

MDS Alert

Survey Management: An Inaccurate CMS 672 = An OSCAR 4 Report That Can Lead Your QA And Survey Astray

Don't let the MDS drive this form in the wrong direction.

A facility's OSCAR 4 reports will only be as accurate as the CMS 672 form the staff hands surveyors during the survey. And while some data for the CMS 672 may come from the facility's MDSs, staff should update the form at the time of the survey to reflect current resident status based on the definitions for the 672.

Key point: "You can't rely on your software to complete the CMS 672 by pulling the information off the MDS," says **Nathan Lake, RN, MHSA**, the Seattle-based director of clinical design for **American HealthTech Inc.**

Case in point: **Marty Pachciarz, RN, RAC-CT**, encountered one facility whose OSCAR 4 report said that 17 residents had pressure ulcers, which wasn't current at the time of the survey. Staff may have pulled that number off MDSs, says Pachciarz, clinical consultant with the **Polaris Group** in Tampa, FL.

A facility's percentage of residents with pressure ulcers will also be inflated on the OSCAR 4 report if you include stage 1 pressure ulcers on the CMS 672.

"It's vital for clinicians of all disciplines responsible for assessing the resident to understand the importance of ensuring" the information on the CMS 672 is current and accurate, stresses **Linda Crowley, RN**, a long-term care clinical software specialist in the New York metropolitan area.

Real-world practice: At **SunBridge Pine Lodge**, the computerized CMS 672 pulls information off the residents' most current MDS, reports **Rose Mary Mihaliak, RN**, clinical case manager for the facility in Beckley, WV. "And we print the CMS 672 form twice a week and give it to someone in each discipline who updates the information and makes sure it's current as of that date." Staff then print and update the form when surveyors arrive.