



**MEMORANDUM November 2003**

**Flu Season -- SNFInfo Connection 10/28/2003** -- The upcoming flu season could be the hardest-hitting one in four years, some medical experts predict, so it's important to take precautionary steps including making sure nursing home residents receive an annual flu shot. The Centers for Disease Control and Prevention (CDC) recommends an annual flu shot, especially for high-risk groups that include people over the age of 65 and those with chronic medical conditions-- because those people are more likely to experience complications from the flu. The CDC says about 10 to 20% of U.S. residents may be diagnosed with influenza this year. "We anticipate seeing a higher number of people with cold and flu-like symptoms this season--and on top of that, the symptoms could be more severe than last season," Gerald Kress, CEO of Surveillance Data Inc., a global research firm that tracks illness activity, said in a press release.

**MDS 2.0 Clarifications** -- Be sure to pay attention to the question of the week that is posted on the Virginia MDS Website. Clarifications to areas that are frequently miscoded are explained and in some cases the posting may contain guidance that is Virginia specific; it is a good idea to print these out and insert them into your MDS books. Previous Q&As have not been dated, but VDH has assured us that future ones will be.

**Weight Change Calculations** -- The following guidance in calculating weight changes is from Judy Wilhide, RAI Manager:

"The first step in calculating percent weight gain or loss is to obtain the actual weights for the 30-day and 180-day time periods from the resident's clinical record. Calculate percentage for weight loss and weight gain based on the resident's actual weight. Do not round the weight." The sentence that was deleted is this: Although height and weight are rounded up, percentage is not; e.g., 4.5% should not be rounded to 5%..

So, if, after using actual weights in your calculations to determine percent weight change, if the percentage is 4.5% or greater for 30 days or less; or 9.5% or greater for 180 days or less, code "1" yes, in K3.

The effect of these changes will be a more accurate picture of significant weight loss/gain, and a greater opportunity to intervene earlier on the weight loss/gain, as appropriate. **Therefore, providers may experience more residents triggering QI 13, Prevalence of Weight Loss.** Surveyors have been trained in this calculation and will be looking closely at significant weight changes. Effective date was October 17<sup>th</sup>.

**Quality Assurance/Compliance** -- We often become complacent with facility policy and policy and focus our quality improvement efforts on those areas identified on the Quality Indicator Report. However, there are other areas that may bear some internal review to determine that your policies are current, that staff is familiar with all related policies and that facility practice is consistent with your policies. **Areas include, but are not limited to: Management of hypo/hyper-glycemia [including control audits of blood glucose machines]; kitchen/food temperatures; and medication administration [timeliness, correct dosage, correct procedure for route of administration and related documentation].**

**Quality Measures** -- CMS plans to post new QM results in December or January; at this time there is no indication that they will be published in the newspaper, but they will be posted to the website. The measures include: **Chronic Care Measures** --Residents whose need for more help with daily activities has increased; Residents who experience moderate to severe pain; Residents who were physically restrained daily during the 7-day assessment period; Residents who spend most of their time in bed or in a chair in their room during the 7-day assessment period; Residents with a decline in their ability to move about in their room or the adjacent corridor; Residents with urinary tract infections; and Residents with worsening of a depressed or anxious mood. **Chronic Care Measures Paired** -- High-risk residents with pressure ulcers AND average-risk residents with pressure ulcers and residents who frequently lose control of the bowel or bladder AND residents who have a catheter in the bladder at any time during the 7-day assessment period. **Post-Acute Measures** -- Recently hospitalized residents who experience moderate to severe pain at any time during the 7-day assessment period; recently hospitalized residents with symptoms of delirium; and recently hospitalized residents with pressure ulcers.

**Medicaid RUGs** -- DMAS has released a revision to the RUGs Technical Document that provides clarification to documentation requirements and actions to be taken by the NF following a DMAS UR visit. Let me know if you need a copy.