



ADL assistance

Helping residents with their ADLs is the largest part of a CNA's workday. It is important to be able to devote time to each resident and his or her particular needs. These tasks must not be pushed aside, as neglecting ADLs can create serious health problems in the future.

In addition, it is imperative to make residents feel as if they are able to care for themselves with as little assistance as possible, while assuring each individual of his or her own safety, health, and privacy.

This issue will define and explain the importance of the four **late-loss ADLs**. It will cover how CNAs can best assist residents with **eating**, including **techniques and communication**. It will also highlight elderly residents' **nutritional and dietary needs**.

One of the more intimate and difficult ADLs is **bathing**, which this lesson will address by explaining **general guidelines**, **care benefits**, and the effect of bathing on **residents' skin**.

Have a good day of training, and stay tuned for next month's issue of **CNA Training Advisor**, which will cover infection control and bloodborne pathogens.

PROGRAM PREP

Program time

Approximately 30 minutes

Learning objectives

Participants in this activity will learn how to:

- Identify the four late-loss ADLs
- Properly assist residents before, during, and after meals
- Describe elderly residents' nutritional needs
- Properly assist residents with washing and bathing

Preparation

- Review the material on pp. 2–4
- Duplicate the **CNA Professor** insert for participants
- Gather equipment for participants (e.g., an attendance sheet, pencils, etc.)

Method

1. Place a copy of **CNA Professor** and a pencil at each participant's seat
2. Conduct the questionnaire as a pretest or, if participants' reading skills are limited, as an oral posttest
3. Present the program material
4. Review the questionnaire
5. Discuss the answers

Resistant to bathing

Bathing is a highly personal routine. It is a good idea to determine individual preferences for each resident and to do your best to accommodate them. Some residents are resistant to bathing. Never force these residents to bathe. Instead, report the resistance to your supervisor. Often, a simple change in staff members, bathing time, or day will make a resident more agreeable and cooperative.

Quiz answer key

- | | | | | |
|------|------|------|------|-------|
| 1. b | 3. d | 5. d | 7. a | 9. d |
| 2. c | 4. a | 6. c | 8. b | 10. c |

Breaking the ADL Code

Use HCPro's comprehensive video, *Breaking the ADL Code: A Team Approach to MDS 3.0 Documentation*, to train your entire nursing team on the ADL documentation requirements under the MDS 3.0. Familiar scenarios provide concrete examples of each level of scoring, and walk CNAs and RNs through the correct ways to code the four late-loss ADLs. In addition, MDS coordinators will discover how to tabulate the ADL scores of each resident to come up with the final ADL codes.



For more information or to order, call 800-650-6787 or visit www.hcmarktplace.com/prod-8756.

Adl Assistance Hcpro

Ellen J. Mullins



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MDS 3.0 RAI User's Manual, 2010 Edition HCPro,2010-10 The MDS Coordinator's Field Guide 3.0 Ellen J. Mullins,2010-03 **Nursing and Therapy Documentation in Long-Term Care** Kate Brewer,2011-03 This resource will help you Align with MDS 3 0 documentation requirements Coordinate documentation between nurses and therapists to improve resident care Gain the perspective of nursing or therapy to appreciate their specific approach to skilled services Reduce your audit risk and strengthen reimbursement claims with comprehensive documentation Prove medical necessity and need for skilled care by practicing accurate documentation Page 4 of cover *The MDS Troubleshooter* Julia Hopp,2006

Long-Term Care Skilled Services Elizabeth Malzahn,2011-04-06 Long Term Care Skilled Services Applying Medicare s Rules to Clinical Practice Avoid common mistakes that compromise compliance and payment Take the mystery out of skilled services and know when to skill a resident based on government regulations Medicare updates the MDS 3 0 and proven strategies Long Term Care Skilled Services Applying Medicare s Rules to Clinical Practice illustrates the role played by nurses therapists and MDS coordinators in the application and documentation of resident care Don t miss out on the benefits and reimbursement you deserve as author Elizabeth Malzahn delivers clear easy to understand examples and explanations of the right way to manage the skilled services process This book will help you Increase your skilled census and improve your facility s reputation with the support of your entire staff Avoid under and overpayments from Medicare with easy to understand explanations of complex rules and regulations Provide necessary skilled services to each resident through a complete understanding of eligibility requirements Accurately document skilled services using proven time saving solutions Properly assess skilled services under the MDS 3 0 Improve communication to increase resident and family satisfaction Reduce audit risk and prove medical necessity through accurate documentation Table of Contents Rules and Regulations Original law Social Security and Medicare Act CMS publications Manuals Transmittals MLN matters National and local coverage determinations RAI User s Manual Hierarchy of oversight CMS MAC FI OIG GAO etc Technical Eligibility for Skilled Services in LTC Eligibility basics Verification of current benefits How enrollment in other programs impacts coverage under traditional Medicare Hospice HMO managed care Medicare Advantage Medicaid Medi Cal Hospital stay requirement 30 Day transfer rule for hospital or SNF Understanding benefit periods Care continuation related to hospitalization How does a denial of payment for new admissions impact Medicare SNF admissions Meeting the Regulatory Guidelines For Skilled Services Skilled services defined Regulatory citations and references Clinical skilled services Therapy skilled services Physician certifications and recertification Presumption of coverage Understanding practical matter criteria for nursing home placement Impact of a leave of absence on eligibility MDS 3 0 Assessments Sections and Selection Oh My Brief history of MDS 3 0 Types of MDS assessments The assessment schedule Items to consider Importance of timing Review of each care related section of the MDS 3 0 Proper Communication During the Part A Stay Medicare meeting Timinng Agenda What to

discuss for each resident Ending skilled services Notification requirements Discharging Other notification requirements and communication Other Important Things to Know Medicare myths Consolidated billing Medical review Audience Administrators CFO CEOs directors of nursing MDS coordinators directors of rehab therapy directors PT OT ST DONs

The Long-Term Care Restorative Nursing Desk Reference Barbara Acello, 2009-08-18 The Long Term Care Restorative Nursing Desk Reference is a new all inclusive desk reference that describes the clinical aspects of restorative nursing in detail and provides a much needed guide for nurses in a long term care facility This book offers the help you need to create or sustain an effective restorative care program that puts your resident s needs first **The QM/QI Troubleshooter** Les Masterson, Diane L. Brown, 2008 Rev ed of QI QM troubleshooter Bonnie Foster **Oasis-C Guidance Manual, Chapter 3** Health Beacon, 2009 Nursing Orientation Program Builder Adrienne E. Avillion, Debbie Buchwach, 2010 This binder and CD ROM walk you through each step of a well run orientation program so you can incorporate field tested evidence based practices at your facility Use this resource to evaluate your program outcomes fulfill Joint Commission orientation requirements train new graduates and meet the needs of a diverse workforce The How-To Manual for Rehab Documentation, Third Edition Rick Gawenda, 2009-04-06 The How To Manual for Rehab Documentation Third Edition A Complete Guide to Increasing Reimbursement and Reducing Denials Rick Gawenda PT Up to speed with Medicare documentation requirements for 2009 and beyond Increase cash flow and reduce Medicare claim denials by using strategies provided in the Third Edition of The How To Manual for Rehab Documentation Written by national consultant Rick Gawenda PT Since our last edition there have been significant changes to the rules and regulations surrounding documentation in therapy settings And now that the RACs are underway it is even more important to have accurate and thorough documentation Mistakes can lead to delayed payments and denials so how do ensure that you are in compliance with the current guidelines Make it easy Order your copy of The How To Manual for Rehab Documentation Third Edition A Complete Guide to Increasing Reimbursement and Reducing Denials Written by author and national consultant Rick Gawenda PT of Gawenda Seminars this book and CD ROM set focuses on the clinical aspects of documentation and offers proven methods to strengthen documentation and decrease the frequency of denials Gawenda encourages b documentation methods that have worked for him and help you conquer potentially tough concepts such as maintenance therapy and CPT codes What s new in the third edition Clarification of certification and re certification requirements regarding how long they are valid for and how soon they need to be signed Explanation of delayed certification Tips to write function based short and long term goals Updated examples of well written goals Updated payer documentation guidelines for evaluations progress reports daily notes discharge reports and re evaluations The How To Manual for Rehab Documentation Third Edition A Complete Guide to Increasing Reimbursement and Reducing Denials outlines proper documentation strategies starting from the moment a patient registers and receives treatment to billing for time and services Gawenda encourages b documentation methods that

have worked for him and help you conquer potentially tough concepts such as maintenance therapy and CPT codes This comprehensive book and CD ROM helps you Improve therapy billing through better documentation Prevent denials as a result of better documentation practices Maintain quality assurance through proper documentation Optimize your reimbursement from both Medicare and third party payers Avoid audits and targeted medical reviews Document care in a more efficient way Take the critical steps to verify therapy benefit coverage prior to a patient s initial visit Support skilled therapy services with inclusion of required documentation Understand Medicare certification and recertification time frames and requirements for all therapy settings Understand and use the most commonly used CPT codes and modifiers in rehabilitation therapy Table of Contents Chapter 1 The Role of the Registration Staff Registration Basics Benefit Verification Preregistering Chapter 2 Initial Documentation Evaluation Format Documentation Components Evaluation Process Objective Criteria Assessment Documentation Goals POC Documentation Creating a Solid Foundation Chapter 3 Certification and Recertification Physician Referrals Physician Referral Denials Outpatient Therapy Settings Certification and Recertification SNF Part A Therapy Services Reimbursed Under the Prospective Payment System PPS Home Health Agency Part A Therapy Services Chapter 4 Daily Documentation Daily Documentation Documentation Requirements Home Exercise Programs HEPs Plan Documentation Chapter 5 Progress Reports Discharge Reports and Reevaluations Progress Reports Discharges Reevaluations Chapter 6 Maintenance Therapy What is an FMP Coverage Criteria Documentation Requirements Billing Cover All Your Bases Chapter 7 Wound Care Under Medicare Discharge Criteria Additional Pointers Appendix A Navigating the CMS Web site Getting Started Final Word Make it easy to understand CMS documentation guidelines No need to download and interpret the guidance from the CMS Web site yourself Author Rick Gawenda PT has done the work for you His documentation practices are sure to help you receive optimal compensation for the services you perform as a therapist Nearly half of all rehab claim denials are STILL due to improper documentation Ensure proper documentation for services provided and decrease the frequency of denials Order The How To Manual for Rehab Documentation Third Edition A Complete Guide to Increasing Reimbursement and Reducing Denials today

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