

## **APPENDIX A**

### **QUALITY INDICATOR MATRIX**















**QUALITY INDICATORS FOR IMPLEMENTATION**QI Version #: **6.3**

Revised: 1/19/99

MDS 2.0 Form Type: **QUARTERLY ASSESSMENT FORM-TWO PAGE****DOMAIN: ELIMINATION/INCONTINENCE**

TITLE	DESCRIPTION	MDS 2.0 QUARTERLY VARIABLE DEFINITION	RISK ADJUSTMENT
9. Prevalence of occasional or frequent Bladder or Bowel Incontinence without a Toileting Plan.  5.2A0020	<b>Numerator:</b> Residents without toileting plan on most recent assessment.  <b>Denominator:</b> Residents with frequent incontinence or occasionally incontinent in either bladder or bowel on most recent assessment.	MOST RECENT ASSESSMENT: No scheduled toileting plan and no bladder retraining program (Neither H3a nor H3b is checked).  Occasional or frequent bladder incontinence (H1b = 2 or 3) OR Bowel incontinence (H1a = 2 or 3).	No adjustment.
10. Prevalence of Indwelling Catheters.  5.3A0021	<b>Numerator:</b> Indwelling catheter on most recent assessment.  <b>Denominator:</b> All residents on most recent assessment.	MOST RECENT ASSESSMENT: Indwelling catheter (H3d is checked).	No adjustment <sup>1</sup>

<sup>1</sup> Risk adjustment (included in the original MDS+ definition) cannot be defined because certain information was not available on the MDS 2.0 Quarterly.







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**DOMAIN: NUTRITION/EATING**

TITLE	DESCRIPTION	MDS 2.0 QUARTERLY VARIABLE DEFINITION	RISK ADJUSTMENT
14. Prevalence of tube feeding.        7.2A0027	<b>Numerator:</b> Residents with tube feeding on most recent assessment.  <b>Denominator:</b> All residents on most recent assessment.	MOST RECENT ASSESSMENT: Feeding tube (K5b is checked).	No adjustment.
15. Prevalence of dehydration.        7.3A0028	<b>Numerator:</b> Residents with dehydration.  <b>Denominator:</b> All residents on most recent assessment.	Dehydration - output exceeds input (J1c is checked or I3 =ICD 9 CM 276.5) <sup>1</sup>	No adjustment.

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<sup>1</sup> Instructions relative to the completion of item I3 (ICD-9 codes) are ambiguous. Pending clarification from HCFA, we recommend that this item include all diagnoses, from the last 90 days that are related to current ADL status, cognitive status, mood and behavior status, medical treatments, nursing monitoring, or risk of death.













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**DOMAIN: QUALITY OF LIFE**

Additional quality of life dimensions are addressed in other QI domains.

TITLE	DESCRIPTION	MDS 2.0 QUARTERLY VARIABLE DEFINITION	RISK ADJUSTMENT
22. Prevalence of daily physical restraints.          10.1A0051	<p><b>Numerator:</b> Residents who were physically restrained daily on most recent assessment.</p> <p><b>Denominators:</b> All residents on most recent assessment.</p>	<p>MOST RECENT ASSESSMENT: Daily physical restraints (P4c or d or e =2).</p>	No adjustment.
23. Prevalence of little or no activity.          10.2A0052	<p><b>Numerator:</b> Residents with little or no activity on most recent assessment.</p> <p><b>Denominator:</b> All residents (excluding comatose) on most recent assessment.</p>	<p>MOST RECENT ASSESSMENT: Little or no activity (N2 =2 or 3).</p> <p>EXCLUDE: Residents who are comatose (B1=1).</p>	No adjustment.



## QI Glossary

**Behavior problems.** Defined as one or more of the following less than daily or daily: verbally abusive (E4b-Box A >0), physically abusive (E4c-Box A >0), or socially inappropriate/disruptive behavior (E4d-Box A >0).

**Cognitive impairment.** Any impairment in daily decision making ability (B4 >0) AND has short term memory problems (B2a=1).

**Severe Cognitive Impairment.** Decision making ability is severely impaired (B4=3) AND has short term memory problems (B2a=1)

### DEPRESSION:

#### Symptoms of Depression:

Sad mood (E2=1 or 2) and [at least 2 symptoms of functional depression];

Symptoms of functional depression:

**Symptom 1 distress** (E1a=1or2-resident made negative statements);

**Symptom 2 agitation or withdrawal** (E1n =1or 2-repetitive physical movements), or (E4e-Box A = 1, 2, or 3-resists care), or (E1o=1or2-withdrawal from activity), or (E1p=1or 2-reduced social activity);

**Symptom 3 wake with unpleasant mood** (E1j =1 or 2), or not awake most of the day (N1d is checked), or awake 1 period of the day or less and not comatose (N1a+N1b +N1c  $\leq$ 1 and B1=0);

**Symptom 4 suicidal or has recurrent thoughts of death** (E1g=1 or 2);

Symptom 5 weight loss (K3a=1)