

MDS Alert

Documentation Tip: Flow Sheets Not Flowing?

Here's an easy solution.

The MDS coordinator shouldn't rely on the ADL flow sheets alone to code Section G. One way to augment the information - or replace the flow sheet entirely - is to use a 24-hour report book to capture changes in the resident's usual ADL functioning.

Training is the linchpin to making the system work. "For example, the CNA on a night shift should know to tell the charge nurse at report that she had to provide more assistance in transferring a resident than his usual baseline requirement for support," says **Rena Shephard, MHA, RN, FACDONA**, president, **RRS Healthcare Consulting Services** in San Diego, and chair of the **American Association of Nurse Assessment Coordinators**. "The charge nurse then writes that information in the 24-hour report book and follows up with an assessment of the resident and immediate care plan changes, if needed," Shephard says. "And the MDS nurse can look at the book to capture the ADL information for RUGs or the OBRA-required care plan, if the resident is in an assessment window."