Client:_____ MRN: _____ Eval Date: _____ DC Date:_____

Self-Care and Mobility Section GG Items

Self-Care CARE Items (Activities of Daily Living)

The Self-Care CARE Items do not replace standardized assessments that occupational therapy may use for evaluation. These items are being implemented across all post-acute care (PAC) settings by Medicare (CMS). For more information and scoring information, see the Medicare Assessments linked on the last page. Many assessments that provide information about ADL performance also provide information about cognition, vision, and other concerns. After completing the Occupational Profile, complete and document various assessments to gather essential data for your initial evaluation.

Use the form below to score and document self-care items. This tool can be implemented in any adult care setting.
See page 2 for scoring information. See page 3 for transfer and mobility items.

6 = *Independent;* **5** = *Setup or Cleanup Assistance;* **4** = *Supervision or Touching Assistance;* **3** = *Partial/Moderate Assistance;* **2** = *Substantial/Maximal Assistance;* **1** = *Dependent;* **07** = *Refused;* **09** = *Not Applicable;* **10** = *Not attempted due to environment limitation;* **88** = *Not attempted due to medical condition/safety.*

Self-Care Items (Assessment Item GG 0130***)

	Admission	Goal	Discharge	Item	Definition
A				**Eating**	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 person.
B				**Oral Hygiene**	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.
C				**Toilet Hygiene**	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.
D				**Wash Upper Body****	**Wash Upper Body is only reported in LTCH.** The ability to wash, rinse, and dry the face, hands, chest, and arms while sitting in a chair or bed.
E				**Shower/ Bathe Self***	**Shower/Bathe Self is only reported in IRF, SNF, and HH.** The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower.
F				**Upper Body Dressing***	The ability to dress and undress above the waist; including fasteners, if applicable.
G				**Lower Body Dressing***	The ability to dress and undress below the waist, including fasteners; does not include footwear.
H				**Putting on/Taking off Footwear***	The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.
					Add "1" for each response of **07, 09, or 88.**
				IRF, SNF, or HH Total	For IRF, SNF, or HH, add lines A, B, C, E, F, G, H (A score of 7–42 is possible.)
				LTCH Total	For LTCH, add lines A, B, C, D (A score of 4–28 is possible.)

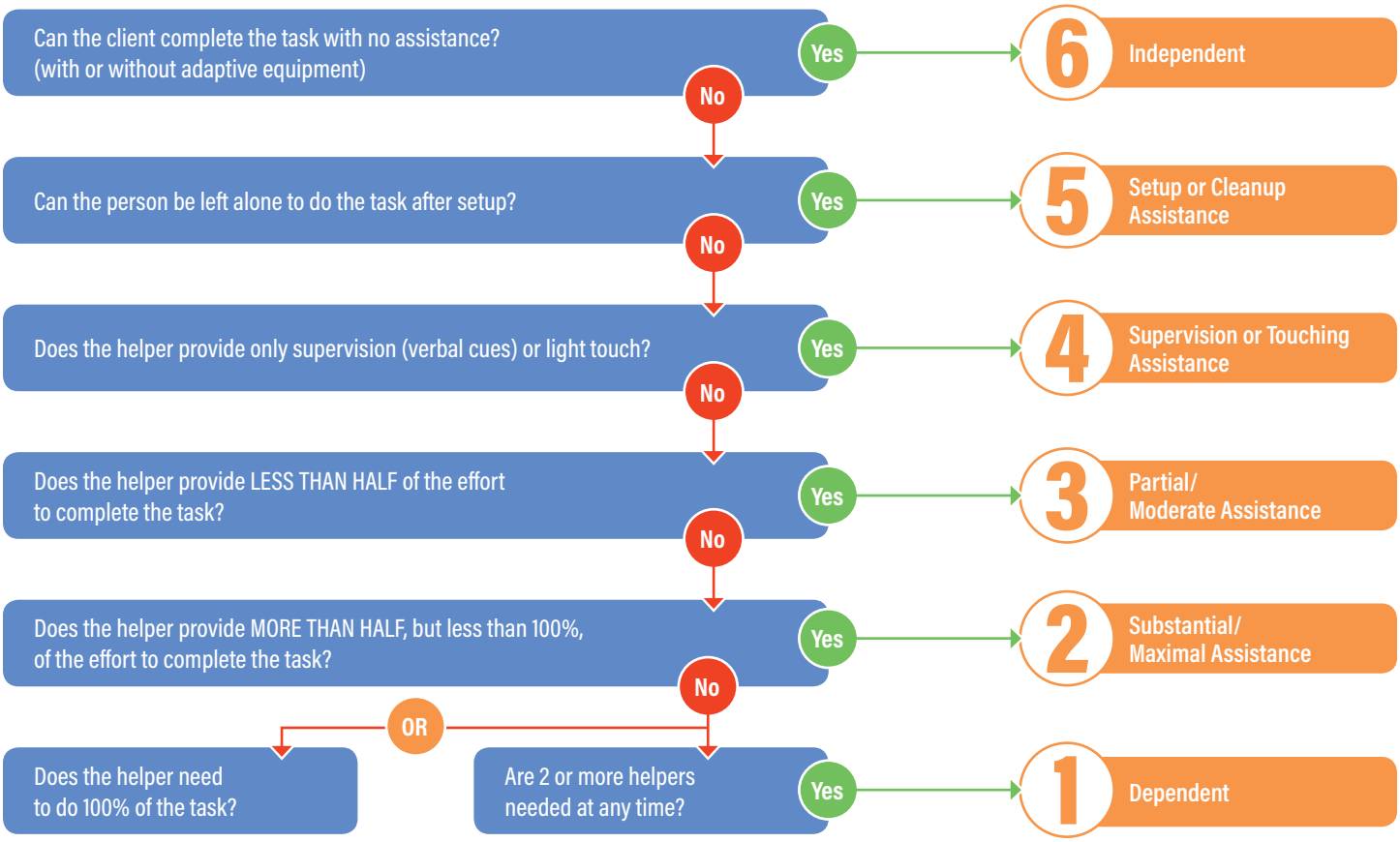
*Indicates the item is not yet reported to CMS in Long Term Care Hospitals (LTCH).
**Indicates the item is *only* reported to CMS in LTCH.
***These items correspond with item GG 0130 in the 4 Medicare assessments, including the Skilled Nursing Facility Minimum Data Set (MDS), Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF–PAI), Long Term Care Hospital Continuity Assessment Record Evaluation Tool (LTCH CARE), and the Home Health Outcome and Assessment Information Set (OASIS).

HH = home health; IRF = inpatient rehabilitation facility; SNF = skilled nursing facility; LTCH = Long Term Care Hospital.

Note the facility will report the client's "usual performance over the first 3 days of admission" for each item to CMS.

Scoring Algorithm

See the chart below to help score each item. Adaptive equipment and assistive devices may be used for any score. For more information, see www.aota.org/CARE.



6: Independent—Person completes the activity by himself/herself with no assistance from a helper.
5: Setup or cleanup assistance—Helper SETS UP or CLEANS UP; person completes activity. Helper assists only prior to or following the activity. (The helper can walk away and leave the person to complete the task.)
4: Supervision or touching assistance—Helper provides VERBAL CUES or TOUCHING/STEADYING and/or CONTACT GUARD ASSISTANCE as person completes activity. Assistance may be provided throughout the activity or intermittently.
3: Partial/moderate assistance—Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs but provides less than half of the effort.
2: Substantial/maximal assistance—Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
1: Dependent—Helper does ALL of the effort. Person does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the person to complete the activity.

07: Refused.
09: Not applicable.
10: Not attempted due to environmental limitations.
88: Not attempted due to medical condition or safety concern.

Mobility CARE Items (Assessment*** Item GG 0170)

6 = *Independent;* **5** = *Setup or Cleanup Assistance;* **4** = *Supervision or Touching Assistance;* **3** = *Partial/Moderate Assistance;* **2** = *Substantial/Maximal Assistance;* **1** = *Dependent;* **07** = *Refused;* **09** = *Not Applicable;* **10** = *Not attempted due to environment limitation;* **88** = *Not attempted due to medical condition/safety.*

	Admission	Goal	Discharge	Item	Definition
A				**Roll left and right**	The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
B				**Sit to lying**	The ability to move from sitting on side of bed to lying flat on the bed.
C				**Lying to sitting on side of bed**	The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
D				**Sit to stand**	The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
E				**Chair/bed-to-chair transfer**	The ability to transfer to and from a bed to a chair (or wheelchair).
F				**Toilet transfer**	The ability to get on and off a toilet or commode.
G				**Car transfer**	The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
I				**Walk 10 feet**	Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If admission performance is 07, 09, 10, or 88, Skip to "M, 1 Step (curb)."
J				**Walk 50 feet with 2 turns**	Once standing, the ability to walk at least 50 feet and make 2 turns.
K				**Walk 150 feet**	Once standing, the ability to walk at least 150 feet in a corridor or similar space.
L				**Walking 10 feet on uneven surfaces**	The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
M				**1 Step (curb)**	The ability to go up and down a curb and/or up and down 1 step. If admission performance is coded 07, 09, 10, or 88, skip to "P, Picking up object."
N				**4 Steps**	The ability to go up and down 4 steps with or without a rail. If admission performance is 07, 09, 10, or 88, Skip to "P, Picking up object."
O				**12 Steps**	The ability to go up and down 12 steps with or without rail.
P				**Picking up object**	The ability to bend/stoop from standing position to pick up small object, such as spoon, from floor.
	Score "R" and "S" only if the client uses a wheelchair. Check: ☐ manual wheelchair ☐ motorized wheelchair				
R				**Wheel 50 feet with 2 turns**	Once seated in wheelchair/scooter, can wheel at least 50 feet and make 2 turns.
S				**Wheel 150 feet**	Once seated in wheelchair/scooter, can wheel at least 150 feet in corridor or similar space.

***These items correspond with item GG 0170 in the 4 Medicare assessments, including the Skilled Nursing Facility Minimum Data Set (MDS), Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF–PAI), Long Term Care Hospital Continuity Assessment Record Evaluation Tool (LTCH CARE), and the Home Health Outcome and Assessment Information Set (OASIS).

References

Centers for Medicare and Medicaid Services. (2017). *Proposed measure specifications and standardized data elements for CY 2018 HH QRP notice of proposed rule making.* Retrieved from https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Downloads/Proposed-Measure-Specifications-and-Standardized-Data-Elements-for-CY-2018-HH-QRP-Notice-of-Proposed-Rule-Making.pdf

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Gage, B., Deutsch, A., Smith, L., Schwartz, C., Ross, J., Coots, L., . . . Mallinson, T. (2012b). *The development and testing of the Continuity Assessment Record and Evaluation (CARE) Item Set: Final report on Care Item Set and current assessment comparisons* (Vol. 3). Retrieved from https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/Downloads/The-Development-and-Testing-of-the-Continuity-Assessment-Record-and-Evaluation-CARE-Item-Set-Final-Report-on-the-Development-of-the-CARE-Item-Set-and-Current-Assessment-Comparisons-Volume-3-of-3.pdf

Full Medicare Assessments

Review the most recent full Medicare assessments for each post-acute care setting:

Inpatient Rehabilitation Facility Resident Assessment Instrument (IRF–PAI):
https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/IRFPAI.html

Minimum Data Set (MDS) used in Skilled Nursing Facilities:
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html

Outcome and Assessment Instrument Set (OASIS) used in Home Health Agencies:
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/OASIS/index.html

Long Term Care Hospital Continuity Assessment Record (LTCH CARE):
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-CARE-Data-Set-and-LTCH-QRP-Manual.html

For More Information

Review AOTA information on the implementation of the self-care and mobility measures using items from the Continuity Assessment Record Evaluation (CARE) at **www.aota.org/CARE**

AOTA Practice Resources

Productive Aging Evidence-Based Practice Resources
http://www.aota.org/Practice/Productive-Aging/Evidence-based.aspx

Health & Wellness Evidence-Based Practice Resources
http://www.aota.org/Practice/Health-Wellness/Evidence-Based.aspx

Rehabilitation & Disability Evidence-Based Practice Resources
http://www.aota.org/Practice/Rehabilitation-Disability/Evidence-Based.aspx

AOTA Occupational Profile Template
http://www.aota.org/profile