

# **MDS Alert**

# Survey and Compliance: Attend to All Residents' Behavioral Health

RoP Phase 3 places even more emphasis on behavioral well-being - for all residents.

Phase 3 of the Requirements of Participation goes into effect Nov. 28, 2019, with a particular focus on psychosocial well-being and behavioral health.

State surveyors are already gearing up for a marked shift in long-term care toward facilities truly prioritizing resident care, including citing facilities when they deem staff aren't fully supporting the psychosocial well-being of all residents.

**Linda Elizaitis, RN, RAC-CT, BS, CIC**, president of **CMS Compliance Group** in Melville, New York, draws attention to the reality that surveyors are handing out citations for failing to fully support a resident's psychosocial well-being - before Phase 3 even begins. And in Phase 3, the emphasis on behavioral health means "providers need to ensure that they are familiar with the requirements of this regulatory group," she says.

## **Don't Overlook Those Without Red Flags**

You and your colleagues should be familiar with all of the regulations coming in Phase 3, particularly the perhaps less familiar guidance surrounding behavioral health, but pay special attention to all populations, including those the interdisciplinary team (IDT) or other care teams may have overlooked in the past.

Surveyors want to know that you're prioritizing residents with more obvious or expressed psychosocial struggles - but don't want anyone to fall through the cracks, either.

One Ftag you should know about is F743, No Pattern of Behavioral Difficulties Unless Avoidable, which surveyors can levy if they feel that your facility isn't fully doing enough to support all residents. This means you really need to look beyond what assessments alone tell you about residents.

"F743 focuses on the behavioral health of residents who were not assessed as having a diagnosis of a mental or psychosocial adjustment difficulty and do not have documented histories of trauma or post-traumatic stress disorder (PTSD)," Elizaitis says.

#### **Incorporate Support into Care Plan**

You and your team members can focus on activities and other means of helping residents maintain social interactions - or even increasing their opportunities for interaction. Remember to incorporate a focus on socialization into plans for all residents - even those whose mood scores or mental health history aren't raising any red flags.

"For these residents, it is important to ensure that they receive the necessary psychosocial support to prevent them from experiencing 'a pattern of decreased social interaction' and/or becoming increasingly withdrawn or exhibiting angry or depressive behaviors by ensuring that a person-centered plan of care is in place," Elizaitis says.

#### **Pay Special Attention to New Admissions**

New residents may take a while to settle in, and some residents may be intimidated by the established "scene" or otherwise struggle to integrate into the social fabric. New residents may be quietly mourning the change in circumstances that brought them to your facility, or any number of other things that wouldn't necessarily come up in an assessment but would still be affecting their day-to-day situations. Surveyors are looking out for this dynamic especially.

"For example, a facility was cited under F743 when a resident verbally expressed to a staff member that she was



depressed and did not want to stay at the facility, but the staff member did not report the resident's comments to nursing or the resident's physician. The resident had been identified as at risk for social isolation since she was a new admission. The facility was unable to provide evidence to surveyors that it had identified in the care plan that the resident was expressing verbalizations of depression, nor were any individualized approaches put in place to address her needs," Elizaitis says.

Focusing on making care plans truly individualized is one way to stay out of hot water.

"The regulation at F743 requires that care plans include an individualized approach that is reviewed and revised as necessary to support the needs of the residents," she adds.

### **Rely on Staff's Social Assessment Skills**

Basically, surveyors expect facility staff to react in real time - to notice what residents are going through and how they're responding to large and small stressors - and to act accordingly, if even minor concerns arise.

"Facility staff are expected to have the skills to monitor and assess residents to ensure they do not experience this kind of decline unless it is unavoidable based on the resident's clinical condition. If the pattern was unavoidable, it needs to be well-documented in the medical record as to why it was not identified by the IDT, resident and/or resident representative," Elizaitis says.

"Just remember that you have a responsibility to those that you choose to admit to your facility to meet their needs and recognize that these needs may change, including the 'intangible' ones that are sometimes more difficult to identify," she says.