

MDS Alert

MDS COMPLIANCE TIP: Identify This Discrepancy in a Resident's Goal-Setting Ability Before Surveyors Do

Beware this roadmap to F tags.

If the MDS shows a resident has the cognitive where-with-all to make decisions -- but item F1d doesn't indicate that he sets his own goals --take a closer look, advises **Cheryl Field, MSN, RN, CRRN**, senior healthcare specialist with PointRight Inc. in Lexington, Mass.

One explanation for the disconnect may be that the nurse completed the cognitive and decision-making items on the MDS, whereas the social worker completed Section F. And perhaps the nurse saw the resident could make decisions, whereas the social worker didn't see that strength,Field says.

Don't miss: "But we've heard that sometimes" the team purposely doesn't check F1d so it doesn't have to work the psychosocial RAP, she adds. "The other triggers are related to psychosocial problems, such as a grief situation, conflict with family or friends, etc." (See the RAP triggers on p. 69.)

Checking item F3a (strong identification with the past) will also trigger the psychosocial RAP, notes Field (see p. 69).

The consequences: Failure to identify the resident's goal-setting ability -- or a strong identification with the past, which can motivate him to achieve goals -- can create a "huge weakness" in care plans, cautions Field. And surveyors may pick up on this omission when they see you missed doing the psychosocial RAP, she adds. "In that case, surveyors could issue citations for assessment and failure to care plan."