all the clothes out of the closet, or placing a bureau of old clothes in an alcove along a corridor to provide diversionary "props" for a resident who frequently stops wandering to rummage. The latter diverts the resident from rummaging through belongings in other residents' rooms along the way.

P2e. Reorientation -- Individual or group sessions that aim to reduce disorientation in confused residents. Includes environmental cueing in which all staff involved with the resident provides orienting information and reminders.

P2f. None of the above.

Process: Review the resident's clinical record for documentation of intervention programs. These interventions should also be documented in the care plan.

Coding: Check all that apply. If none apply, check none of the above.

Source: RAI User's Manual, Chapter 3.