

# Creating Documentation for Section GG

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## Inter-disciplinary Approach

Functionality of the documentation is assuming a full inter-disciplinary team approach. However, each facility will have its own policies reflecting who is responsible for this documentation. You will need to be aware of such policies when completing the setup.

1. Individuals from within multiple disciplines can enter performance baseline observations for each shift during the three-day observation periods.
2. An oversight person (your qualified clinician responsible for the assessment) from each of those disciplines can review the information and establish the performance baseline and, for the 5-day assessment, the discharge goal(s) for their discipline. For example, nursing oversight may review CNA and nursing (LPN or RN) data/documentation for all three shifts during the period and then establish the nursing baseline with an appropriate goal(s). The therapy oversight person may do the same for all of the therapists and therapy aides.
3. Prior to completing the MDS, the MDS coordinator (or a team meeting), can review each discipline's baseline observations. Interviews can help reconcile any discrepancies between disciplines. The final baselines and goal(s) can be recorded along with notes to explain the conclusions.

## Setup

You must decide whether you wish CNAs to document the usual performance they see during their shifts over the first three days of admission/readmission or the last three days prior to a scheduled discharge. It will also apply to observations for the IPA (Interim Payment Assessment).

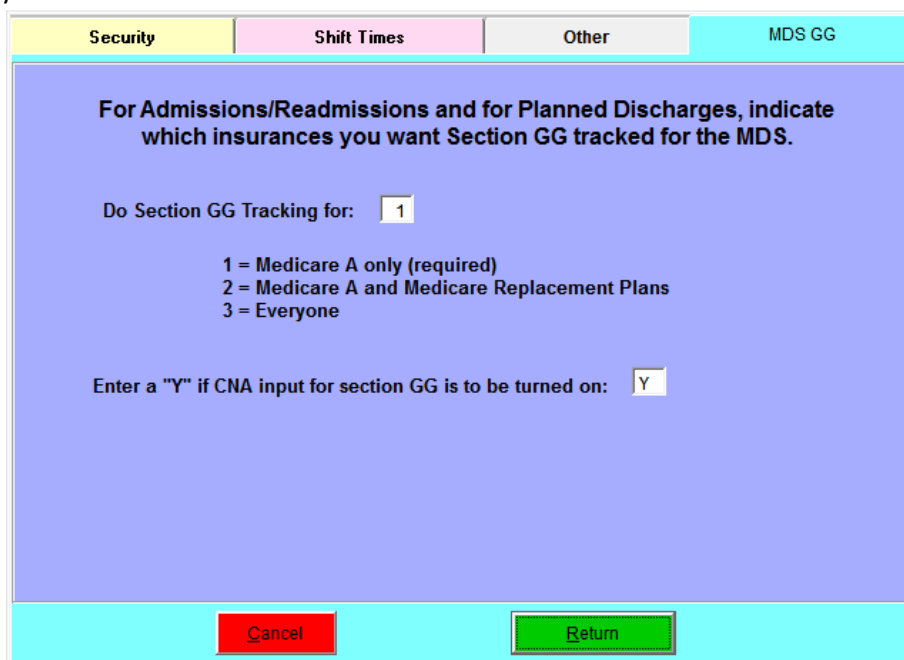
**Note:** This is documentation only. A discipline review and final decisions must be made by a qualified clinician. CNAs should not have access to those areas of the process.

### Resident Observations 3.0 – Utilities – ResObs Security

You must get everyone out of ResObs for a few minutes before you can make changes to the system. Once everyone is out, go to the fourth tab, **MDS GG**. You will need to decide the type of residents you are required to track. This will be facility specific and up to your individual policies. You have three options:

1. Open the option for only those who are traditional Medicare.
2. Open the option for all that have traditional Medicare as well as those on Replacement plans. Some facilities are doing this so that in the event they initially believe they are on a replacement and later discover they actually were traditional Medicare, they have the information available to complete the assessments.
3. Open the option for everyone.

You will also need to decide whether you are going to turn on this option for the CNAs. Answer the last question according to how you wish to handle this.



Security Shift Times Other MDS GG

**For Admissions/Readmissions and for Planned Discharges, indicate which insurances you want Section GG tracked for the MDS.**

Do Section GG Tracking for:

1 = Medicare A only (required)  
2 = Medicare A and Medicare Replacement Plans  
3 = Everyone

Enter a "Y" if CNA input for section GG is to be turned on:

Cancel Return

## Recording Observations

### CNA Data Entry

Security has been set to Y(es) for CNA input (see above).

If you are within three days of an admission or readmission census transaction or within three days of a scheduled discharge (see Entering a Planned Discharge Date) or within three days of an IPA, when CNAs complete their

normal **SHIFT END** observations, they will be presented with a new screen where they may enter their Performance observations.

Their screen will have series of tabs labeled with the MDS question numbers the data will be used for. They will click on the first, GG0130 a-c.

Resident: - 01/503C Date: 09/07/2018 Time: 14:29

**Eating** A. The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the resident.

**Oral Hygiene** B. The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.

**Toilet Hygiene** C. The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.

Buttons: Cancel, Clear Input, Next Page, Save Observations

They will have buttons for the various levels of care. Each button gives the number and word used to describe the amount of assistance per the MDS. Next to each button is a clue for that level of care. CNAs do NOT have the option of using 09 Not Applicable, 10 Not Attempted - Environmental, or 88 Not Attempted due to Medical Condition or Safety Concerns. They do, however, have a button for DID NOT HAPPEN THIS SHIFT. This is so the oversite person knows the aide did not just forget to record this observation.

**Resident's Usual Performance: - 01/503C for EATING**

Select the button that best describes how much effort the RESIDENT did and how much help you provided.

01 Totally Dependent	Resident gave NO effort. I did all the effort or more people had to help.	06 Needs no help - Independent	Resident did ALL. I did nothing.
02 Required lots of help	Resident did SOME. I did more than half the effort, lifting/holding trunk or limbs.	07 Resident Refused	Resident would not try activity, refused.
03 Required some help	Resident did MOST of the effort. I did less than half of lifting or holding.	Did not happen this shift	
04 Just Supervision or Touching Assistance	Resident did all BUT needed me to give verbal cues or touching/steading or contact guard assistance.		
05 Just Set-up or Clean-up help	Resident did all BUT I had to set up or cleaned up.		

Buttons: Cancel, Return

The CNA will click the button for the correct amount of assistance. That will return them to the list of tasks where they can select the next item, i.e. Oral Hygiene. They will continue until they have recorded a performance observation or “Did not happen for this shift” for each section. When finished, they will select SAVE OBSERVATIONS.

## Other Staff Observations

LPN, RN, therapists, social workers, dietary, activities, etc. – however you define your interdisciplinary team of qualified clinicians for Section GG documentation, can also record baseline observations for each of the three days. They can do so through **Resident Observations – Nursing Data Entry**.

Selection of the resident will determine which, if any, of the Section GG buttons are available to you. If you are not within the observation window, then none of the buttons will be active.

- **Section GG Tracking/Track GG Discharge/Track GG IPA** – allows you to record the baseline performance observations for your shift. The label on this button will change according to the scenario.
- **Final Discipline (Re)Admission GG Decisions** – this allows you to see all of the observations over the three-day period since the (re)admission transaction for YOUR discipline. You can review and make a final decision for the baseline performance at admission and the discharge goal(s) for YOUR discipline.
- **Final Discipline GG Decisions** – this option allows you to see all of YOUR discipline’s observations over the three days prior to the planned discharge, end of the PPS stay. Your discipline can review and enter the final decision for the baseline performance at discharge/end of PPS stay.
- **Final Discipline GG IPA Decisions** – this option allows you to see all of YOUR discipline’s observations over the three days period for your IPA. Your discipline can review and enter the final decision for the baseline performance.

The screenshot displays a software interface for Section GG documentation. At the top, a dark blue header contains the text "Select the correct Resident" in yellow. Below this, a "Resident:" label is followed by a dropdown menu showing "GEORGES - 02/008" and a yellow "Select a Resident" button. The main area features a grid of colored buttons: a purple "Interview Data" button, a cyan "Braden Scale" button, a green "LTC Fall Scale" button, a green "Morse Fall Scale" button, a pink "Tinetti Balance Assessment" button, an orange "Track GG Admit" button, an orange "Final Discipline (Re)Adm GG Decisions" button, a grayed-out "Final Discipline GG Discharge Decisions" button, and a grayed-out "Final Discipline GG IPA Decisions" button. A green "Finished" button is located at the bottom right.

In the above illustration, Ms. Georges is within the first three days since her admission. The system is open to allow tracking of the baseline performance and also for the disciplines to set the final decisions for the 5-day assessment (orange buttons) . There is no planned discharge within the next three days so the Final Decisions for the discharge are grayed out, inactive.

In this second scenario, Ms. Admitted is within three days of her planned discharge. The system is open allow tracking of the baseline performance and also for the disciplines to set the final decisions for the planned discharge, end of PPS assessment.

If the staff member does not have a discipline that is identifiable by the system, you will first see a list of disciplines to select from. We do our best to match what we can, but some facilities put the job title in the DISCIPLINE field in the password module. That can make matching disciplines more difficult. If that happens, simply select your discipline from the list so that you can proceed.

## SECTION GG TRACKING

This button will display similar screens to those the CNAs see during their shift-end routine. It will have the various tabs for each of the MDS questions. Select the first item, Eating.

Each button gives the number and word used to describe the amount of assistance per the MDS. Next to each button is a clue for that level of care. Notice that now the choices for 09 Not Applicable, 10 Not Attempted-Environmental, and 88 Not Attempted are available for selection.

**Resident's Usual Performance:** 01/503C for EATING

If helper assistance is required because resident's performance is unsafe or of poor quality, score according to amount of assistance provided. Activities may be completed with or without assistive devices.

<b>01 Dependent</b>	Helper does ALL of the effort. Resident does none of the effort to complete the activity, or the assistance of 2 or more helpers is required for the resident to complete the activity.	<b>06 Independent</b>	Resident completes the activity by him/herself with no assistance from a helper.
<b>02 Substantial/Maximal Assistance</b>	Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.	<b>07 Resident Refused</b>	
<b>03 Partial/Moderate Assistance</b>	Helper does LESS THAN HALF the effort. Helper lifts, holds or supports trunk or limbs, but provides less than half the effort.	<b>09 Not Applicable</b>	Not attempted and the resident did not perform this activity prior to the current illness, exacerbations, or injury.
<b>04 Supervision or Touching Assistance</b>	Helper provides verbal cues and/or touching, steady and/or contact guard assistance as resident completes the activity. Assistance may be provided throughout the activity or intermittently.	<b>10 Not Attempted - Environmental</b>	Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)
<b>05 Set-up or Clean-up Assistance</b>	Helper sets up or cleans up; resident completes the activity. Helper assists only prior to or following the activity.	<b>88 Not Attempted - Medical or Safety</b>	Not attempted due to medical condition or safety concerns

Cancel Return

Staff will click the button for the correct amount of assistance. That will return them to the list of tasks where they can select the next item, i.e. Oral Hygiene. They will continue until they have recorded a performance observation for each section they have responsibility for. When finished, they will select SAVE OBSERVATIONS.

## FINAL DISCIPLINE DECISIONS

At the end of the three-day observation or at the time of therapy interventions, each discipline will want to review their data entries and make a final determination as to baseline performance and, in the case of the admission, they will want to establish at least one goal.

### Resident Observations – Nursing Data Entry

Select the resident. You will use one of the final decision buttons depending on whether this is the admission side of the stay or the discharge side.

The illustrations below are based on the (Re)Admission screens. Here you will determine both the baseline performance and at least one goal. The Discharge and IPA screens look similar except you will not be specifying a goal.

The oversight person for the department of nursing, for example, will see all of the CNA entries (CNA? = Y in column 2) as well as any LPN, RN, etc. observations that were entered over the three-day period. The -- (see Shower, rows 2 and 4) indicates that the CNA reported that the task did not occur during the shift.





Section GG Data for NURSING Resident: - 01/501A Admission						
GG0130 a-c	GG0130 e-g	GG0170 a-e	GG0170 f-k	GG0170 l-p	GG0170 q-s	Goal Notes
Usual Performance	Discharge Goal	Usual Performance	Discharge Goal	Usual Performance	Discharge Goal	
Eating 06 / 06		Lying to Sitting - Bed 03 / -		1 step (curb) 10 / -		
Oral Hygiene 05 / 06		Sit to Stand 04 / -		4 steps 10 / -		
Toilet Hygiene 03 / 04		Chair/Bed-to-Chair 05 / -		12 steps 10 / -		
Shower/Bathe Self 03 / -		Toilet Transfer 03 / 05		Picking up Object 05 / 06		
Upper Body Dressing 04 / 05		Car Transfer 10 / -		Wheel chair/scooter use? 0	0=No 1=Yes	
Lower Body Dressing 03 / 04		Walk 10 feet 04 / 05		Wheels 50 feet	1=Manual 2=Motor	
Footwear On/Off 03 / -		Walk 50 feet/ 2 turns 04 / 05		Type used		
Roll Left and Right 02 / -		Walk 150 feet 88 / -		Wheels 150 feet	1=Manual 2=Motor	
Sit to Lying 03 / -		Walking 10 ft uneven 10 / -		Type used		
<div>Discipline Notes:</div> <div> <p>Nursing did not evaluate car, uneven surfaces or steps/stairs as we don't have suitable equipment on the unit.</p> <p>Resident was fairly independent prior to event and has expressed that he feels he will be able to retain that level again after therapy. He reported needing assistance with placement of the walker in the bathroom so that he can turn for proper placement on/off the toilet. Regaining strength</p> </div> <div>Previous</div> <div>Notes</div>						
<div> 06=Independent  05=Setup/Clean-up  04=Supervision/touching  03=Partial/moderate  02=Substantial/maximal  01=Dependent  07=Resident Refused  09=Not applicable  10=Not attempted - environment  88=Not attempted - medical </div> <div>Close</div>						

Use the green NOTES button as a short-cut to Progress Notes. Whatever information you have placed in the Discipline Notes box on the Goal Notes tab, can be copied into Progress Notes.

The Final Discipline GG Decisions for Discharge have screens identical to those above. The only difference is that the goal fields are inactive since goals are only established for the 5-day assessment. The IPA screens are limited as not every question is included on that assessment.

## Making Decisions for the MDS

The MDS Coordinator (consulting with the team) then will examine the information from the various disciplines and make the final determination as to what gets put on the MDS. This is done through the **Care Center**.

Display your resident and then click the MDS shortcut button on the right side of the window. On the left side of the pop-up menu window you will now have options to Finalize MDS (Re)Admit or Discharge GG or IPA GG. Which button is active will depend on the specific resident's situation.



**MDS3.0**

**OPTIONS**

- MDS3.0
- CAA
- Finalize MDS (Re)Admit GG
- Track GG for IPA
- Set Discharge Date
- Set IPA Date
- Finalize MDS Discharge GG
- Finalize MDS IPA GG

**REPORTS**

- Individual PPS Worksheet
- GG Discipline Decisions
- MDS Comparison
- GG Raw Data Observations
- Chart ADL History
- Why Not?
- GG MDS Decisions

Finished

The resident in our illustration, Ms. George's, has just been admitted so we need to finalize the admission performance baseline and the discharge goals. Both Nursing and Therapy entered observations, although each did not evaluate every item. We see the Discipline and the person (User) who made the discipline's final determination.

[illegible]

If both disciplines made the same observations, then this step should be fairly straight forward. However, since disciplines see residents at different times of the day and for different amounts of time, it is possible to have different observations. Above, you can see that Therapy scored this resident with a 05 for Sit to Stand. Nursing

Section GG Data for MDS DECISIONS Resident: 01/501A Admission

GG0130a-c	GG0130e-g	GG0170a-e	GG0170f-k	GG0170l-p	GG0170q-s	Notes	Final
-----------	-----------	-----------	-----------	-----------	-----------	-------	-------

**Discipline Notes for:** NURSING

Discipline
NURSING
THERAPY

Nursing did not evaluate car, uneven surfaces or steps/stairs as we don't have suitable equipment on the unit.

Resident was fairly independent prior to event and has expressed that he feels he will be able to retain that level again after therapy. He reported needing assistance with placement of the walker in the bathroom so that he can turn for proper placement on/off the toilet. Regaining strength should allow him to return to that level.

Etc.

I

Previous Next

06=Independent  
05=Setup/Clean-up  
04=Supervision/Touching
03=Partial/moderate  
02=Substantial/maximal  
01=Doesn't exist
07=Resident Refused  
09=Not applicable  
10=Not attempted - Equipment

Close

Section GG Data for MDS DECISIONS				Resident: - 01/501A		Admission	
GG0130a-c	GG0130e-g	GG0170a-e	GG0170f-k	GG0170l-p	GG0170q-s	Notes	Final
<b>Usual Performance</b> Eating <input type="checkbox"/> / <input type="checkbox"/> Oral Hygiene <input type="checkbox"/> / <input type="checkbox"/> Toilet Hygiene <input type="checkbox"/> / <input type="checkbox"/> Shower/Bathe Self <input type="checkbox"/> / <input type="checkbox"/> Upper Body Dressing <input type="checkbox"/> / <input type="checkbox"/> Lower Body Dressing <input type="checkbox"/> / <input type="checkbox"/> Footwear On/Off <input type="checkbox"/> / <input type="checkbox"/> Roll Left and Right <input type="checkbox"/> / <input type="checkbox"/> Sit to Lying <input type="checkbox"/> / <input type="checkbox"/>		<b>Discharge Goal</b> Lying to Sitting - Bed <input type="checkbox"/> / <input type="checkbox"/> Sit to Stand <input type="checkbox"/> / <input type="checkbox"/> Chair/Bed-to-Chair <input type="checkbox"/> / <input type="checkbox"/> Toilet Transfer <input type="checkbox"/> / <input type="checkbox"/> Car Transfer <input type="checkbox"/> / <input type="checkbox"/> Walk 10 feet <input type="checkbox"/> / <input type="checkbox"/> Walk 50 feet/ 2 turns <input type="checkbox"/> / <input type="checkbox"/> Walk 150 feet <input type="checkbox"/> / <input type="checkbox"/> Walking 10 ft uneven <input type="checkbox"/> / <input type="checkbox"/>		<b>Usual Performance</b> 1 step (curb) <input type="checkbox"/> / <input type="checkbox"/> 4 steps <input type="checkbox"/> / <input type="checkbox"/> 12 steps <input type="checkbox"/> / <input type="checkbox"/> Picking up Object <input type="checkbox"/> / <input type="checkbox"/> Wheel chair/scooter use? <input type="checkbox"/> 0=No 1=Yes Wheels 50 feet <input type="checkbox"/> / <input type="checkbox"/> Type used <input type="checkbox"/> 1=Manual 2=Motor Wheels 150 feet <input type="checkbox"/> / <input type="checkbox"/> Type used <input type="checkbox"/> 1=Manual 2=Motor			
Discipline Notes: <input type="text"/>							
<input type="button" value="Previous"/>				<input type="button" value="Notes"/>			
06=Independent 05=Setup/Clean-up 04=Supervision/touching		03=Partial/moderate 02=Substantial/maximal 01=Dependent		07=Resident Refused 09=Not applicable 10=Not attempted - Environment 88=Not attempted - Medical		<input type="button" value="Close"/>	

## Establishing a Discharge Date

This may be a planned physical discharge from the facility or the end of the Medicare stay. While the system can know the census transaction for the Admission and set up the three observation days for the 5-day assessment, it cannot know a future discharge date without your intervention.

### Care Center – MDS button

You will see a button called SET A DISCHARGE DATE. This will open the three-day window for tracking usual performance and for allowing each of the disciplines to make a determination. Once the SET button has been used, the button will toggle and the label will read, CLEAR THE DISCHARGE DATE. If the planned discharge is canceled, using this button will close the observation window. Any information previously recorded will NOT be deleted.

**MDS3.0**

OPTIONS		REPORTS	
MDS3.0	CAA	Individual PPS Worksheet	GG Discipline Decisions
Finalize MDS (Re)Admit GG	Track GG for IPA	MDS Comparison	GG Raw Data Observations
<b>Set Discharge Date</b>	Set IPA Date	Chart ADL History	
Finalize MDS Discharge GG	Finalize MDS IPA GG	Why Not?	
		GG MDS Decisions	

**Finished**

If the planned discharge date changes, you can click the SET DISCHARGE DATE button a second time and simply update the information. If a planned discharge date has been entered into the system, you will see the information on the Resident's Care Center screen just above the MDS assessment information (shown below).

**VITALS ISSUES**

**INFECTION ISSUES**

**Statutory Assessments:**

02/03/2017	Quarterly
05/03/2017	Quarterly

**Planned Discharge: 04/20/2017**

????????

**Add to Schedule**

**ADT/CENSUS**

**NOTES**

**CAREPLAN**

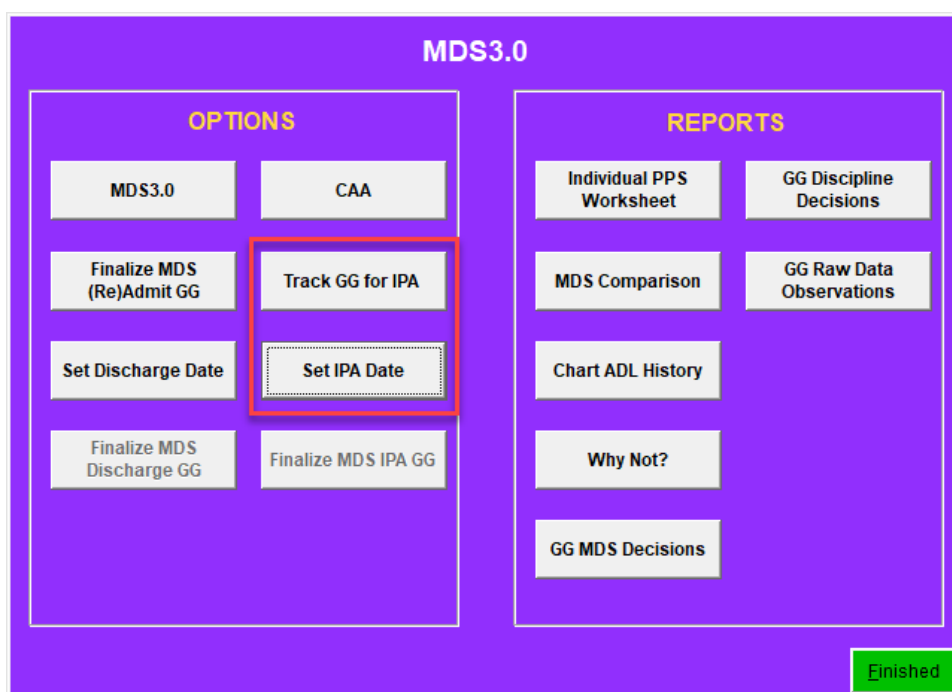
Screens for recording data and making decisions will look like those used above. The only difference is that you will only be working with the usual performance and NOT the discharge goals.

## The IPA, Interim Payment Assessment

During the first seven days of October 2019 you are required to do an IPA for each Medicare A resident whose stay is continuing from September 2019. After that, this assessment is optional for Medicare A residents. You will have to ask your Medicare C (Medicare Advantage) insurers what their policy is regarding the PDPM and the documentation requirements.

### Flagging Resident Observations for Data Collection

This function is completed in a similar fashion to setting the date for the planned PPS Discharge. When you determine that you will be doing an IPA, go to the Care Center to set the assessment date. Click the blue MDS shortcut button on the right side of the screen. Select TRACK GG FOR IPA to open the data collection option in Resident Observations. If you have determined the ARD for your IPA, click SET IPA DATE and enter your ARD.



When you make your final decisions, you will use any data collected on the ARD and the prior two days. Note, the IPA does not require you to collect as much data. While you will follow the same process for creating final decisions for both the disciplines and the MDS assessment, you will not be answering all of the questions, nor will you be determining goals.

Once you have SET IPA DATE, the FINALIZE MSD IPA GG button will also become active and the main screen will display the IPA date,



If at any time you change the ARD for the IPA or decide that you will not be following through on an optional IPA, use the same process that you used for setting the date. This time click the CLEAR IPA DATE button.

### Ongoing Data Collection for IPA

Some facilities want to have staff record this information on an ongoing basis so that they can analyze it for significant changes and have it available for setting an ARD for an IPA at any time. To accomplish this, in the CARE CENTER, press the MDS shortcut button on the right side of the screen. You will have a toggle button for starting and stopping the flag for accumulating interim Section GG data on the left side of the screen. To turn tracking on which will activate the orange TRACK GG IPA button under Nursing Data Entry in the Resident Observations module, click the TRACK GG FOR IPA button under Options. You will notice that it then says STOP GG FOR IPA. If at any time you wish to prevent staff from doing any additional IPA Section GG data entry, click that button.

An example. Suppose your facility only collects Section GG data on individuals who have traditional Medicare A. Upon admission of a MedA resident, you could set the flag in the Care Center to TRACK GG FOR IPA. As long as the resident is on MedA, staff members would be able to track Section GG items – the ResObs Nursing buttons

would be active. If they change to another insurance, employees would no longer have the ability to do the tracking – the ResObs Nursing buttons would be inactive. If you leave the tracking flag set and they return to Medicare, the tracking will be immediately turned back on.

What is the advantage to continued tracking? Daily observations can be one piece of the puzzle when analyzing a resident and the impact of any changes on your PDPM. If you have daily observations, you can set the ARD very quickly after making the decision to complete an IPA. Without these daily records, the earliest you can set the ARD and have three days of data would be two days after your decision.

## Reports

## Resident Observations 3.0 – Analytics/Reports – Assessments or Care Center – MDS shortcut

## Discipline GG Tracking

This report shows you the individual observations per discipline plus that discipline's final decisions.

Select the resident and you will see a list of census transaction dates and the discipline that recorded Section GG data entries. For the resident below, you can see that there are three census transactions. The bottom, or oldest, is a 5/18 planned discharge where the Therapy and Nursing disciplines recorded data and made final discipline decisions. The next three are for a 2/11 planned discharge where the disciplines of Therapy, Nursing, and Nutrition all recorded data and made decisions. The top two lines are for a readmission where nursing and therapy made discipline decisions.

[illegible]

Highlight the transaction/discipline that you wish to review and then press the Select button. The top section shows the Discipline's final decisions. If there are any notes associated with these decisions, they will be shown on the left side of the data.



The next sections will show the individual data points. There will be one for each record. An \* next to a name (last section in our example for user May, April\*) indicates that this information was recorded by a CNA during the shift end process. A – in a CNA observation indicates that those points did not occur during their shift.

An example –

Section GG Tracking Report													
For: JOE CAREPLAN - 02/08D Date: 07/03/19 READMIT FROM HOSPITAL													
Date	Discipline	User	Shift		U.P.	G		U.P.	G		U.P.	G	
07/03/19	NURSING Decisions	CP5		Eating	06	06	Roll Left and Right	02	03	Walk 10 Feet	04	05	Picking up Object
				Oral Hygiene	05	05	Sit to Lying	03	-	Walk 50 Feet/2 Turns	04	-	Uses Wheelchair
				Toilet Hygiene	03	04	Lying to Sitting - Bed	03	-	Walk 150 Feet	88	-	Wheel 50 Feet/2 Turns
				Shower/Bathe Self	03	-	Sit to Stand	04	-	Walk 10 Feet-uneven	10	-	Type: 1 Manual/2 Motorized
				Upper Body Dressing	04	05	Chair/bed Transfer	05	-	1 Step (curb)	10	^	Wheel 150 Feet
				Lower Body Dressing	03	04	Toilet Transfer	03	05	4 Steps	^	^	Type: 1 Manual/2 Motorized
				Footwear on/off	03	03	Car Transfer	10	-	12 Steps	^	^	
Notes: Nursing did not evaluate car, uneven surfaces, or steps/stairs as we don't have suitable equipment on the unit.  Resident was fairly independent prior to event and has expressed that he feels he will be able to retain that level again after therapy. He reported needing assistance with placement of the walker in the bathroom so that he can turn for proper placement off/on the toilet. Regaining strength should allow him to return to that level.  Etc.													
07/03/19	NURSING	CHAMBERG	D	Eating	06		Roll Left and Right	04		Walk 10 Feet	04		Picking up Object
				Oral Hygiene	05		Sit to Lying	03		Walk 50 Feet/2 Turns	03		Uses Wheelchair
				Toilet Hygiene	03		Lying to Sitting - Bed	03		Walk 150 Feet	88		Wheel 50 Feet/2 Turns
				Shower/Bathe Self	07		Sit to Stand	04		Walk 10 Feet-uneven	10		Type: 1 Manual/2 Motorized
				Upper Body Dressing	04		Chair/bed Transfer	05		1 Step (curb)	10		Wheel 150 Feet
				Lower Body Dressing	03		Toilet Transfer	03		4 Steps	10		Type: 1 Manual/2 Motorized
				Footwear on/off	03		Car Transfer	10		12 Steps	10		
07/03/19	NURSING	CP5	E	Eating	06		Roll Left and Right	04		Walk 10 Feet	04		Picking up Object
				Oral Hygiene	05		Sit to Lying	03		Walk 50 Feet/2 Turns	03		Uses Wheelchair
				Toilet Hygiene	03		Lying to Sitting - Bed	03		Walk 150 Feet	88		Wheel 50 Feet/2 Turns
				Shower/Bathe Self	07		Sit to Stand	04		Walk 10 Feet-uneven	10		Type: 1 Manual/2 Motorized
				Upper Body Dressing	04		Chair/bed Transfer	05		1 Step (curb)	10		Wheel 150 Feet
				Lower Body Dressing	03		Toilet Transfer	03		4 Steps	10		Type: 1 Manual/2 Motorized
				Footwear on/off	03		Car Transfer	10		12 Steps	10		
07/03/19	NURSING	MAY, APRIL*	E	Eating	05		Roll Left and Right	--		Walk 10 Feet	03		Picking up Object
				Oral Hygiene	05		Sit to Lying	--		Walk 50 Feet/2 Turns	03		Uses Wheelchair
				Toilet Hygiene	03		Lying to Sitting - Bed	--		Walk 150 Feet	--		Wheel 50 Feet/2 Turns
				Shower/Bathe Self	--		Sit to Stand	03		Walk 10 Feet-uneven	--		Type: 1 Manual/2 Motorized
				Upper Body Dressing	--		Chair/bed Transfer	04		1 Step (curb)	--		Wheel 150 Feet
				Lower Body Dressing	--		Toilet Transfer	03		4 Steps	--		Type: 1 Manual/2 Motorized
				Footwear on/off	--		Car Transfer	--		12 Steps	--		

At the bottom of the page, there is a legend that defines each of the code values so that you do not have to memorize them.

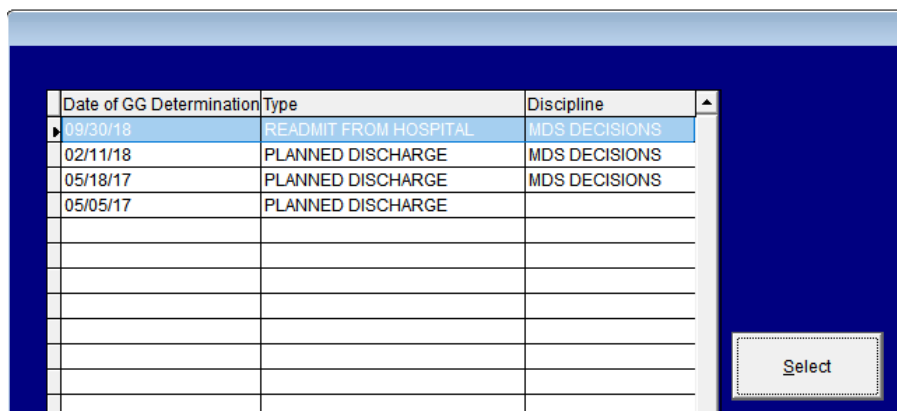
01 = Dependent  
 02 = Substantial/Maximal Assist  
 03 = Partial/Moderate Assistance  
 04 = Supervision or Touching Assistance  
 05 = Set-up or Clean-up Assistance  
 06 = Independent  
 07 = Resident Refused  
 08 = Not Attempted - medical  
 09 = Not Applicable  
 10 = Not Attempted - environment  
 \* by User name designates a CNA. For CNA records, all are same except: "--" = Did not do that shift

**Note:** The report will show you the final decision per discipline and the data it was based upon. If individuals continue to collect data after that decision, those observations will not display on this report until decisions are reviewed again. If someone goes into the Final Decision for that discipline, all observations will be visible including those since the previous decision. They can review the data again and make any necessary changes. Running the report after that, the revised final decision and all of the observations that had been collected up to this new point will be displayed.

## MDS GG Final

This report focuses on the individual Discipline decisions and the final MDS data decision made based on that information.

Using the same resident as in the report above, we now see that there are four items listed in the selection screen – one item per census transaction and one for which there is NO data at all.. Each transaction will include all of the discipline final decisions.



The screenshot shows a software interface with a table and a 'Select' button. The table has three columns: 'Date of GG Determination', 'Type', and 'Discipline'. The first row is highlighted in blue. The 'Discipline' column contains the text 'MDS DECISIONS' with a small upward-pointing arrow to its right. Below the table is a 'Select' button.

Date of GG Determination	Type	Discipline
09/30/18	READMIT FROM HOSPITAL	MDS DECISIONS ^
02/11/18	PLANNED DISCHARGE	MDS DECISIONS
05/18/17	PLANNED DISCHARGE	MDS DECISIONS
05/05/17	PLANNED DISCHARGE	

Select

Highlight the transaction you wish to see and then press SELECT.

You see the final discipline decisions and the user who entered them. The top line is the MDS coordinator's decision for the data that will be used on the MDS. Note, that at this time the ^ is a viable option for the questions. If there are associated notes, they will be displayed on the report as well.

An Example-

07/03/19

**Section GG Decisions Report**

For: JOE CAREPLAN - 02/08D Date: 07/03/19 READMIT FROM HOSPITAL

Date	Discipline	User		U.P.	G		U.P.	G		U.P.	G		U.P.	G
07/03/19	MDS DECISIONS	CP32	Eating	06	06	Roll Left and Right	02	-	Walk 10 Feet	05	06	Picking up Object	05	06
			Oral Hygiene	05	06	Sit to Lying	03	-	Walk 50 Feet/2 Turns	05	05	Uses Wheelchair	0	
			Toilet Hygiene	03	04	Lying to Sitting - Bed	03	-	Walk 150 Feet	88	-	Wheel 50 Feet/2 Turns^	^	^
			Shower/Bathe Self	03	-	Sit to Stand	04	05	Walk 10 Feet-uneven	10	-	Type: 1 Manual/2 Motorized^		
			Upper Body Dressing	04	05	Chair/bed Transfer	05	05	1 Step (curb)	05	05	Wheel 150 Feet	^	^
			Lower Body Dressing	03	-	Toilet Transfer	03	-	4 Steps	05	05	Type: 1 Manual/2 Motorized^		
			Footwear on/off	03	-	Car Transfer	10	-	12 Steps	88	-			
<b>Notes:</b> After discussion with team at the Medicare meeting, we agreed that these goals are attainable. Etc.														
07/03/19	NURSING	CP5	Eating	06	06	Roll Left and Right	02	03	Walk 10 Feet	04	05	Picking up Object	05	
			Oral Hygiene	05	05	Sit to Lying	03	-	Walk 50 Feet/2 Turns	04	-	Uses Wheelchair	0	
			Toilet Hygiene	03	04	Lying to Sitting - Bed	03	-	Walk 150 Feet	88	-	Wheel 50 Feet/2 Turns^		
			Shower/Bathe Self	03	-	Sit to Stand	04	-	Walk 10 Feet-uneven	10	-	Type: 1 Manual/2 Motorized		
			Upper Body Dressing	04	05	Chair/bed Transfer	05	-	1 Step (curb)	10	^	Wheel 150 Feet	^	
			Lower Body Dressing	03	04	Toilet Transfer	03	05	4 Steps	^	^	Type: 1 Manual/2 Motorized		
			Footwear on/off	03	03	Car Transfer	10	-	12 Steps	^	^			
<b>Notes:</b> Nursing did not evaluate car, uneven surfaces, or steps/stairs as we don't have suitable equipment on the unit. Resident was fairly independent prior to event and has expressed that he feels he will be able to retain that level again after therapy. He reported needing assistance with placement of the walker in the bathroom so that he can turn for proper placement off/on the toilet. Regaining strength should allow him to return to that level. Etc.														
07/03/19	THERAPY	CP32	Eating			Roll Left and Right			Walk 10 Feet	05	06	Picking up Object	05	
			Oral Hygiene			Sit to Lying			Walk 50 Feet/2 Turns	05	05	Uses Wheelchair	0	
			Toilet Hygiene			Lying to Sitting - Bed			Walk 150 Feet	03	04	Wheel 50 Feet/2 Turns^		
			Shower/Bathe Self			Sit to Stand	05	05	Walk 10 Feet-uneven	10	-	Type: 1 Manual/2 Motorized		
			Upper Body Dressing			Chair/bed Transfer	05	05	1 Step (curb)	05	05	Wheel 150 Feet	^	
			Lower Body Dressing			Toilet Transfer	05	05	4 Steps	05	05	Type: 1 Manual/2 Motorized		
			Footwear on/off			Car Transfer	10	-	12 Steps	88	-			

At the bottom of the report there is a legend to explain what the various codes mean so that you do not have to memorize them.

01 = Dependent      03 = Partial/Moderate Assistance      05 = Set-up or Clean-up Assistance      07 = Resident Refused      10 = Not Attempted - Environment  
 02 = Substantial/Maximal Assistance      04 = Supervision or Touching Assistance      06 = Independent      09 = Not Applicable      88 = Not Attempted - Medical

## Raw Data Observations

Enter your date range and the report will show the raw data for

- date/shift,
- employee/discipline
- each of the Section GG questions with the observation score
- an \* next to any that are identified as CNAs

A legend across the top helps to identify each of the questions and a legend at the bottom helps to identify the levels of performance.

## MDS Interface

If you have Resident Observations 3.0, you will now notice that the boxes for the Section GG questions have a blue ring around them. This indicates there is a link between these questions and data collected through the ResObs module.

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
06	06	A. <b>Eating:</b> The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the resident.
05	05	B. <b>Oral hygiene:</b> The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment
03	04	C. <b>Toileting hygiene:</b> The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.

While in any of the questions, press the F9 key. If the MDS coordinator, or other responsible person has indicated final decisions for usual admission performance, discharge goal and/or usual discharge performance through the Care Center, those observations will be listed for your review.

Below is an example of an admission final decision for a 5-day assessment for questions GG0130. The Decision Date indicates the admission date. The first column corresponds to the “usual” performance at admission. The second column corresponds to the discharge goals. Remember that you must have at least one discharge goal. You will need to F9 once in any of the GG0130 fields and once in any of the GG0170 fields.

GG0130. Self-Care

A. Eating	A. 06	/	06	Decision Dates <div style="border: 1px solid white; padding: 2px; display: inline-block;">09/30/2018</div>
B. Oral Hygiene	B. 05	/	06	
C. Toileting Hygiene	C. 03	/	04	
E. Shower/bathe self	E. 03	/	-	
F. Upper body dressing	F. 04	/	05	
G. Lower body dressing	G. 03	/	-	
H. Put on/taking off footwear	H. 03	/	-	

Cancel

Accept

A similar screen will appear when you F9 for discharge final decision. The Decision Date corresponds to the discharge date. The column of data is the usual performance for the three day period prior to discharge. You will F9 once in any of the GG0130 questions and once in any of the GG0170 questions. Below is an illustration of GG0170.

GG0170. Mobility

A. Roll left and right	A. 03
B. Sit to lying	B. 04
C. Lying to sitting on side of bed	C. 04
D. Sit to stand	D. 03
E. Chair/bed-to-chair transfer	E. 04
F. Toilet transfer	F. 04
G. Car transfer	G. 10
I. Walk 10 feet	I. 04
J. Walk 50 feet with two turns	J. 88
K. Walk 150 feet	K. 09
L. Walking 10 feet on uneven surfaces	L. 10
M. 1 step (curb)	M. 10
N. 4 steps	N. 1
O. 12 steps	O. 1
P. Picking up object	P. 05
Q. Does the resident use a wheelchair/scooter	Q. 1
R. Wheel 50 feet with two turns	R. 04
RR. Indicate the type of wheelchair/scooter used	RR. 1
S. Wheel 150 feet	S. 02
SS. Indicate the type of wheelchair/scooter used	SS. 1

Decision Dates  
10/01/2018

 Cancel  Accept

After your review, press ACCEPT to fill in the MDS with these values. Press CANCEL if you need to do further research.

If this is a 5-day, discharge combination where you will need to complete both the admission performance, the discharge goals, and the discharge performance you will need to complete the F9 process multiple times – twice in the admission portion and twice in the discharge portion, Sections GG0130 and GG0170.