G & GG Charting Options in ECS

MDS - Section G

The items in this section assess the need for assistance with activities of daily living (ADLs), altered gait and balance, and decreased range of motion (*CMS's RAI Version 3.0 Manual*).

Consists of **ADL Self-Performance** (independent, supervision, limited assistance, extensive assistance, total dependence, activity occurred only once or twice, activity did not occur) and **ADL Support** (no setup, setup help only, one person, two+ person, activity did not occur). The following ADLs are addressed in this section: bed mobility, transfer, walk in room, walk in corridor, locomotion on unit, locomotion off unit, dressing, eating, toilet use, personal hygiene.

ECS currently has two different modules available for CNA charting which captures section G coding. Either one can be assigned to the staff within an ARD window or can be setup to be required every day every shift. Both options are in our latest version of the CNA module which is built in access screens. This allows for the CNA staff to run an assignment sheet to see what charting is required to be completed, see charting required on an individual basis, as well as run an incompletion report to see missing documentation.

AM Shift (7-3)	PM Shift (3-11)	Night Shift (11-7)
AM Assignment Sheet	PM Assignment Sheet	Night Assignment Sheet
AM Charting	PM Charting	Night Charting
AM Incompletion Reports	PM Incompletion Reports	Night Incompletion Reports

Separate Topics

This method of CNA ADL charting was made available to all clients in 2010. Several changes have been made to the module since that time and this remains our most common form of CNA charting.

There are separate topics for each ADL, each of which has pictures to assist the user in coding the type of assistance being provided. The most updated version of this module includes the following changes that were made since its original introduction:

- No longer have "mistaken topic" but rather utilize the incompletion reports
- Have added instructional language into each ADL topic to better provide guidance to staff
- User is prompted with the number of times an activity occurred so as assist in accurately coding based on "rule of 3"
- Reports have been created which total the number of occurrences documented to assist the MDS Coordinators

CNA (AM)	Daily	
Bed Mobility	Walk in Room	Voiding
Transfers	Walk in Hall	Stool Output
Eating	Move on Unit	Dinner
Toileting	Move Off Unit	Snack
Hygiene	Dressing	

AM BED MOBILITY	LATE ENTRY	EXIT			
How resident moves to and from lying position, turns side to side, and positions body while in bed or alternate sleep furniture	Independent	Supervision	1 Assist	2+ Assist	Did Not Occur

SAVE	START OVER	
x 1	x 2	x 3 or More

AM BED MOBILITY   Supervision with Setup 3 time(s)

Condensed Topic

This is a newly created option which has all ADLs in one topic. Once a user loads the AM, PM, or Night shift access screen, there is only one easy button labeled ADLs. Once a user clicks into the ADLs topic, they are presented with the screen seen below.

Each ADL is then presented with the options seen here. Once an assistance type is selected, the user will be prompted to specify the number of times it occurred at that level. This is to assist in the MDS coding to ensure the "rule of 3" is accounted for appropriately. If a user needs to view the definition for a type of assistance, they may click onto the picture of the ADL or onto the assistance type labeled with a question mark behind it.

MDS - Section GG

This section includes items about functional abilities and goals. It includes items focused on prior function, admission performance, discharge goals, and discharge performance. Functional status is assessed based on the need for assistance when performing self-care and mobility activities (*CMS's RAI Version 3.0 Manual*).

Consists of the following activities: eating, oral hygiene, toileting hygiene, shower/bathe self, upper body dressing, lower body dressing, putting on/taking off footwear, roll left and right, sit to lying, lying to sitting on side of bed, sit to stand, chair/bed-to-chair transfer, toilet transfer, car transfer, walk 10 feet, walk 50 feet with two turns, walk 150 feet, walking 10 feet on uneven surfaces, 1 step (curb), 4 steps, 12 steps, picking up object, wheel 50 feet with two turns, and wheel 150 feet.

Section GG is required on all PPS assessments and in any states that require it to be completed on OBRA assessments. This may either be for reporting purposes or for payment purposes. As of 1/1/2022, WI will begin to require PDPM HIPPS codes for Medicaid payments. This means that any WI clients will need to complete section GG on all OBRA assessments in addition to PPS. Even for states that are switching to PDPM HIPPS codes, bear in mind that section G is still utilized for quality measures, CAAs, and is reviewed by state surveyors/case mix auditors. This means that staff may need to be educated on two different ADL coding keys.

Although it is not specified who amongst the care team is required to complete section GG charting, it is typically recommended that the following departments play a role within the final determination. Because of this, there are charting screens available for each department to be used dependent on facility practices.

Coding is based on "usual performance" rather than the "rule of three." The lookback is the ARD plus two previous days, so make sure that this is either being assigned in that range or completed daily on every shift.

If section GG is still new to your facility, CMS has educational material available:
- Course 1: Understanding Prior Functioning and Prior Device Use: https://pac.training/courses/GG_course1/#/
- Course 2: GG0130 Self Care Items: https://pac.training/courses/GG_course2/#/
- Course 3: GG0170 Mobility Items: https://pac.training/courses/GG_course3/#/
- Pocket guides available to be worn with name badges: https://www.cms.gov/files/document/pocket-guidecoding-self-care-and-mobility-items.pdf
- Job Aides (scroll to bottom of page in Downloads section): https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Training

Job Aide Example from CMS website

CNA

ECS has two different options to clients for CNA Section GG documentation. Each option consists of a total of nine topics. One for self-care, transfers, and mobility, for each shift (AM, PM, and NOC). Keep in mind that neither option is setup to automatically populate the MDS as the care team still needs to make the final decision as to the resident's "usual" performance. However, there are several view tasks that include all the charting completed by CNA users so that it can be easily reviewed by the team.

CNA GG v1

AM SELF CARE	SAVE	START OVER	LATE ENTRY	EXIT
	EATING	ORAL HYGIENE	TOILETING HYGIENE	SHOWER/BATHE
	The ability to use suitable utensils to bring to mouth & swallow food once the meal is presented on a table/tray. Includes modified food consistency.	The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth and manage equipment for soaking and rinsing them.]	The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managain an ostomy, include wiping the opening but not managing equipment.	The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower.

- Was merged out to all clients when GG was first introduced to the MDS.
- Has wording for GG language directly on the screen, but no pictures.
- To document the user selects the self-care topic being addressed and is then jumped to a different part of the screen where all coding options are available to select from.
- In this option, the user will jump between each ADL type and the options. This option works well if a user typically documents all ADL information on a resident at one time.

CNA GG v3

AM SELF CARE	SAVE	START OVER	LATE ENTRY	EXIT			
	Independent	Setup or Clean-Up Assistance	Supervision or Touching Assist	Partial/ Moderate	Substantial/ Maximal	Dependent	Did Not Occur
	Independent	Setup or Clean-Up Assistance	Supervision or Touching Assist	Partial/ Moderate	Substantial/ Maximal	Dependent	Did Not Occur
	Independent	Setup or Clean-Up Assistance	Supervision or Touching Assist	Partial/ Moderate	Substantial/ Maximal	Dependent	Did Not Occur
	Independent	Setup or Clean-Up Assistance	Supervision or Touching Assist	Partial/ Moderate	Substantial/ Maximal	Dependent	Did Not Occur

- Would require transfer in files (included in the flat rate discussed further below).
- Picture charting which all fits within one screen.
- This makes it easier for a user to click through all the coding options on a resident and click the arrow to jump to the next resident to chart on them. Allows for easier transitions between each resident.

- This option works well if the user typically documents all dressing on all residents at one time, and then documents toileting on all residents at one time as this option allows the user to see all ADL options in the beginning of the screen and does not jump them through the screen at all.

Nursing

In the **Nurse Charting** or **Assessments** tab, there is a **Functional Abilities & Goals** topic. The charting in here can be assigned via the **Nursing To Do List** so that it is completed within the lookback window necessary.

Once this is assigned on the to do list, the nurse will be flipped to a topic where they can view the CNA documentation as well as complete the necessary charting based on what type of assessment is assigned to them. In addition, there will be an abbreviated version of GG charting available which only lists out the questions that are not addressed via the CNA screens. These are questions that most likely you will not want CNA staff to attempt and if a resident is not receiving any therapy services, someone will need to address them. An example of these questions may be walking on uneven surfaces or picking up an object.

If you notice that in your topic any of the language is outdated or questions or missing, that may mean that the topic was not kept updated as new questions were added throughout the years. This topic would be updated as part of the flat fee rate mentioned above. All these questions will populate and produce blue highlights on the MDS in section GG.

Therapy

In the Therapy tab, there are two topics available for section GG documentation: **Mobility Ability/Goals (GG)** and **Self Care Ability/Goals (GG).** If you notice that in your topic any of the language is outdated or questions or missing, that may mean that the topic was not kept updated as new questions were added throughout the years. This topic would be updated as part of the flat fee rate mentioned below. All these questions will populate and produce blue highlights on the MDS in section GG.

Changes Included in the Setup Fee

The below setups are all included in the $100 setup fee:
- CNA charting for section GG (facility chooses v1 or v3)
- Setup a location in the CNA Assignments topic for assigning GG charting based on the ARD
- CNA access buttons that will light up when charting is assigned
- CNA incompletion and assignment sheet reports linked up to GG assignments
- Nursing To Do List topic updated with an option to assign GG charting based on ARD and/or assessment type (admission, discharge, IPA, abbreviated)
- Nursing topic setup with abbreviated assessment as well as all language updated
- Therapy topics setup with updated language