

MDS Alert

CLIP-N-SAVE: Know What Counts Before You Code Section P3a-k

When it comes to coding restorative nursing services, definitions tell the "rest of the story" about what counts in Section P3a-k.

Restorative nursing services (a.k.a., nursing rehab) assist the resident to improve or maintain his functioning and prevent further decline. Facilities often start restorative programs after the resident finishes or is winding down therapy (as part of low rehab) in order to help the resident hold onto his hard-earned functional gains.

Specific restorative services are coded in Section P3a-k, as follows:

P3a. Range of Motion (Passive) -These exercises must be planned, scheduled and documented in the clinical record. Helping a resident get dressed does not, in and of itself, constitute a range of motion exercise session.

P3b. Range of Motion (Active) - Exercises performed by a resident, with cueing or supervision by staff, which are planned, scheduled, and documented in the clinical record. When residents do most of the modality, but need some assistance with the final stretch, it is still considered active range of motion.

P3c. Splint or Brace Assistance -Assistance can be of 2 types: 1) where staff provide verbal and physical guidance and direction that teaches the resident how to apply, manipulate, and care for a brace or splint, or 2) where staff have a scheduled program of applying and removing a splint or brace, assess the resident's skin and circulation under the device, and reposition the limb in correct alignment. These sessions are planned, scheduled, and documented in the clinical record.

TRAINING AND SKILL PRACTICE (Activities including repetition, physical or verbal cueing, and task segmentation provided by any staff member or volunteer under the supervision of a licensed nurse):

P3d. Bed Mobility - Activities used to improve or maintain the resident's self-performance in moving to and from a lying position, turning side to side, and positioning him or herself in bed.

P3e. Transfer - Activities use performance in moving between surfaces or planes either with or without assistive devices.

P3f. Walking - Activities used to improve or maintain the resident's self- performance in walking, with or without assistive devices.

P3g. Dressing or Grooming - Activities used to improve or maintain the resident's self-performance in dressing and undressing, bathing and washing, and performing other personal hygiene tasks.

P3h. Eating or Swallowing - Activities used to improve or maintain the resident's self-performance in feeding himself food or fluids, or activities used to improve or maintain the resident's ability to ingest nutrition and hydration by mouth.

P3i. Amputation/Prosthesis Care - Activities used to improve or maintain the resident's self-performance in putting on and removing a prosthesis, caring for the prosthesis, and providing appropriate hygiene at the site where the prosthesis attaches to the body (e.g., leg stump or eye socket).

P3j. Communication - Activities used to improve or maintain the resident's self-performance in using newly acquired functional communication skills or assisting the resident in using residual communication skills and adaptive devices.

P3k. Other - Any other activities used to improve or maintain the resident's self-performance in functioning. This includes, but is not limited to, teaching self-care for diabetic management, self-administration of medications, ostomy care, and cardiac rehabilitation.