

MDS Alert

What Do You Think?

Test your knowledge by coding these scenarios.

Scenario: Ms. Silverton, who recently fell and has suffered a TBI, has had an increase in urinary incontinence. Since her TBI, she has been more forgetful and has had trouble maintaining her balance; additionally, her sense of direction has been compromised. Staff has assessed her records and behavior and have determined that a regimented program of cueing and staff escort to the toilet every two hours from breakfast until bedtime could reduce her incontinence. Staff have documented these instructions as part of her care plan, explained their goals to Ms. Silverton, and plan to reevaluate her condition in three weeks. How would you code H0200?

Answer: Code H0200A (Trial of a toileting program ... been attempted) 1, Yes,

H0200B (Response) 9, unable to determine or trial in progress, and

H0200C (... current toileting program or trial) 1, Yes, current toileting program or trial.

Rationale: Everything in this scenario points to a toileting program trial: Staff assessed her records, established a regimented program for cueing and guidance, made the plans known to Ms. Silverton, and included everything in her care plan.

Scenario: Mr. Preston's cognitive abilities have been declining, and he has had more incontinent episodes at least one a day over the past week. Staff have recorded these instances of incontinence in a predesignated voiding diary and have decided that whoever is working should prompt him to use the bathroom when walking by his room, in an effort to decrease his incontinent episodes, for the foreseeable future. How would you code H0200?

Answer: Code H0200A (Trial of a toileting program ... been attempted) 0, No

... and skip to H0300 (Urinary Continence).

Rationale: Although Mr. Preston is experiencing incontinent episodes and staff have been working to reduce these episodes, their plan does not meet the necessary requirements for a toileting trial program. Toileting protocols qualify as a toileting trial program only if these RAI Manual requirements are met:

- implementation of an individualized, resident-specific toileting program that was based on an assessment of the resident's unique voiding pattern;
- evidence that the individualized program was communicated to staff and the resident (as appropriate) verbally and through a care plan, flow records, and a written report; and
- notations of the resident's response to the toileting program and subsequent evaluations, as needed.

Scenario: Mrs. Morgan has advanced dementia and has just been admitted to your facility, after her family decided they could no longer keep up with the level of care she requires. She can ambulate safely, but is totally dependent on cueing for all ADLs, and consistently struggles with continence, though there hasn't been any discernable pattern to her voiding. Staff have noted her incontinence and have been using superabsorbent briefs and changing her clothing as frequently as necessary. How would you code H0200?

Answer: Code H0200A (Trial of a toileting program ... been attempted) 0, No,

... and skip to H0300 (Urinary Continence).

Rationale: Although a toileting trial program has not yet been attempted, Mrs. Morgan could be a great candidate for a regimented, routine toileting program because she responds to cueing from staff for ADLs and is still strong enough to ambulate safely. Look out for signs that her continence condition could improve as she becomes more familiar with her new environment, and consider implementing a toileting trial program as part of her care plan, going forward.