

## MDS Alert

### RAI Compliance Tip: Don't Take The Fall For Sentinel Events That Never Happened

**But explain 'sign off' policies to staff and surveyors.**

The last thing your nursing facility wants to do is misdiagnose a condition as a sentinel event, which will sound the alarm bells with surveyors who will think your facility hasn't been doing its job in preventing avoidable negative outcomes.

To keep this from happening, some nursing facilities require the director of nursing or MDS coordinator to sign off on documentation and coding of what staff believe to be sentinel events, such as fecal impaction, dehydration and pressure ulcers.

That way staff doesn't end up documenting or miscoding what's really severe constipation as a fecal impaction - or a non-pressure-related wound or skin tear as a pressure ulcer in a low-risk resident, or math errors on I&O sheets as a fluid deficit.

Yet staff or regulators could misinterpret such directives as a strategy to avoid coding what's really a sentinel event, cautions **Steven Littlehale**, director of clinical services for **LTCQ Inc.** in Lexington, MA.

"So if the spirit of the approach is to improve clinical accuracy and alert the DON/administrator to a problem, make sure to explain that rationale to staff and surveyors," Littlehale advises.