

# Percent of Low-Risk Residents Who Lose Control of Their Bowels or Bladder Long Stay Quality Measure (QM)

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## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### Objectives:

- Become familiar with the QM specifications
- Understand how MDS coding Sections C: Cognitive Patterns, Section G: Functional Status, Section H: Bladder and Bowel trigger the QM
- Model for Improvement / Next Steps



## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

- This is a long stay quality measure
- What qualifies the resident as long stay is the number of cumulative days in the facility
- The long stay measure equates to residents who are in the facility for 101 or greater cumulative days
- Days out of the facility are not calculated in the cumulative day count.

## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### This Quality Measure is used in the

- CMS CASPER Quality Measure Report,
- Nursing Home Compare, the federal public nursing home website
- New York State Nursing Home Profile,
- Nursing Home Quality Care Collaborative (NHQCC) Composite Measure Score:
- Reviewed during the Annual Survey process

Not one of the 11 QMs in the 5 STAR Rating

## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### DEFINITIONS:

#### URINARY INCONTINENCE

The involuntary loss of urine.

#### URINARY CONTINENCE

Any void that occurs voluntarily, or as the result of prompted toileting, assisted toileting, or scheduled toileting.

#### BOWEL INCONTINENCE

This includes incontinence of any amount of stool, day or night.

RAI Manual since October 2013

## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

MDS 3.0 Measure: Percent of Low Risk Residents  
Who Lose Control of Their Bowel or Bladder (Long Stay)

MEASURE DESCRIPTION	MEASURE SPECIFICATIONS	COVARIATES
<p>CMS: N025.01 NQF: 0685</p> <p>The measure reports the percent of long-stay residents who frequently lose control of their bowel or bladder.</p>	<p><b>Numerator</b> Long-stay residents with a selected target assessment that indicates frequently or always incontinence of the bladder (H0300 = [2, 3]) or bowel (H0400 = [2, 3]).</p> <p><b>Denominator</b> All long-stay residents with a selected target assessment, except those with exclusions.</p> <p><b>Exclusions</b></p> <ol style="list-style-type: none"> <li>Target assessment is an admission assessment (A0310A = [0 1]) or a PPS 5-day or readmission/return assessment (A0310B = [01, 06]).</li> <li>Resident is not in numerator and H0300 = [-] OR H0400 = [-].</li> <li>Residents who have <b>any</b> of the following high risk conditions:             <ol style="list-style-type: none"> <li>Severe cognitive impairment on the target assessment as indicated by C1000 = [3] and C0700 = [1] OR C0500 = [1].</li> <li>Totally dependent in bed mobility self-performance (G0110A1 = [4, 7, 8]).</li> <li>Totally dependent in transfer self-performance (G0110B1 = [4, 7, 8]).</li> <li>Totally dependent in locomotion on unit self-performance (G0110E1 = [4, 7, 8]).</li> </ol> </li> <li>Resident does not qualify as high risk (see #3 above) and <b>both</b> of the following two conditions are true for the target assessment:             <ol style="list-style-type: none"> <li>C0500 = [90, ^, -, ] and</li> <li>C0700 = [^, -, ] or C1000 = [^, -, ]</li> </ol> </li> <li>Resident does not qualify as high risk (see #3 above) and <b>any</b> of the following three conditions are true:             <ol style="list-style-type: none"> <li>G0110A1 = [-]</li> <li>G0110B1 = [-]</li> <li>G0110E1 = [-]</li> </ol> </li> <li>Resident is comatose (B0100 = [1]) or comatose status is missing (B0100 = [-]) on the target assessment.</li> <li>Resident has an indwelling catheter (H0100A = [1]) or indwelling catheter status is missing (H0100A = [-]) on the target assessment.</li> <li>Resident has an ostomy (H0100C = [1]) or ostomy status is missing (H0100C = [-]) on the target assessment.</li> </ol>	Not applicable.

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## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### NUMERATOR:

Long-stay residents with a selected target assessment that indicates  
2. frequently or 3. always incontinent  
of the bladder (H0300 = [2, 3]) or bowel (H0400 = [2, 3]).

### DENOMINATOR:

All long-stay residents with a selected target assessment, except those with exclusions.

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7

## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### Review Exclusion

#### Exclusions

1. Target assessment is an admission assessment (A0310A = [01]) or a PPS 5-day or readmission/return assessment (A0310B = [01, 06]).
2. Resident is not in numerator and H0300 = [-] OR H0400 = [-].
3. Residents who have **any** of the following high risk conditions:
  - a. Severe cognitive impairment on the target assessment as indicated by (C1000 = [3] and C0700 = [1]) OR (C0500 ≤ [7]).
  - b. Totally dependent in bed mobility self-performance (G0110A1 = [4, 7, 8]).
  - c. Totally dependent in transfer self-performance (G0110B1 = [4, 7, 8]).
  - d. Totally dependent in locomotion on unit self-performance (G0110E1 = [4, 7, 8]).
4. Resident does not qualify as high risk (see #3 above) and **both** of the following two conditions are true for the target assessment:
  - a. C0500 = [99, ^, -], **and**
  - b. C0700 = [^, -] or C1000 = [^, -].
5. Resident does not qualify as high risk (see #3 above) and **any** of the following three conditions are true:
  - a. G0110A1 = [-]
  - b. G0110B1 = [-]
  - c. G0110E1 = [-].
6. Resident is comatose (B0100 = [1]) or comatose status is missing (B0100 = [-]) on the target assessment.
7. Resident has an indwelling catheter (H0100A = [1]) or indwelling catheter status is missing (H0100A = [-]) on the target assessment.
8. Resident has an ostomy (H0100C = [1]) or ostomy status is missing (H0100C = [-]) on the target assessment.



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## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### Review High Risk Exclusion

3. Residents who have **any** of the following high risk conditions:
  - a. Severe cognitive impairment on the target assessment as indicated by (C1000 = [3] and C0700 = [1]) OR (C0500 ≤ [7]).
  - b. Totally dependent in bed mobility self-performance (G0110A1 = [4, 7, 8]).
  - c. Totally dependent in transfer self-performance (G0110B1 = [4, 7, 8]).
  - d. Totally dependent in locomotion on unit self-performance (G0110E1 = [4, 7, 8]).

#### 1. ADL Self-Performance

Code for **resident's performance** over all shifts - not including setup. If the ADL activity occurred 3 or more times at various levels of assistance, code the most dependent - except for total dependence, which requires full staff performance every time

#### Coding:

4. **Total dependence** - full staff performance every time during entire 7-day period

#### Activity Occurred 2 or Fewer Times

7. **Activity occurred only once or twice** - activity did occur but only once or twice
8. **Activity did not occur** - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period

## % of Low-Risk Residents Who Lose Control of Their Bladder

### H0300. Urinary Continence

Enter Code <input style="width: 20px; height: 20px;" type="checkbox"/>	<b>Urinary continence</b> - Select the one category that best describes the resident
<ol style="list-style-type: none"> <li>0. <b>Always continent</b></li> <li>1. <b>Occasionally incontinent</b> (less than 7 episodes of incontinence)</li> <li>2. <b>Frequently incontinent</b> (7 or more episodes of urinary incontinence, but at least one episode of continent voiding)</li> <li>3. <b>Always incontinent</b> (no episodes of continent voiding)</li> <li>9. <b>Not rated</b>, resident had a catheter (indwelling, condom), urinary ostomy, or no urine output for the entire 7 days</li> </ol>	

**Codes: 2 Frequently Incontinent or 3 Always Incontinent Trigger the QM**

#### Coding Instructions:

**Code 0, always continent:** during 7-day look-back period, continent of urine, without any episodes of incontinence.

**Code 1, occasionally incontinent:** during the 7-day look-back period, incontinent less than 7 episodes.

**Code 2, frequently incontinent:** during the 7-day look-back period, incontinent of urine, 7 or more episodes but at least 1 continent void.

**Code 3, always incontinent:** during the 7-day look-back period, no continent voids.

**Code 9, not rated:** during the 7-day look-back period the resident had an indwelling bladder catheter, condom catheter, ostomy, or no urine output

## % of Low-Risk Residents Who Lose Control of Their Bowels

### H0400. Bowel Continence

Enter Code	<b>Bowel continence</b> - Select the one category that best describes the resident
<input type="checkbox"/>	<ul style="list-style-type: none"> <li>0. <b>Always continent</b></li> <li>1. <b>Occasionally incontinent</b> (one episode of bowel incontinence)</li> <li>2. <b>Frequently incontinent</b> (2 or more episodes of bowel incontinence, but at least one continent bowel movement)</li> <li>3. <b>Always incontinent</b> (no episodes of continent bowel movements)</li> <li>9. <b>Not rated</b>, resident had an ostomy or did not have a bowel movement for the entire 7 days</li> </ul>

**Codes 2. Frequently Incontinent or 3. Always Incontinent Trigger the QM**

#### **Coding Instructions**

- **Code 0, always continent:** during the 7-day look-back period, continent of bowel on all occasions of bowel movements
- **Code 1, occasionally incontinent:** during the 7-day look-back period, incontinent of stool once.
- **Code 2, frequently incontinent:** during the 7-day look-back period, incontinent of bowel more than once, but had at least one continent bowel movement.
- **Code 3, always incontinent:** if during the 7-day look-back period, the resident was incontinent of bowel for all bowel movements
- **Code 9, not rated:** during the 7-day look-back period, had ostomy or no bowel movement

## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### **Steps for Assessment: Bladder + Bowel Incontinence**

1. Review incontinence records, nursing assessments, progress notes, physician history, and physical examination.

***Be sure that system of documentation includes clear identification of Continent or Incontinent Episodes***

2. Interview the resident if capable of reliably reporting continence.

Speak with family members or significant others .

3. Ask direct care staff who routinely work with the resident on all shifts about incontinence episodes.

#### **Coding Tips:**

- ***Bowel incontinence precipitated by loose stools or diarrhea from any cause (including laxatives) would count as incontinence.***

## % of Low-Risk Residents Who Lose Control of Their Bladder

### Planning for Care: Bladder Incontinence

- Must assess the type of bladder incontinence: **Stress, Urge, Mixed, Overflow, Transient, Functional**
- Eliminating environmental physical barriers to accessing commodes, bedpans, and urinals;
- **Bladder retraining, Prompted voiding, or Scheduled toileting.**

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## % of Low-Risk Residents Who Lose Control of Their Bowels

### Planning for Care: Bowel Incontinence

- **Potentially Reversible causes:**
  - \* medication side effects,
  - \* constipation + fecal impaction
  - \* immobility
  - \* diet
- **Eliminating Environmental Physical Barriers**  
accessing toilets, commodes, bedpans, and obtaining assistance
- **Bowel Toileting Program**



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## % of Low-Risk Residents Who Lose Control of Their Bowels or Bladder

### CASPER Report MDS 3.0 Facility Level Quality Measure Report

Measure Description	CMS ID	Data	Num	Denom	Facility Observed Percent	Facility Adjusted Percent	Comparison	Comparison	Comparison
							Group State Average	Group National Average	Group National Percentile
Lo-Risk Lose B/B Con (L)	N025.01		18	22	81.8%	81.8%	47.0%	45.7%	96 *

**On the Casper Report:**

**Numerator:** Residents that triggered Incontinent of Bowel or Bladder

**Denominator:** all Long Stay Residents with Target Assessment except for

**Exclusions:** *discussed previously*

**Adjustment:** Observed = Adjusted rate

**Compared** against the State average and the National average.

The last column is National Percentile Ranking.

*[for additional information view CASPER webinar]*



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### CASPER Resident Level Sample

#### CASPER Report MDS 3.0 Resident Level Quality Measure Report

Note: S = short stay, L = long stay; X = triggered, b = not triggered or excluded,  
C = complete; data available for all days selected, I = incomplete; data not available for all days selected

Resident Name	Resident ID	SR Mod/Severe Pain (S)	SR Mod/Severe Pain (L)	Hi-risk Pres Ulcer (L)	New/worsen Pres Ulcer (S)	Phys restraints (L)	Falls (L)	Falls w/Inj Injury (L)	Antipsych Med (S)	Antipsych Med (L)	Antipsych/Hypnotic (L)	Behav Sx Affect Others (L)	Depress Sx (L)	UTI (L)	Cath Insert/Left Bladder (L)	Lo-Risk Lose B/B Con (L)	Excess Wt Loss (L)	Incr ADL Help (L)	Quality Measure Count
	A0310A/B/F	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	4
Active Residents		02/99/99					X			X		X				X			



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### Incontinence Improvement Strategies:

- **Assessment of Cause of Urinary or Bowel Incontinence**
- **Staff Education**
- **Consistent Assignment**
- **Individual toileting program**
- **Accurate Tracking /Documentation**
- **Clear Documentation of Continence /Incontinent Status**
- **Documentation/ Progress Notes reference Care Plan**

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### Model for Improvement - Next Steps

- **Analyze the data to determine a root cause or quality improvement opportunity**
- **Drill down the information to the resident level**
- **Assess if the MDS has been accurately/inaccurately coded for the residents triggering the measure**
- **Assess the experience of interviewers and effect(s) of flawed interview skill/technique**
- **Assess the effect of staff stability/consistent assignment practice with providing resident care**
- **Develop individualized care plans- QI Closest to the Resident**
- **Measure overall effectiveness of QI interventions**

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### Resources:

**RAI Manual Ch.3 Section H: Bowel and Bladder; Section C: Cognitive Pattern; and Section G: ADL**

**Incontinence Care Area Assessment (CAA)**

**Critical Elements for Urinary Incontinence (QIS)**

**Vanderbilt Incontinence Management**



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19

## For more information

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