GG0100. Prior Functioning: Everyday Activities

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:

3. **Independent** - Resident completed all the activities by themself, with or without an assistive device, with no assistance from a helper.
2. **Needed Some Help** - Resident needed partial assistance from another person to complete any activities.
1. **Dependent** - A helper completed all the activities for the resident.
8. **Unknown.**
9. **Not Applicable.**

Enter Codes in Boxes

☐	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.
☐	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.
☐	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.
☐	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.

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 *them*self, 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.*
- *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* T was admitted to an acute care facility after sustaining a stroke and subsequently admitted to the SNF for rehabilitation. Prior to the stroke, *Resident* T was independent in eating and using the toilet; however, *Resident* T required assistance for bathing and putting on and taking off *their* shoes and socks. The assistance needed was due to severe arthritic lumbar pain upon bending, which limited *their* ability to access *their* feet.

   Coding: GG0100A would be coded 2, Needed Some Help.
   Rationale: *Resident* T needed partial assistance from a helper to complete the activities of bathing and dressing. While *Resident* T did not need help for all self-care activities, *they* did need some help. Code 2 is used to indicate that *Resident* T needed some help for self-care.

2. **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.

3. **Indoor Mobility (Ambulation):** Approximately three months ago, *Resident* K had a cardiac event that resulted in anoxia, and subsequently a swallowing disorder. *Resident* K has been living at home with *their spouse* and developed aspiration pneumonia. After this most recent hospitalization, *they were* admitted to the SNF for a diagnosis of aspiration pneumonia and severe deconditioning. Prior to the most recent acute care hospitalization, *Resident* K needed some assistance when walking.

GG0100: Prior Functioning: Everyday Activities (cont.)

Coding: GG0100B would be coded 2, Needed Some Help.

Rationale: While the resident experienced a cardiac event three months ago, *they* recently had an exacerbation of a prior condition that required care in an acute care hospital and skilled nursing facility. The resident's prior functioning is based on the time immediately before *their* most recent condition exacerbation that required acute care.

4. **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).

5. **Stairs:** Prior to admission to the hospital for bilateral knee surgery, followed by *their* recent admission to the SNF for rehabilitation, *Resident* V experienced severe knee pain upon ascending and particularly descending *their* internal and external stairs at home. *Resident* V required assistance from *their spouse* when using the stairs to steady *them* in the event *their* left knee would buckle. *Resident* V's *spouse* was interviewed about *their spouse*'s functioning prior to admission, and the therapist noted *Resident* V's prior functional level information in *their* medical record.

   Coding: GG0100C would be coded 2, Needed Some Help.

   Rationale: Prior to admission, *Resident* V required some help in order to manage internal and external stairs.

6. **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.

7. **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.

GG0100: Prior Functioning: Everyday Activities (cont.)

8. **Functional Cognition:** *Resident* R had a stroke, resulting in a severe communication disorder. *Their* family members have not returned phone calls requesting information about *Resident* R's prior functional status, and *their* medical records do not include information about *their* functional cognition prior to the stroke.

   Coding: GG0100D would be coded 8, Unknown.

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