

GG0130H. Putting On/Taking Off 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.

Assessment Timing

Admission:

- Admission performance.
- Discharge goal.

Discharge:

- Discharge performance.

Putting On/Taking Off Footwear Inclusions and Exclusions for Coding

Included:

- Clothing, wraps, or supportive devices that cover all or part of the foot, including socks, shoes, boots, and running shoes.
- Ankle foot orthosis (AFO), elastic bandages, foot orthotics, orthopedic walking boots, compression stockings.
- Footwear considered safe for mobility.
- Management of fasteners.

Excluded:

- Clothing, wraps, or supportive devices that are considered for lower body dressing (such as an elastic bandage that only covers the lower leg).
- Use of prosthetics considered as a part of lower body dressing.

Coding Tips

The assessment of putting on/taking off footwear includes identifying the resident's ability to put on and take off socks and shoes or other footwear that are appropriate for safe mobility.

Activity Performance Codes

- 06 – Independent.
- 05 – Setup or clean-up assistance.
- 04 – Supervision or touching assistance.
- 03 – Partial/moderate assistance.
- 02 – Substantial/maximal assistance.
- 01 – Dependent.

Coding Scenarios

Each row in the table below describes a footwear scenario. In each scenario, statements 2 and 4 identify key elements that inform the coding of **GG0130H. Putting on/taking off footwear**. The correct code is provided at the end of each scenario.

Coding Scenarios for GG0130H. Putting On/Taking Off Footwear

	Statement 1	Statement 2	Statement 3	Statement 4	Code
Scenario 1	Resident W. has chronic back pain that limits their mobility. They prefer to wear loafers without socks.	The CNA retrieves Resident W.'s loafers and a long-handled shoehorn and provides no other assistance while the resident puts on their shoes.	Resident W. requires the use of the shoehorn to put on and take off their loafers.	In the evening, after Resident W. removes their shoes, the CNA puts away the shoehorn and loafers.	Code 05
Scenario 2	Resident M. is recovering from a recent stroke that resulted in right-sided upper and lower body weakness.	The occupational therapist (OT) is present as Resident M. puts on their socks. Resident M. sways, slightly losing their balance. The OT lightly puts their hands on Resident M.'s shoulder to steady them as Resident M. continues to put on their shoes.	After putting on their shoes, Resident M. applies a knee brace to their right knee.	The medical record indicates that the same level of assistance was provided the night before when Resident M. removed their footwear.	Code 04
Scenario 3	Resident P. has peripheral edema affecting both feet and ankles.	Resident P. struggles to don their compression stockings. The nurse puts them over Resident P.'s toes and pulls the stockings up. Resident P. then puts on their shoes without needing further assistance.	During the day, Resident P. elevates their legs to reduce the swelling to their feet and ankles.	Before bedtime, Resident P. removes their shoes and compression stockings independently.	Code 03

Additional Clinical Considerations

- Use of assistive devices to complete an activity should not affect the coding of this activity.
- For residents with a single lower extremity amputation with or without use of a prosthesis, the activity of putting on/taking off footwear could apply to the intact limb or both the limb with the prosthesis and the intact limb.
- If the resident performed the activity of putting on/taking off footwear for the intact limb only, then code based upon the amount of assistance needed to complete the activity.
- If the resident performed the activity of putting on/taking off footwear for both the intact limb and the prosthetic limb, then code based upon the amount of assistance needed to complete the activity.