

Initial Pool Process: Resident Observation

Care Area	Probes	Response Options
Activities	<i>Only complete for residents who aren't interviewed:</i> <i>Does the resident remain in the same location for a long period of time without any stimulation?</i>	No Issues/NA Further Investigation
Dignity	- Observe to determine whether staff failed to: - Knock/ask permission to enter room or wait to enter until permission given - Explain the service or care to be provided - Provide visual privacy of resident's body while transporting through common areas, or uncovered in their room but visible to others - Cover a urinary catheter bag/other body fluid collection device - Ensure resident was dressed in appropriate and noninstitutional clothing - Ensure the clinical care instructions were not visible for public view - Any other identified dignity concerns?	No Issues/NA Further Investigation
Abuse	- Do you see any of the below: - Bite marks, scratches, and lacerations including those that are in locations that would unlikely result from an accident - Any bruises, skin tears, burns, blisters, scalds or injuries, observed in unusual locations - Fear of others <i>Is the resident exhibiting any aggressive behavior (verbal or physical) to others?</i> NOTE: If you witness an act of abuse, you must immediately report this observation to the administrator, or his/her designated representative if the administrator is not present.	No Issues/NA Further Investigation
Mood/Behavior	Does the resident <i>exhibit any behavior listed below WITHOUT staff appropriately responding to the behavior?</i> - Hallucinations (e.g., hearing voices or seeing things not present), depression, appear socially withdrawn or isolated? - Does the resident appear to exhibit any physical expressions of distress directed towards others - hitting, striking out at others, kicking, pushing, scratching, and grabbing? - Does the resident appear to exhibit any verbal expressions of distress directed towards others - threatening others, screaming at others, cursing at others, crying?	No Issues/NA Further Investigation MDS Discrepancy

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	- Any other expressions of distress not directed toward others - physical such as hitting or scratching self, pacing, rummaging, public sexual acts, disrobing in public, throwing or smearing food or bodily wastes, sounds that are distressing to other residents? - Wandering, ambulating in and out of resident's rooms, rummaging in other resident's belongings	
Restraints	<i>Is there a potential concern with the type of restraint used (e.g., wrists restrained to the bed, vest restraint)?</i> - Are restraints applied <i>improperly</i>? <i>Does staff repeatedly tell the resident to sit back down when the resident continues to try to stand instead of addressing the resident's need?</i>	No Issues/NA Further Investigation MDS Discrepancy
Accident Hazards	- Are any of the following observed? - Are bed rails/frame <i>loose or unsecured</i>? <i>Are there areas the resident could become entrapped?</i> - Does any restraint/device have the risk or likelihood of causing serious injury, harm or death? <i>Are electrical items (cords, outlets) or equipment ((grab bars, slip surfaces, walkers, wheelchairs, etc.) damaged or used unsafely?</i> - Are there accessible chemicals/other hazards in bedroom/bathroom? - Is there unsafe hot water in the room? - Is there exposure to unsafe heating unit surfaces? - Are locks disabled, or fire doors propped open? - Are there any other environmental hazards or risks observed? NOTE: Each surveyor should check water temperature with their hand held under the hot water in two resident rooms (on opposite sides of the hall) per unit. Use a thermometer if there is concern that water is too hot and could potentially scald or harm residents. Target resident rooms closest to the hot water tanks/kitchen areas and resident rooms belonging to residents with dementia who may use sinks/bathtubs/showers independently.	No Issues/NA Further Investigation MDS Discrepancy

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Unsafe Wandering/ Elopement	<i>Is the resident leaving secured areas or entering other residents' rooms without staff redirection or preventative measures in place?</i> - Is the resident exit seeking? - Is the resident wandering into other residents' rooms? - Does a resident attempt to follow visitors or other residents to other parts of the facility? - Is the resident redirected by staff? - Are staff supervising residents who wander? - Does the resident appear anxious, frustrated, bored, or hungry which is displayed as wandering or lack of supervision by staff? <i>If the resident tried to leave the building, did the wander alarm fail to work?</i>	No Issues/NA Further Investigation MDS Discrepancy
Environment	- Are any of the following <i>issues</i> observed in the resident's rooms? <i>Environment</i> is not clean or homelike - Resident care equipment (e.g., mechanical lift, commode, hemodialysis or peritoneal equipment) is unclean, in disrepair, or stored in an improper or unsanitary manner - Lighting, water temperatures, and noise levels are unacceptable to the resident - Uncomfortable room temperatures (e.g., too cool or too warm) - Stains from water damage that could lead to mold - For residents on transmission-based precautions, is dedicated or disposable noncritical resident care equipment (e.g., blood pressure cuffs) used?	No Issues/NA Further Investigation
Nutrition	<i>If a resident has signs of poor nutrition (e.g., low body weight, frail, weak, sunken cheeks, reduced muscle mass etc.), did you observe any issues with the resident being assisted with meal set up, cued, or encouraged to eat as needed?</i>	No Issues/NA Further Investigation MDS Discrepancy
Hydration	- Does the resident have dry, cracked lips, dry mouth, sunken eyes and signs of thirst? <i>Does the resident have difficulty accessing fluids (e.g., fluids at the bedside, staff offering and encouraging fluids throughout the day, opening fluids at meals)?</i> - Is the resident receiving IV fluids?	No Issues/NA Further Investigation MDS Discrepancy
Tube Feeding	If tube feeding is infusing, <i>are there any issues with interventions (e.g., proper positioning, appropriate flow rate) being implemented to prevent aspiration?</i>	No Issues/NA Further Investigation

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	Is the feeding <i>im</i>properly labeled (e.g., date, time initiated, nurses' initials)?	MDS Discrepancy
ADLs	- Are any of the following observed? - Hair disheveled, uncombed or greasy - Facial hair unkempt or present on a female resident - Face, clothing or hands/fingernails unclean - Poor body or oral hygiene - Teeth or dentures not brushed - Clothing visibly soiled or in disrepair - If the situation presents itself, are there other concerns with the assistance provided for other ADLs (e.g., dressing or transfers)?	No Issues/NA Further Investigation
Catheter	- If the resident has a urinary catheter: - Is the catheter tubing <i>im</i>properly secured, obstructed, <i>or</i> kinked? - Is the catheter drainage bag maintained <i>above</i> the level of the bladder and is it positioned <i>on</i> the floor? - Are there signs and symptoms of infection (e.g., foul smelling urine, sediment, blood or mucus)?	No Issues/NA Further Investigation MDS Discrepancy
Respiratory Infection	<i>Does the resident have signs or symptoms of a respiratory infection (e.g., wheezing, altered breathing such as rapid breathing, coughing with yellow phlegm)?</i>	No Issues/NA Further Investigation MDS Discrepancy
Urinary Tract Infection (UTI)	<i>Does the resident have signs or symptoms of an infection (e.g., confusion, delirium)?</i>	No Issues/NA Further Investigation MDS Discrepancy
Transmission-Based Precautions	<i>If a resident is on TBP precautions, are appropriate PPE supplies missing or is TBP signage unclear or not visible outside of the resident's room?</i> <i>Are staff wearing and removing gowns, gloves, and/or masks inappropriately?</i> <i>Are staff inappropriately following hand hygiene practices?</i>	No Issue Further Investigation NA

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Positioning	If a resident is unable to position him or herself, are any of the following observed? ○ Lack of arm/shoulder <i>and body support to maintain in an upright position</i> ○ Head <i>tilted</i> to one side, <i>or positioned at an awkward angle</i> ○ Hyperflexion of the neck ○ Uncomfortable <i>chair or bed positioning</i> ○ Leaning to the side without support to maintain an upright position ○ Wheelchair too big or too small (seat too long/short, seat too high/low) ○ Dangling legs and feet that do not comfortably reach the floor and/or without needed foot pedals in place ○ Sagging mattress while lying in bed ○ Legs and/or feet hanging off the end of a too short mattress	No Issues/NA Further Investigation
Falls	● Did you observe any concerns with the resident falling or almost falling?	No Issues/NA Further Investigation MDS Discrepancy
Pain	● <i>Is there evidence the resident is in pain</i> (e.g., pained facial expression, moaning, groaning, guarding, rubbing body parts) <i>without staff identifying and effectively addressing the pain?</i>	No Issues/NA Further Investigation MDS Discrepancy
Pressure Ulcers	<u>For residents who have a pressure ulcer, are any of the following observed?</u> ● Is the resident positioned <i>on</i> the pressure ulcer, <i>which increases the pressure?</i> ● Are <i>any</i> pressure relieving devices <i>such as</i> heel protectors, w/c cushions, <i>or</i> padding between bony prominences, <i>missing or being used incorrectly?</i>	No Issues/NA Further Investigation MDS Discrepancy
Limited ROM	● Does the resident have a limitation in ROM or a contracture <i>without any intervention?</i> ● Is a splint device in place and correctly applied? NOTE: ROM limitation = Limited extent of movement of a joint. Contracture = Condition of fixed high resistance to passive stretch of a muscle.	No Issues/NA Further Investigation MDS Discrepancy
Hospice	<u>For a resident who is receiving hospice services:</u>	No Issues

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	- Does the resident appear uncomfortable or show any signs of agitation or distress? - Is there <i>an issue with the family having enough</i> room to visit in <i>private</i>?	Further Investigation NA MDS Discrepancy
Vent/Trach	<u>For a resident on a ventilator:</u> - Are there signs of anxiety, distress or labored breathing? <i>Are there any issues with the head of the bed not being in the proper position to prevent aspiration and or distress?</i> <i>Are there any issues with</i> suction equipment being immediately accessible <i>and ready for use?</i> <i>Are the ventilator alarms set to silent or disabled?</i> If the alarm sounds, does staff respond <i>in an unreasonable amount of time?</i> <u>For a resident with a trach:</u> - Is there <i>redness, swelling, or drainage at the</i> tracheostomy site? <i>Are there any issues with</i> emergency tracheostomy equipment, Ambu bag, and functional suction equipment <i>being</i> readily assessable in the room?	No Issues Further Investigation NA MDS Discrepancy
B&B incontinence	- Does the resident have a urine or BM odor? - Does the resident have soiled clothes or linens with urine or BM <i>without timely incontinence care?</i>	No Issues/NA Further Investigation MDS Discrepancy
Smoking	<u>For residents who smoke/vape which includes tobacco cigarettes, electronic cigarettes/vapor pen:</u> - Is the resident <i>engaging in unsafe</i> smoking <i>or</i> vaping <i>behavior?</i> - Are safety precautions, <i>such as</i> no oxygen, <i>use of a</i> smoking apron, supervision if unsafe, or access to appropriate ashtrays), <i>missing or not being followed?</i> - Are there burn marks on the resident's clothing, furnishings or wheelchair?	No Issues Further Investigation NA
Other Concerns	Are there any other concerns observed for this resident?	No Issues/NA Further Investigation