

Section B

Hearing, Speech, and Vision

Objectives₁

- State the intent of Section B Hearing, Speech, and Vision.
- Describe the process for assessing:
 - Resident's ability to hear
 - Resident's ability to understand and communicate with others
 - Resident's visual limitations or difficulties

Objectives₂

- Describe the communication skills to be assessed:
 - Speech clarity
 - Ability to make self understood
 - Ability to understand others
- Code Section B correctly and accurately.

Intent of Section B

Hearing, Speech, and Vision



- Evaluate resident's ability to hear, ability to understand and communicate with others, and visual limitations or difficulties.

Item B0100

Comatose

B0100 Importance

- Complications of immobility.
 - Skin breakdown
 - Joint contractures
- Impact on MDS 3.0.
 - Cannot complete resident interviews for applicable sections.
 - Includes Section C, Section D, Section F, etc.
 - Complete the staff assessment for these residents.

B0100 Conduct the Assessment

- Review the medical record.
- Determine if a neurological diagnosis of comatose or persistent vegetative state has been documented by licensed staff as permitted by state law:
 - Physician
 - Physician Assistant
 - Nurse Practitioner
 - Clinical Nurse Specialist

B0100 Assessment Guidelines

- A diagnosis must be documented in the resident's medical record.
- Residents in advanced stages of progressive neurological disorders may:
 - Display severe cognitive impairment.
 - Be non-communicative.
 - Sleep a great deal of the time.
- This does not meet the definition of comatose or persistent vegetative state.

B0100 Coding Instructions

- **Code 0. No**
 - Diagnosis is not present in the look-back period.
 - Continue to B0200 Hearing.
- **Code 1. Yes**
 - Skip to Section G Functional Status, item G0100.
 - Do not complete Sections C, D, E, and F.

B0100. Comatose	
Enter Code	Persistent vegetative state/no discernible consciousness
<input type="checkbox"/>	0. No → Continue to B0200, Hearing
<input type="checkbox"/>	1. Yes → Skip to G0110, Activities of Daily Living (ADL) Assistance

0	No
1	Yes

Item B0200 & B0300

Hearing & Hearing Aid

B0200 & B0300 Importance

- Problems can contribute to:
 - Sensory deprivation
 - Social isolation
 - Mood and behavior disorders
- Hearing impairment can be mistaken for:
 - Confusion
 - Cognitive impairment
- Opportunity to confirm that residents have any needed appliances and support.

B0200 & B0300

Conduct the Assessment₁

- Determine if the resident uses a hearing aid or other appliance before beginning the hearing assessment.
 - Ask the resident.
 - Write the question down if the resident cannot respond.
 - Check with family and care staff if the resident still cannot respond.
 - Check the medical record for evidence of a hearing appliance.



B0200 & B0300

Conduct the Assessment₂

- **Always attempt a resident interview.**
 - Ask about hearing function in different situations.
- Observe the resident.
 - During the interview
 - During interactions with others
- Think about accommodations you make to communicate with the resident.
- Review the medical record.
- Consult family, direct care staff, activities personnel, and speech or hearing specialists.

B0200 & B0300

Assessment Guidelines

- Determine if the resident uses a hearing appliance before starting the assessment.
- Use any normal hearing appliance during the assessment.
- Ensure the appliance or device is operational.
- Residents with cognitive impairment require alternative assessment methods.

B0200 Coding Instructions

- Code the response option that best reflects the resident's hearing ability.

B0200. Hearing	
Enter Code <input type="checkbox"/>	Ability to hear (with hearing aid or hearing appliances if normally used) 0. Adequate - no difficulty in normal conversation, social interaction, listening to TV 1. Minimal difficulty - difficulty in some environments (e.g., when person speaks softly or setting is noisy) 2. Moderate difficulty - speaker has to increase volume and speak distinctly 3. Highly impaired - absence of useful hearing

Ability to hear (with hearing aid or hearing appliances if normally used)
0 **Adequate** - no difficulty in normal conversation, social interaction, listening to TV
1 **Minimal difficulty** - difficulty in some environments (e.g., when person speaks softly or setting is noisy)
2 **Moderate difficulty** - speaker has to increase volume and speak distinctly
3 **Highly impaired** - absence of useful hearing

B0300 Coding Instructions

- Indicate whether the resident used a hearing appliance during the hearing assessment for B0200.
- Does not document whether a resident owns a hearing appliance.

B0300. Hearing Aid	
Enter Code	Hearing aid or other hearing appliance used in completing B0200, Hearing
<input type="checkbox"/>	0. No
<input type="checkbox"/>	1. Yes

Hearing aid or other hearing appliance used in completing B0200, Hearing

Item B0600

Speech Clarity

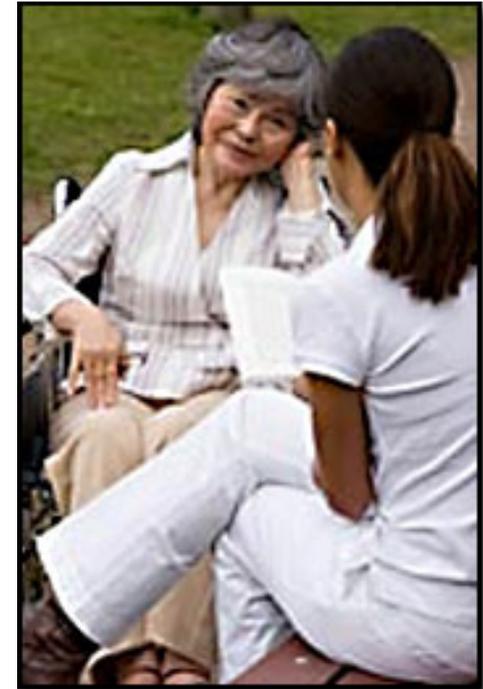
B0600 Importance

- Unclear or absent speech can:
 - Hinder communication.
 - Frustrate an individual.
 - Result in physical and psychosocial needs not being met.
 - Contribute to depression and social isolation.



B0600 Conduct the Assessment

- Listen to the resident.
- Ask primary assigned caregivers about resident's speech pattern.
 - Family/ significant other(s)
 - Staff members
- Consult medical record.



B0600 Assessment Guidelines

- Focus on the quality of speech only.
- Do not consider the content or appropriateness of the resident's speech.

B0600 Coding Instructions

B0600. Speech Clarity

Enter Code

Select best description of speech pattern

0. Clear speech - distinct intelligible words
1. Unclear speech - slurred or mumbled words
2. No speech - absence of spoken words

Select best description

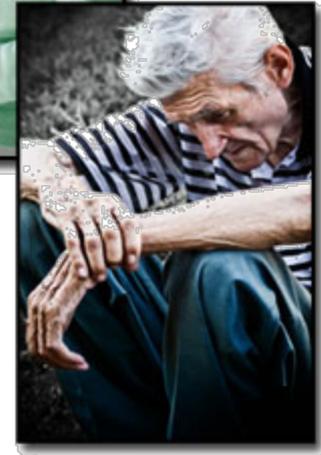
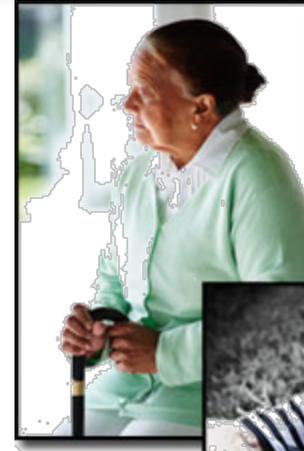
- 0 Clear speech - dis
- 1 Unclear speech -
- 2 No speech - ab

Item B0700

Makes Self Understood

B0700 Importance

- Problems making self understood.
 - Frustration
 - Social isolation
 - Mood and behavior disorders
- Problems mistaken for:
 - Confusion
 - Cognitive impairment



B0700 Definition

- Makes self understood if:
 - Express or communicate requests, needs, and opinions.
 - Conduct social conversation.
 - Use an alternative method of communicating.
- Deficits can include
 - Reduced voice volume
 - Difficulty producing sounds
 - Difficulty in expression



B0700 Conduct the Assessment₁

- Interact with the resident.
 - Make sure the resident can hear you.
 - Use preferred method of communication.
- Offer alternative means of communication.
 - Writing
 - Pointing
 - Cue cards

B0700 Conduct the Assessment₂

- Observe interaction with others in different settings and circumstances.
- Consult with other staff and family.
 - Primary nurse assistant (over all shifts)
 - Resident's family
 - Speech-language pathologist

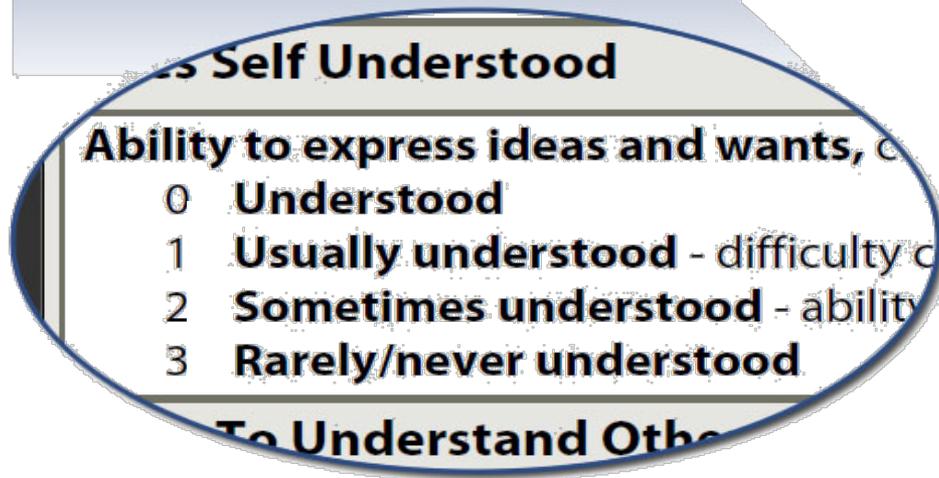
B0700 Assessment Guidelines

- Conduct the assessment in the resident's preferred language.
- Need for an interpreter is not an inability to make self understood.
- Interpreter needs to provide guidance on speech clarity for residents that speak a foreign language.
- Consider both verbal and non-verbal expression.

B0700 Coding Instructions

- Enter the code that best reflects the resident's ability to express ideas and wants.

B0700. Makes Self Understood	
Enter Code	Ability to express ideas and wants, consider both verbal and non-verbal expression
<input type="checkbox"/>	0. Understood
	1. Usually understood - difficulty communicating some words or finishing thoughts but is able if prompted or given time
	2. Sometimes understood - ability is limited to making concrete requests
	3. Rarely/never understood



Item B0800

**Ability to
Understand Others**

B0800 Importance

- Inability to understand direct communication:
 - Limits association with others.
 - Inhibits the ability to follow health and safety instructions.



B0800 Definition

- Ability to understand others includes:
 - Comprehension of direct person-to-person communication
 - Ability to understand and process language
- Deficits can include:
 - Decline in hearing
 - Comprehension
 - Recognition of facial expressions

B0800 Conduct the Assessment

- Interact with the resident.
- Observe the resident's understanding of other's communication.
- Consult with:
 - Staff
 - Family
 - Speech language pathologist
- Review medical record.



B0800 Assessment Guidelines

- Conduct the assessment in the resident's preferred language.
- Do not include comprehension problems due to lack of an interpreter.
- Use normal hearing and communication devices.
- Make sure any devices are operational.

B0800 Coding Instructions

- Enter the code that best reflects the resident's ability to understand verbal content however able.

B0800. Ability To Understand Others

Enter Code

Understanding verbal content, however able (with hearing aid or device if used)

0. Understands - clear comprehension
1. Usually understands - misses some part/intent of message but comprehends most conversation
2. Sometimes understands - responds adequately to simple, direct communication only.
3. Rarely/never understands

- Understanding verbal content**
- 0 **Understands** - clear comprehension
 - 1 **Usually understands** - misses some part/intent of message but comprehends most conversation
 - 2 **Sometimes understands** - responds adequately to simple, direct communication only.
 - 3 **Rarely/never understands**

Item B1000 & B1200

**Vision and
Corrective Lenses**

B1000 & B1200 Importance

- Reading vision diminishes over time.
- Vision impairment can:
 - Impede everyday activities and hobbies.
 - Affect ability to conduct ADLs.
 - Limit the ability to manage personal business.
- Contributes to sensory deprivation, social isolation, and depressed mood.
- Increases risk of falls.

B1000 & B1200

Conduct the Assessment₁

- Determine if the resident uses eyeglasses or another vision aid before beginning the hearing assessment.
 - Ask the resident.
 - Check with family and care staff.
 - Check the medical record for evidence of corrective lenses.



B1000 & B1200

Conduct the Assessment₂

- Ask direct care staff about resident's usual vision patterns during the look-back period.
 - Newsprint
 - Menus
 - Greeting cards
- Ask resident about visual abilities.



B1000 & B1200

Conduct the Assessment₃

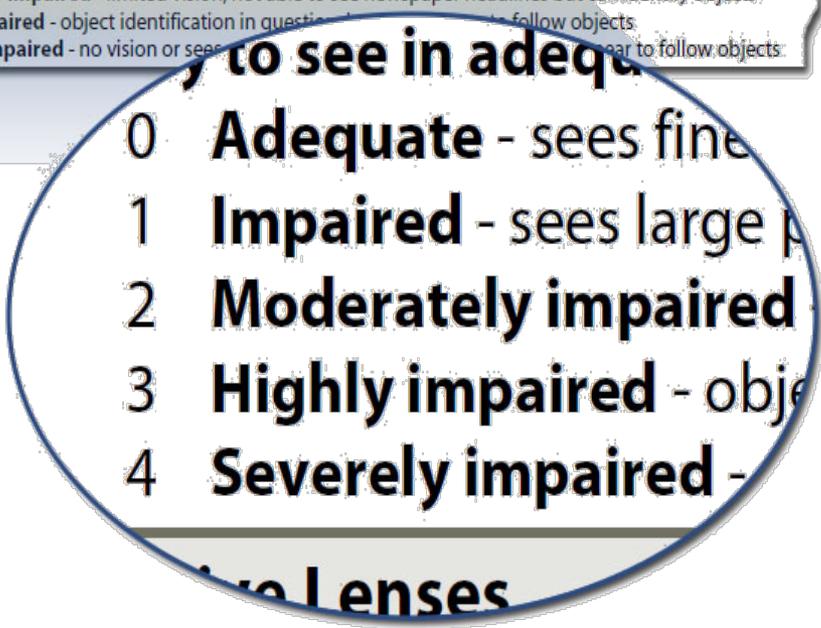
- Test the accuracy of these findings.
 - Ensure visual appliance for close vision is in place.
 - Ensure adequate lighting.
 - Provide reading material.
 - Have the resident read aloud.
- For residents who cannot read out loud.
 - Ask to read numbers.
 - Ask to name items in small pictures.
- Check gross measures of visual acuity.

B1000 & B1200 Assessment Guidelines

- Conduct the reading test in an area with adequate lighting.
- Use any necessary visual appliance for close vision.
- Visual aids do not include surgical lens implants.
- Code item B1200 to indicate whether a corrective lens was used during the vision assessment.

B1000 Coding Instructions

B1000. Vision	
Enter Code	Ability to see in adequate light (with glasses or other visual appliances)
<input type="checkbox"/>	0. Adequate - sees fine detail, including regular print in newspapers/books
	1. Impaired - sees large print, but not regular print in newspapers/books
	2. Moderately impaired - limited vision; not able to see newspaper headlines but can identify objects
	3. Highly impaired - object identification in question; unable to follow objects
	4. Severely impaired - no vision or sees only light; unable to follow objects



B1200 Coding Instructions

- Document whether the resident used corrective lenses or other visual aids during the vision assessment.
- Does not document whether the resident uses corrective lenses or another visual aid.

B1200. Corrective Lenses	
Enter Code	Corrective lenses (contacts, glasses, or magnifying glass) used in completing B1000, Vision
<input type="checkbox"/>	0. No
<input type="checkbox"/>	1. Yes

0 No
1 Yes

Section B

Q&A Activity

What is required to code a resident as comatose or in a persistent vegetative state for the purpose of the MDS 3.0?

- A. A physician's order to be submitted with the MDS 3.0 documentation.
- B. Diagnosis applicable to the look-back period in the resident's medical record.
- C. Diagnosis of dementia or MR/DD after the age of 22.
- D. Diagnosis entered in the resident's medical record upon admission to the facility.

A resident's hearing should be assessed without hearing aids or appliances in order to document the resident's current hearing ability.

- A. True
- B. False

What is the purpose of Section B0600 Speech Clarity?

- A. Determine the quality of a resident's speech.
- B. Determine the resident's ability to follow simple directions.
- C. Determine the resident's ability to answer simple questions correctly.
- D. Determine the resident's ability to express needs and requests.

Which of the following applies to Section B0800 Ability to Understand Others?

- A. Addresses ability to comprehend direct person-to-person communication.
- B. Includes ability to process and understand language.
- C. Assess using the resident's preferred language.
- D. Assess using any normally used hearing appliance.
- E. All of the above.
- F. None of the above.

When conducting the assessment for Section B1000 Vision, which of the following will you use to confirm your findings?

- A. Vision test conducted by an optometrist.
- B. Vision test conducted by a qualified clinician using standard tools and charts.
- C. Reading test using the resident's normal vision aid.
- D. Interview with the resident's physician.

Section B

Summary

Section B Summary

- Evaluate a resident's ability to interact with the environment and people around him or her and the ability to make needs or wishes known.
- An accurate assessment is essential to ensure that resident's are not misdiagnosed with other conditions or problems and receive appropriate care and support.