

Approach for Assessing Hearing Loss and Planning for Care in the Nursing Home Setting with Text Condensed from the MDS 3.0 Manual*

- Steps for Assessment
 1. Ensure that the resident is using his or her normal hearing appliance if they have one.
 - Some residents may use hearing amplifiers or a microphone and headphones as an alternative to hearing aids.
 2. Ensure whatever hearing appliance is used, it is operational.
 3. Interview the resident.
 - Ask about hearing function in different situations.
 4. Observe the resident during your verbal interactions and when he or she interacts with others throughout the day.
 5. Think through how you can best communicate with the resident.
 - You may need to speak more clearly, use a louder tone, speak more slowly or use gestures.
 - The resident may need to see your face to understand what you are saying.
 - You may need to take the resident to a quieter area for them to hear you.
 - All of these are cues that there is a hearing problem.
 6. Review the medical record.
 7. Consult the resident's family, direct care staff, activities personnel, and speech or hearing specialists.
- Response Categories
 - *Adequate:*
 - No difficulty in normal conversation, social interaction, or listening to TV.
 - *Minimal difficulty:*
 - Difficulty in some environments (eg, when a person speaks softly or the setting is noisy).
 - The resident's hearing is adequate after environmental adjustments are made, such as moving to a quiet room.
 - *Moderate difficulty:*
 - Speaker has to increase volume and speak distinctly.
 - Resident compensates when the speaker adjusts tonal quality and speaks distinctly.
 - Resident can hear only when the speaker's face is clearly visible.

- *Highly impaired:*
 - Absence of useful hearing.
 - There is no comprehension of conversational speech, even when the speaker makes maximum adjustments.

Planning for care

0. Address reversible causes of hearing difficulty (such as cerumen impaction).
1. Evaluate potential benefit from hearing assistance devices.
2. Offer assistance to residents with hearing difficulties to avoid social isolation.
3. Consider other communication strategies for persons with hearing loss that is not reversible or not completely corrected with hearing devices.
4. Adjust environment by reducing background noise by lowering the sound volume on televisions or radios.

*Entries in this table are condensed, simplified versions of entries in the MDS 3.0 manual. The full text is available in The Centers for Medicare & Medicaid Services. Long-Term Care Facility Resident Assessment Instrument 3.0 User's Manual, Version 1.15. October 2017. Available at: www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html. Accessed November 25, 2017.

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