



QUALITY MEASURE TIP SHEET: Urinary Tract Infection—Long Stay

Quality Measure Overview

Data sources is Minimum Data Set (MDS) for long-stay residents with a selected target assessment. This measure reports the percentage of residents with a urinary tract infection (UTI) diagnosis within the last 30 days.

Exclusions – this measure will not be triggered if:

1. Target assessment is an admission assessment (A0310A = [01]) or a PPS 5-Day assessment (A0310B = [01])
2. Urinary tract infection value is missing (I2300 = [-])

MDS Coding Requirements

Item I2300 Urinary tract infection (UTI):

UTI has a look-back period of 30 days for active disease instead of 7 days.

Code only if **both** of the following are met during the 30-day look back period:

1. It was determined that the resident had a UTI using evidence-based criteria such as McGeer, NHSN, or Loeb in the last 30 days
2. A physician documented UTI diagnosis (or by a nurse practitioner, physician assistant, or clinical nurse specialist if allowable under state licensure laws) in the last 30 days

Tips

- Download the MDS 3.0 Resident Level report, in the CASPER (Certification And Survey Provider Enhanced Reports) reporting application, accessible in QIES (Quality Improvement and Evaluation System), and review each resident currently triggering the LS UTI QM
- Confirm the MDS for UTI active diagnosis is coded according to the Resident Assessment Instrument requirements
- Establish a process to timely submit updated MDS for all LS residents who triggered when none of the MDS UTI coding criteria is present
- Select which evidence-based UTI criteria is used at your facility, McGeer, NHSN, or Loeb
- Train nurses and clinicians who can document UTI diagnosis how to use the selected UTI criteria and monitor their compliance using the criteria
- Confirm resident care plan includes appropriate UTI prevention and that direct care staff are following the care plan
- Educate staff to be proficient with performing perineal care, catheter-care and hand hygiene, then audit compliance, and promptly act on compliance results
- Monitor and confirm appropriate resident hydration especially residents that trigger the UTI QM

Resources

- [Minimum Data Set \(MDS\) 3.0 Resident Assessment Instrument \(RAI\) Manual](#)
- [MDS 3.0 QM Users Manual](#)