

GG0100. Prior Functioning: Everyday Activities Indicate the resident's usual ability with everyday activities prior to the current illness, exacerbation, or injury Complete only if A0310B = 01		
Coding:	↓	Enter Codes in Boxes
3. Independent - Resident completed all the activities by themselves, with or without an assistive device, with no assistance from a helper.	<input type="checkbox"/>	A. Self-Care: Code the resident's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illness, exacerbation, or injury.
2. Needed Some Help - Resident needed partial assistance from another person to complete any activities.	<input type="checkbox"/>	B. Indoor Mobility (Ambulation): Code the resident's need for assistance with walking from room to room (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation, or injury.
1. Dependent - A helper completed all the activities for the resident.	<input type="checkbox"/>	C. Stairs: Code the resident's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation, or injury.
8. Unknown.	<input type="checkbox"/>	D. Functional Cognition: Code the resident's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.
9. Not Applicable.		

Item Rationale

- Knowledge of the resident’s functioning prior to the current illness, exacerbation, or injury may inform treatment goals.

Steps for Assessment

1. Ask the resident or their family about, or review the resident’s medical records describing, the resident’s prior functioning with everyday activities.

Coding Instructions

- **Code 3, Independent:** if the resident completed the activities by themselves, with or without an assistive device, with no assistance from a helper.
- **Code 2, Needed Some Help:** if the resident needed partial assistance from another person to complete the activities.
- **Code 1, Dependent:** if the helper completed the activities for the resident, or the assistance of two or more helpers was required for the resident to complete the activities.
- **Code 8, Unknown:** if the resident’s usual ability prior to the current illness, exacerbation, or injury is unknown.
- **Code 9, Not Applicable:** if the activities were not applicable to the resident prior to the current illness, exacerbation, or injury.

GG0100: Prior Functioning: Everyday Activities (cont.)

Coding Tips

- Record the resident's usual ability to perform self-care, indoor mobility (ambulation), stairs, and functional cognition prior to the current illness, exacerbation, or injury.
- If no information about the resident's ability is available after attempts to interview the resident or their family and after reviewing the resident's medical record, code as 8, Unknown.
- Completing the stair activity for GG0100C indicates that a resident went up and down the stairs, by any safe means, with or without handrails or assistive devices or equipment (such as a cane, crutch, walker, or stair lift) and/or with or without some level of assistance.
- *For the GG0100C stair activity, "by any safe means" may include a resident scooting up and down stairs on their buttocks.*
- Going up and down a ramp is not considered going up and down stairs for coding GG0100C.

Examples for Coding Prior Functioning: Everyday Activities

1. **Self-Care:** Resident R was diagnosed with a progressive neurologic condition five years ago. They live in a long-term nursing facility and were recently hospitalized for surgery and have now been admitted to the SNF for skilled services. According to Resident R's spouse, prior to the surgery, Resident R required complete assistance with self-care activities, including eating, bathing, dressing, and using the toilet.

Coding: GG0100A would be coded 1, Dependent.

Rationale: Resident R's spouse has reported that Resident R was completely dependent in self-care activities that included eating, bathing, dressing, and using the toilet. Code 1, Dependent, is appropriate based upon this information.

2. **Indoor Mobility (Ambulation):** Resident L had a stroke one year ago that resulted in their using a wheelchair to self-mobilize, as they were unable to walk. Resident L subsequently had a second stroke and was transferred from an acute care unit to the SNF for skilled services.

Coding: GG0100B would be coded 9, Not Applicable.

Rationale: The resident did not ambulate immediately prior to the current illness, injury, or exacerbation (the second stroke).

GG0100: Prior Functioning: Everyday Activities (cont.)

3. **Stairs:** Resident P has expressive aphasia and difficulty communicating. SNF staff have not received any response to their phone messages to Resident P's family members requesting a return call. Resident P has not received any visitors since their admission. The medical record from their prior facility does not indicate Resident P's prior functioning. There is no information to code item GG0100C, but there have been attempts at seeking this information.

Coding: GG0100C would be coded 8, Unknown.

Rationale: Attempts were made to seek information regarding Resident P's prior functioning; however, no information was available.

4. **Functional Cognition:** Resident K has mild dementia and recently sustained a fall resulting in complex multiple fractures requiring multiple surgeries. Resident K has been admitted to the SNF for rehabilitation. Resident K's caregiver reports that when living at home, Resident K needed reminders to take their medications on time, manage their money, and plan tasks, especially when they were fatigued.

Coding: GG0100D would be coded 2, Needed Some Help.

Rationale: Resident K required some help to recall, perform, and plan regular daily activities as a result of cognitive impairment.

