

## MDS Alert

### RAI Compliance: What If a Resident Cannot Be Interviewed?

#### Staff will have to assess the presence/frequency of pain if a resident cannot be understood

Although the RAI manual notes that interviewing residents is preferred because it is the most reliable means of assessing pain, you may have a small percentage of residents who are unable or unwilling to complete the pain interview. In these cases, staff will have to complete the assessment based on observation and incomplete resident responses.

Watch out: The Centers for Medicare & Medicaid Services (CMS) is on the lookout for facilities that are not completing interviews when residents are capable.

**Thomas Dudley, MS, RN**, technical advisor in the CMS Division of Chronic and Post Acute Care, confirms that CMS has received reports from state survey agencies that some facilities are intentionally skipping all MDS 3.0 resident interviews, including the pain assessment items.

"Nursing homes need to be aware that skipping interviews when residents are capable is not acceptable and that they will be cited in instances where such practice is verified," warns Dudley.

1. Attempt to complete the interview if resident can be understood sometimes.

Item J0200 requires the assessor to determine whether the resident is rarely/never understood (see above). If the resident is understood at least sometimes, then the assessor should attempt to complete the interview (items J0300-J0600).

If an interpreter is needed or requested, the manual notes, every effort should be made to have one present for the MDS clinical interview. If it is not possible for an interpreter to be present during the look-back period then, according to the manual, the Staff Assessment of Pain item J08000 should be completed instead of the Pain Interview items J0300-J0600.

2. Use Code 9 if resident is unable to answer.

If the resident is unable to answer J0300, "Have you had pain or hurting at any time in the last 5 days," this item must be coded 9, unable to answer, and then the staff must conduct the assessment for pain beginning with Indicators of Pain or Possible Pain item J0800, according to the RAI manual.

Since residents who cannot verbally communicate their pain are at particularly high risk for underdetection and undertreatment of pain, staff must carefully monitor, track and document any possible signs and symptoms of pain, the RAI manual emphasizes. "Particular attention should be paid to using the indicators of pain during activities when pain is most likely to be demonstrated (e.g., bathing, transferring, dressing, walking and potentially during eating)," states the manual.

3. Review the resident's medical record for each indicator of pain.

In completing item J0800, the assessor should review the resident's medical record for documentation of each indicator of pain that occurred during the 5-day look-back period. "If the record documents the presence of any of the signs and symptoms listed, confirm your record review with the direct care staff on all shifts who work most closely with the resident during activities of daily living (ADL)," instructs the manual.

Because the medical record may fail to note all observable pain behaviors, the RA manual directs the assessor to also interview direct care staff on all shifts who work with the resident during ADL. The assessor should also observe the resident during care activities, as observation for pain indicators may be more sensitive if the resident is observed during

ADL or wound care.

#### Follow These Coding Tips

The RAI manual notes that behavior change, depressed mood, rejection of care and decreased activity participation may be related to pain. "These behaviors and symptoms are identified in other sections and not reported here as pain screening items. However, the contribution of pain should be considered when following up on those symptoms and behaviors," states the manual.

#### 4. Interview staff/caregivers to identify evidence of resident pain.

In order to evaluate the need, response and optimum timing of treatment for pain, the RAI manual notes, staff must also review the medical record and interview staff and direct caregivers to determine the number of days the resident either complained of pain or showed evidence of pain as described in J0850 over the past 5 days.

Editor's note: Test your Staff-Assessed Indicators of Pain coding skills by taking the Coding Quizzer below.

