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How to do it... Information technology

March 01, 2010

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With updates and more information about MDS 3.0 being released by the Centers for Medicare & Medicaid Services, it is important for everyone to keep abreast of what's happening, notes Doc DeVore, vice president, product strategy, for MDI Achieve.

"Stay current with what is going on in the evolution of the MDS 3.0 specifications and ensure that you're software vendor is doing the same," DeVore advises. "The CMS Web site is updated frequently with the latest technical information."

2

It is very important providers look for certain cues from their vendors, several experts pointed out.

"They should be evaluating what they will be doing with their software companies, as there are many who will not be retrofitting MDS 3.0 into prior versions of their software," explained Lisset Sanchez-Schwartz, senior director of marketing for AOD Software.

"It is important to talk to the software vendor and ensure that the facility is already on the latest version of the system so the transition to MDS 3.0 will be seamless from an IT perspective."

3

As always, you should make plans for the unexpected, so to speak, Sanchez-Schwartz adds.

"If the software vendor will not be transitioning to MDS 3.0 at all, then facilities need to waste no time in finding a new vendor. You don't want to overwhelm your staff by having a new MDS and a new software system (simultaneously)," she said.

4

Taking the initiative to learn what your operation needs is one of the first steps needed, says Jim Smith, director of marketing for Wound Expert by Net Health Systems.

"Make a rational needs analysis," he says, emphasizing "rational." Added MDI Achieve's DeVore: "Educate yourself to start developing your own implementation plan," considering "how your facility's resident data collection procedures feed into the MDS."

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Staff training will be "critical," DeVore pointed out. Find out who will lead and who will embrace it.

"You may want to identify a 'super user' who can become an expert on MDS 3.0, as well as the software you'll be using to complete it," he said.

6

Don't get ahead of yourself and forget about the IT "stuff" that will be needed to execute the new program.

"A hardware review must be included to be sure their system meets any new requirements due to MDS 3.0," said Suzy Greenly, manager of product management for Keane Care.

Then, concentrating on things such as how new interview sections will be completed come into play.

7

Because the interviews regarding mental status (BIMS) and resident mood (PHQ-9) will be new, providers have to ask themselves a handful of key questions about getting ready for them, said Carrie O'Connell, vice president, clinical development, Health Care Software Inc. A few of them are:

Will the interview results be entered directly into the electronic record, along with the Signs and Symptoms of Delirium?

What collection tools does the facility need to support coding of the interviews?

When should data collection processes change to support the new coding?

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Several experts also pointed out that if a provider has not yet gone paperless, this would be an excellent time to do so.