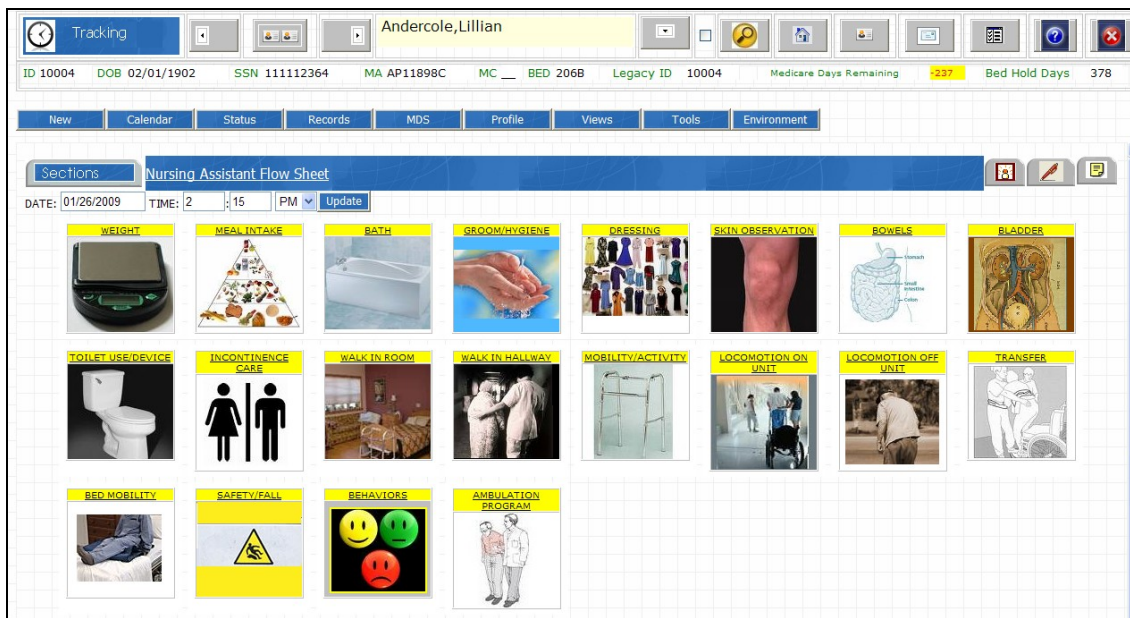




### CNA Tracking

Integrated with *VISUAL Census and Assessment* the *CNA Tracking* system enables the CNA to record ADL and other services performed for the resident at the point-of-care. Services provided are recorded using touch-sensitive portable hand-held devices or kiosks located at the nursing unit.



CNA Tracking

| 11/13/2008                                      | 11/14/2008                                      | 11/15/2008                                      | 11/17/2008                                      | 11/18/2008                                      | 11/30/2008                                      | 12/02/2008                                      |
|---|---|---|---|---|---|---|
| <i>Hansel Hourshvenk</i>                        | <i>Hansel Hourshvenk</i>                        | <i>Hansel Hourshvenk</i>                        | <i>Hansel Hourshvenk</i>                        | <i>Hansel Hourshvenk</i>                        | <i>Jane D Caker</i>                             | <i>Hansel Hourshvenk</i>                        |
| <b>WEIGHT</b>                                   | <b>WEIGHT</b>                                   | <b>WEIGHT</b>                                   | <b>WEIGHT</b>                                   | <b>WEIGHT</b>                                   | <b>WEIGHT</b>                                   | <b>WEIGHT</b>                                   |
| Weight  | Weight  | Weight  | Weight  | Weight  | Weight  | Weight  |
| Weight 129                                      | Weight 123.4                                    | Weight 124                                      | Weight 125                                      | Weight 125                                      | Weight 123                                      | Weight 124                                      |
| Bedscale (B) Standing<br>(S) Chair (C) Lift (L) | Bedscale (B) Standing<br>(S) Chair (C) Lift (L) | Bedscale (B) Standing<br>(S) Chair (C) Lift (L) | Bedscale (B) Standing<br>(S) Chair (C) Lift (L) | Bedscale (B) Standing<br>(S) Chair (C) Lift (L) | Bedscale (B) Standing<br>(S) Chair (C) Lift (L) | Bedscale (B) Standing<br>(S) Chair (C) Lift (L) |
| B S C L   | B S C L   | B S C L   | B S C L   | B S C L   | B S C L   | B S C L   |
| <b>MEAL INTAKE</b>                              | <b>MEAL INTAKE</b>                              | <b>MEAL INTAKE</b>                              | <b>MEAL INTAKE</b>                              | <b>MEAL INTAKE</b>                              | <b>MEAL INTAKE</b>                              | <b>MEAL INTAKE</b>                              |
| Meal Intake                                     | Meal Intake                                     | Meal Intake                                     | Meal Intake                                     | Meal Intake                                     | Meal Intake                                     | Meal Intake                                     |
| Breakfast 76-100                                | Breakfast 76-100                                | Breakfast unavailable                           | Breakfast unavailable                           | Breakfast 76-100                                | Breakfast 76-100                                | Breakfast 76-100                                |
| Lunch 51-75                                     | Lunch 51-75                                     | Lunch 51-75                                     | Lunch 76-100                                    | Lunch 51-75                                     | Lunch 76-100                                    | Lunch 76-100                                    |
| Dinner 26-50                                    | Dinner 26-50                                    | Dinner 26-50                                    | Dinner 51-75                                    | Dinner refused                                  | Dinner 51-75                                    | Dinner 51-75                                    |
| <b>Tube Feeding</b>                             | <b>Tube Feeding</b>                             | <b>Tube Feeding</b>                             | <b>Tube Feeding</b>                             | <b>Tube Feeding</b>                             | <b>Tube Feeding</b>                             | <b>Tube Feeding</b>                             |
| Breakfast X                                     | Breakfast X                                     | Breakfast X                                     | Breakfast X                                     | Breakfast X                                     | Breakfast X                                     | Breakfast X                                     |
| Lunch X   | Lunch X   | Lunch X   | Lunch X   | Lunch X   | Lunch X   | Lunch X   |
| Dinner X  | Dinner X  | Dinner X  | Dinner X  | Dinner X  | Dinner X  | Dinner X  |

Flow Sheet

**Maximize Reimbursement.** Information provided by the CNA flows into the MDS. Existing MDS values are shown alongside new values calculated based on CNA services actually performed. The resident's existing RUGs and ADL scores are contrasted with the new scores calculated by the *CNA Tracking system*.

|                                     |      |   |   |                    |
|-------------------------------------|------|---|---|--------------------|
| <input checked="" type="checkbox"/> | G1fb | Locomotion off unit: Support Provided         | 3 | Currently: 8       |
| <input checked="" type="checkbox"/> | G1ga | Dressing: Self-Performance                    | 3 | Currently: 8       |
| <input checked="" type="checkbox"/> | G1gb | Dressing: Support Provided                    | 3 | Currently: 8       |
| <input checked="" type="checkbox"/> | G1ha | Eating: Self-Performance.                     | 3 | Currently: 0       |
| <input checked="" type="checkbox"/> | G1hb | Eating: Support Provided                      | 3 | Currently: 0       |
| <input checked="" type="checkbox"/> | G1ia | Toilet use: Self-Performance.                 | 4 | Currently: 0       |
| <input checked="" type="checkbox"/> | G1ib | Toilet use: Support Provided.                 | 3 | Currently: 0       |
| <input checked="" type="checkbox"/> | G1ja | Personal hygiene: Self-Performance            | 4 | Currently: 8       |
| <input checked="" type="checkbox"/> | G1jb | Personal hygiene: Support Provided            | 3 | Currently: 8       |
| <input checked="" type="checkbox"/> | G2a  | Bathing: Self-Performance                     | 3 | Currently: 8       |
| <input checked="" type="checkbox"/> | G2b  | Bathing: Support Provided                     | 3 | Currently: 0       |
| <input checked="" type="checkbox"/> | G5a  | Cane/walker/crutuch                           | Y | Currently: N       |
| <input checked="" type="checkbox"/> | G5d  | Wheelchair for primary locomotion             | Y | Currently: N       |
| <input checked="" type="checkbox"/> | H1a  | Bowel continence                              | 4 | Currently blank    |
| <input checked="" type="checkbox"/> | H1b  | Bladder continence                            | 2 | Currently blank    |
| <input checked="" type="checkbox"/> | H2a  | Bowel elimination pattern regular             | N | Currently the same |
| <input checked="" type="checkbox"/> | H2c  | Diarrhea                                      | Y | Currently: N       |
| <input checked="" type="checkbox"/> | H3a  | Any scheduled toileting plan.                 | Y | Currently the same |
| <input checked="" type="checkbox"/> | H3d  | Indwelling catheter                           | Y | Currently the same |
| <input checked="" type="checkbox"/> | H3g  | Pads/briefs used                              | Y | Currently: N       |
| <input checked="" type="checkbox"/> | H3i  | Ostomy present                                | Y | Currently the same |
| <input checked="" type="checkbox"/> | K5b  | Feeding tube.                                 | Y | Currently the same |
| <input checked="" type="checkbox"/> | M4a  | Abrasions, bruises                            | Y | Currently: N       |
| <input checked="" type="checkbox"/> | M4c  | Open lesions other than ulcers, rashes, cuts. | Y | Currently: N       |
| <input checked="" type="checkbox"/> | M4f  | Skin tears or cuts (other than surgery)       | Y | Currently: N       |

Current RUGS score is BA1. ADL is 4. If all red changes are updated and the assessment is opened in MDS, Rugs will be PE1. ADL will be 17.

Update

### Maximizing Reimbursement

**Pressure Ulcer Prevention.** Developed in conjunction with the On-time project of New York State DOH the various reports predict which residents are prone to new pressure ulcers thereby minimizing the risk of new occurrences.

**Pressure Ulcer Trigger Summary by Resident**  
Demo Nursing Home  
Week Ending 08/06/2006  
*Sorted in descending order of number of triggers, and then alphabetically*  
*Blank = No data; '-' = Incomplete data*

| Unit | Resident          | Wt Loss >=5% last 30 days | Wt Loss >=10% last 180 days | 2 meals <=50% in 1 day | Weekly Meal Intake Avg <50% | Daily Urine Incont | >3 Days Bowel Incont | Foley Catheter | # of Triggers Last Week | # of Triggers This Week |
|------|-------------------|---------------------------|-----------------------------|------------------------|-----------------------------|--------------------|----------------------|----------------|-------------------------|-------------------------|
|      | KIRSTEN, ABRAHAM  |                           |                             | x                      | x                           | x                  | x                    |                | 2                       | 4                       |
|      | ALBEMARLE, MARTIN |                           |                             | x                      | x                           | x                  |                      |                | 1                       | 3                       |
|      | ANDERSON, CALEB   |                           |                             | x                      |                             | x                  | x                    |                | 4                       | 3                       |
|      | BROWN, GORDON     |                           |                             | x                      |                             | x                  | x                    |                | 2                       | 3                       |
|      | MERCURIO, GEORGE  |                           |                             | x                      | x                           | x                  |                      |                | 3                       | 3                       |
|      | NIXON, JANICE     |                           |                             |                        |                             | x                  | x                    |                | 3                       | 2                       |
|      | RAMIREZ, EDUARDO  |                           |                             | x                      |                             | -                  | x                    |                | 2                       | 2                       |
|      | HOWARD, ABIGAIL   |                           |                             |                        |                             |                    |                      | x              | 2                       | 1                       |
|      | ZIMET, STEVEN     |                           |                             | x                      |                             |                    |                      |                | 0                       | 1                       |
|      | WHITE, ARETHA     |                           |                             | -                      | -                           |                    |                      |                | 0                       | 0                       |

**Pressure Ulcer Trigger Summary by Nursing Unit**  
Demo Nursing Home  
*Blank = No data or incomplete data; '0' = Complete data; no residents triggered for this item*

| Unit                        | 07/10/2006 |   | 07/17/2006 |   | 07/24/2006 |   | 07/31/2006 |   |
|-----------------------------|------------|---|------------|---|------------|---|------------|---|
|                             | #          | % | #          | % | #          | % | #          | % |
| Wt Loss >=5% in <=30 Days   | 0          | 0 | 0          | 0 | 0          | 0 | 0          | 0 |
| Wt Loss >=10% in <=180 Days | 0          | 0 | 0          | 0 | 0          | 0 | 0          | 0 |

### On-time Reporting

**Information.** To obtain more information please contact our marketing division at 718-338-2400 or visit our web page at [www.ReliableHealth.com](http://www.ReliableHealth.com).