

# ADL DOCUMENTATION for CNAs INSTRUCTIONS



The ADL Documentation form for CNAs was developed to aid in clarifying the language used to describe and code Section G of the MDS. It is to be used during the MDS 7-day look-back period.

The CNA from each shift assigned to a resident during a 7-day look-back period should complete a separate form for that resident during each of the 7 days. The MDS coordinator can then determine more accurately the actual extent of resident participation and staff involvement.

If you are using electronic documentation, this tool will serve as an additional guide to assist in clarification of how the CNA documents and codes the individual ADLs.

ADL DOCUMENTATION

Resident Performance

What the Resident does in my care only, not what I think they are capable of or what I see them do with other caregivers, therapy, nurses, etc.

ADL Definition - Activity of Daily Living (ADL); an activity that a person performs on a daily basis for self care. There are 11 ADL's.

**Must report changes in any of the following 4 ADLs to charge nurse immediately** for further assessment:

**EATING** - how resident eats/drinks regardless of skill. Includes tube feeding and TPN.

**TOILETING** - transfers to and from toilet, adjusts clothing, voiding, cleanses self, changes pads, uses urinal, etc.

**BED MOBILITY** - how the resident is able to move around in bed (recliner or other furniture resident sleeps in), reposition self, hold onto rail; moves to/from lying position; turns from side to side.

**TRANSFER** - how resident moves between surfaces to/from bed, chair, wheelchair, standing position (exclude transfers to/from bath and toilet).

**CODES - and definitions**

- 0 Resident is totally independent and needs no help or supervision to perform this ADL (includes self-administered tube feeding).
- 1 I helped the Resident by reminding (cueing) them or directing them, opening cartons or food packages, cutting meat, encouraging them to perform by themselves (cueing), reminding to use their walker, go to the toilet, etc. No physical contact or touching is needed. (NOTE: PT language = "Stand-by assist").
- 2 I provided hands on assistance to the Resident, but did not lift any of their weight. Guided arms into sleeves, feet into shoes, body into chair, food into mouth, etc. (PT language = "Contact guard assist").
- 3 I provided assistance to the Resident by lifting part of their weight. I lifted their head or body for repositioning. I picked up their arm to put it on a bed rail or into a sleeve. I picked up their feet and put them on or off the bed, I lifted their arm to guide food into mouth, etc. I had to hold the leg up to put Ted Hose on. (PT language = "Minimum-moderate-maximum assist").
- 4 I provided all the needs of the Resident to perform the ADL task. The Resident was not able to help in any way. I performed total lift, total transfer, fed resident, etc. I had to move resident while in bed on/off unit. Resident unable to use toilet, commode, bedpan, urinal; clean themselves, change pad, or adjust clothes after toileting; unable to manage Ostomy or catheter. (PT language = "Dependent").
- 8 This ADL did not occur: The Resident did not perform this ADL with or without my assistance. Primary use is with bed-bound residents who do not transfer from bed, nor move between locations. Resident had no output (urine or stool) and no intake by any means. Resident wore no clothing or did not have bath/shower. When an "8" code is used for Self-Performance, it should also be used for Support.

ADL	CODE	ADL	CODE
Bed Mobility	_____	Walk in room	_____
Eating	_____	Walk in corridor	_____
Toileting	_____	Locomotion on unit	_____
Transfer	_____	Locomotion off unit	_____
Dressing	_____	Personal hygiene	_____

**Bathing Codes:**

- 0 Independent - No help provided
- 1 Supervision - Oversight/cueing help only
- 2 Assistance needed only for transferring
- 3 Assistance for part of bath only
- 4 Total assistance for bathing
- 8 No bathing occurred

ADL	CODE
Bathing	_____

ADL DOCUMENTATION

Staff Performance

What I do to assist the resident with the ADL. We need to document the amount of support provided to the Resident on each shift.

The **4 Late loss ADL's** (see Resident Performance page) - **must report changes to charge nurse immediately** for further assessment:

- 0 No setup or physical help - Resident performed this ADL independently and did not require any assistance from staff.
- 1 Set up help only - (no physical contact) staff opened milk carton, carried food tray for Resident, cued Resident to eat, instructed on bathing, reminded to use (or handed to) walker, etc.
- 2 One staff person is needed to physically assist the Resident - weight bearing or non-weight bearing. Weight bearing means I lift a part of the resident; non-weight bearing is guiding the hand without having to lift it.
- 3 Two staff people are needed to complete, or assist in, ADL's for Resident - weight bearing or non-weight bearing.
- 8 This activity did not occur during my shift. Resident did not leave unit. No elimination occurred. When an "8" code is used for Support Provided, it should also be used for Self-Performance.

<b>ADL</b>	<b>CODE</b>
Bed Mobility	_____
Eating	_____
Toileting	_____
Transfer	_____
Dressing	_____
Walk in room	_____
Walk in corridor	_____
Locomotion on unit	_____
Locomotion off unit	_____
Personal hygiene	_____
Bathing	_____

When toileting your Resident on this shift did you find them wet or soiled? Yes \_\_\_\_\_ No \_\_\_\_\_