

OASIS Alert

Item Focus: M1240: Are You Documenting Pain Appropriately?

Don't stop with simply answering this pain assessment item.

When completing an OASIS assessment, experts recommend considering pain as the fifth vital sign. Make certain you're accurately measuring and reporting your patients' pain in M1240 Has this patient had a formal pain assessment ... ? to improve both your patient care and Home Health Compare scores.

Establish the Basics

OASIS item M1240 asks you to indicate whether your patient had a formal pain assessment using a standardized pain assessment tool.

Your response options for M1240 are:

- 0 No standardized assessment conducted;
- 1 Yes, and it does not indicate severe pain; or
- 2 Yes, and it indicates severe pain.

Timepoints: You'll complete M1240 at start of care and resumption of care.

Know What Makes Pain Assessment Formal

M1240 asks about pain assessment that's how and whether you are assessing the patient's pain not the amount of pain a patient is in, the **Centers for Medicare & Medicaid Services** explains. The answer you select for this item indicates whether the assessing clinician conducted a formal pain assessment within the allowed assessment time which is five days from the start of care (SOC) or 48 hours from inpatient discharge (ROC) using a standardized tool.

As the clinician responsible for completing the assessment, you must use a standardized tool to assess your patient's pain when answering M1240. According to the **Centers for Medicare & Medicaid Services'** OASIS-C Guidance Manual, a standardized tool:

1. Was scientifically tested on a population with characteristics similar to that of the patient you're assessing. For example, community-dwelling elders.
2. Includes a standard response scale.
3. Is appropriately administered according to the instructions.
4. Is appropriate to the patient's ability to respond.

Tip: CMS doesn't endorse any specific pain assessment tool it's up to your agency to select one that meets the appropriate criteria. Some common tools include visual analog scales, the Wong-Baker FACES Pain Rating Scale, numerical scales, and the Memorial Pain Assessment Card.

Whichever tool you use, it must be appropriate to the patient's ability to communicate about the severity of the pain he's experiencing. In other words, the patient must be able to understand the questions you ask and able to participate in responding.

Select the Best Response for Your Patient

The method for measuring severe pain depends on the scoring system for the standardized tool you use. If your tool doesn't define levels of "severe" pain, your agency should determine which level(s) of pain the standardized tool identifies that best reflect the concept of "severe," CMS advises.

- Select Response "0" if the clinician didn't use a standardized tool to assess pain.
- Select Response "1" when the clinician used a standardized tool to assess pain and the tool indicated no severe pain. Response "1" is appropriate when the patient isn't experiencing any pain, or if the pain is rated as mild or moderate.
- Select Response "2" when the clinician used a standardized tool to assess pain and the tool indicated severe pain.

Don't Stop There

"Pain is such a subjective subject, and I've heard from many clinicians who wonder how to answer M1240 correctly ... does it refer only to severe pain? When does pain qualify?" said **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C, HCS-O**, consultant and principal of **Selman-Holman & Associates** and **CoDR** **Coding Done Right** in Denton, Texas.

This item intends to determine whether you conducted a standardized assessment, and what the level of pain was, if, and only if, you conducted the assessment, Selman-Holman said on her Home Health Insight Blog (<http://selmanholmanblog.com>).

Watch: When responding to M1240, be sure to also keep an eye on M2250 Plan of Care Synopsis and M2400 Intervention Synopsis as well, Selman-Holman said.

M2250 is where you should note whether the doctor ordered interventions and monitoring for the pain, Selman-Holman said. You should only mark this item "NA" if the patient is not experiencing pain. That's no pain at all, she said.

Avoid this Mistake

Good news: M1240 has a consistent 98 percent completed score nationally and in most states, says **Judy Adams, RN, BSN, HCS-D, HCS-O**, with **Adams Home Care Consulting** in Asheville, N.C. But some agencies do fall prey to a misunderstanding of the instructions for this item, she says.

Many of these agencies started out on the right foot and did perform a general pain assessment for their patients, Adams says. But when the patient didn't have pain, the agencies mistakenly thought they didn't have to complete M1240.

Do this: Under best practice standards, the home health agency should address any level of pain, Adams reminds. Although a score of 7-10 on the 0-10 scale or the Wong Baker faces scale is considered "severe pain," CMS asks that agencies document in the clinical record any and all pain a patient experiences and also address the pain in the plan of care.

Important: Accreditation standards that promote pain as "the fifth vital sign" predate the OASIS and CMS's interpretation that providers should recognize, document, and address any level of pain in the plan of care in any health setting, Adams reminds.