

## MDS Matters



Family dynamics and interactions can be equally exceptional and challenging when it comes to resident care. As we know, there are many factors that weigh on a family member's mind when the decision to place a loved one in a facility is made. The emotions family members bring to us range from fear, sadness and guilt to relief, gratitude and joy. There is no way to predict family interactions or what family expectations will be, and yet, we know that family involvement in resident's care plans and resident's quality of life is a critical component to successful management of resident needs. When the resident is a long time member of our community, whose stay with us includes many levels of care over time, expectations from families, regulatory agencies and the media can result in increased scrutiny.

Family interactions become even more complex when a resident is receiving skilled nursing or rehab services in your facility. If the reason for these services is due to post acute injuries from a fall, infection or pressure area acquired from within the facility, the heightened awareness of your care from a family's perspective is often unanticipated by staff and may result in a family member's accusations, angry outbursts or other unexpected behaviors.

One of the most alarming comments a family member will hear is, "your loved one is being cut from Medicare." In our industry, we know that being "cut" from a skilled program does not mean that the resident is being "cut out" of care, which is often what family members conclude when they are told services are ceasing. The questions for us to answer are, do our families understand that we have a continued and specific obligation to care for their loved one, and do we do a good job of explaining that to our families?

When you find yourself in the situation where you are explaining to a family member, perhaps an unhappy or even volatile family member, that it is time to end a Medicare stay, don't overlook the power of the MDS. The MDS is a valuable health assessment, universally recognized among healthcare consumers and healthcare providers. It is a comprehensive tool. Take the time during a care conference to review the MDS in detail with a family member. Encourage the family member to provide input into the care plan and to supply answers to the MDS questions. Carefully explain how the MDS is an on-going tool that you will use to continually monitor the resident's abilities. Give examples of how you will complete quarterly assessments, annual assessments and significant change assessments, and what will trigger you to do that for the resident. You may be surprised at the response you will get from this approach. Once family members realize the detail with which you are assessing their loved one, they often feel more comfortable that the images they have created in their own minds of their loved one "just lying in bed" are not the reality of their loved one's life in your facility at all.

And, as always, don't forget to document the conversations and reviews of the MDS that you have held with the family member. This documentation can be useful for answering questions about care options and goals for the future, setting mutual expectations between you and the family member and demonstrating the collaboration you are committed to when outside surveyors review your services.

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