





ACTIVITIES OF DAILY

LIVING



ADL's





ADL Categories

Bed Mobility Locomotion

Transfer Dressing upper & lower body

Toilet Use Walk in Room

Eating Walk in Facility

Bathing Grooming & Personal Hygiene



Definition and Assessment of Bed Mobility

Is how the resident moves to and from a lying position, how they turn side to side, and positions their body while in bed or alternate sleeping furniture.

Consider

- 1. How they turn from side to side while in bed.
- 2. How they lay down and sit up when in bed.
- 3. How they position themselves in bed.

Question:

If the resident is positioning themselves all over the bed and you keep repositioning them for safety, what code would you be using?



Definition and Assessment of Transfer

Is how the resident moves between surfaces.

Consider movement

- 1. From bed to chair
- From chair to bed
- 3. From bed to wheelchair
- 4. From all surfaces to a standing position

Do not include movement to and from the bath or toilet, which is included under Toilet Use and Bathing



Definition and Assessment of Toilet Transfer & Toileting

Toilet Transfer: Is how the resident gets to and moves on and off toilet, bedpan or commode.

Toileting: involves

- 1. How they use the bathroom or commode, bedpan or urinal;
- 2. How much assistance they need to clean themselves afterwards;
- 3. How much assistance they need when pulling down or up clothing;
- 4. How much assistance is needed when they change pads, managing ostomy or catheter.



Continuing with Toilet Use

- 5. Do not limit the assessment to the use of the bathroom only.
- 6. Elimination can occur in many settings and includes the transferring on and off the toilet, bedside commode, bedpan, self cleansing, changing of their pads, managing their ostomy or catheter if used and adjusting their clothing.
- 7. This activity does not include the staff emptying the bedpan, urinal, bedside commode, catheter bag or ostomy care.



Eating

- 1. How the resident eats and drinks, regardless of skill.
- 2. The ability to get food into their mouth.
- 3. Includes intake of nourishment by other means such as tube feeding, total parenteral nutrition or IV's, etc.
- 4. Includes taking in fluids during the night.
- 5. Does not include eating/drinking during medication pass.



Definition and Assessment of Bathing

Bathing – is how the resident takes a full-body bath/shower, sponge bath and transfers in and out of the tub or shower.

This excludes the washing of their back and hair.



Definition and Assessment of Locomotion

Locomotion – Is the moving about facility, with wheelchair, if being used.

- 1. Walking or wheeling once in the wheelchair.
- 2. How much assistance is needed when they are traveling between locations in their room such as bed to bathroom and in the corridor on the same floor.
- 3. How much assistance do they need when moving to and returns from "off unit" activities.
- 4. Locomotion off unit means how the resident moves to and from distant areas on the floor.



Dressing Upper and Lower Body

- 1. How the resident puts on, and takes off all items of clothing, including fasteners, pullovers, TED hose, orthotics, as well as putting on and taking off prostheses.
- 2. Dressing also includes putting on, removing and or changing pajamas and housedresses, or hospital gown.

This is a resident choice of what to wear.



Walking in Room

WALK – Walking is with legs.

How much assistance is needed when the resident walks to locations in his or her own room?

Only within the room.



Walking in Facility

WALK – Walking is with legs.

How much assistance is needed whey the resident walk in the hallway or the corridor on their unit.

Not within their room.



Grooming & Personal Hygiene

- 1. How much assistance do they need with
 - a. Combing their hair?
 - b. Brushing their teeth?
 - c. Shaving?
 - d. Appling makeup?
 - e. Washing and drying of their face and hands?

Do not include personal hygiene with baths and showers, which is covered under Bathing



INDEPENDENT

No help needed. The resident completes activity with no help or oversight

Examples:

- The resident starts eating by their self without needing any verbal or physical prompting or help.
- The resident is able to brush their own teeth and comb their hair without any staff assistance from staff.



Set Up Assistance

Preparing for the task.

Example:

- 1. You assist them by setting out their shoes. The resident is quite capable and does put on their shoes and ties them with out any staff assistance.
- 2. You take them a meal tray and set it in front of them. You only open the milk carton.

Do not count delivering the tray or taking off the lid that is all considered the delivery of the tray



Supervision

Needs oversite, cues, instruction, encouragement and reminders throughout the task

- 1. The use of eyes for oversight or mouth for verbal cueing
- 2. No touching with supervision
- 3. Allowed is oversight, encouraging, monitoring, verbal prompting, and cueing
- 4. The resident is able to complete the task but requires hands off assistance to complete.



Limited Assist

This is the guided maneuvering of limbs or other nonweight bearing assistance.

- 1. The resident is highly involved in activity, receiving physical help in guided maneuvering of limbs or other non-weight bearing assistance
- 2. The resident is very involved in helping their self but staff assisted with guided activity
- 3. The resident is doing more than the staff



Extensive Assist

Is weight bearing assistance, needing hand support of one person. The resident performs part of the activity while one staff member provides weight-bearing support or completes part of the activity.

- 1. Staff providing physical weight-bearing assistance for a resident to complete a task.
- 2. While the resident helps in the task, staff provides some partial physical support of the resident. In this case the resident is not totally dependent on the staff to do the activity.
- 3. The resident helped very little and staff provided weight bearing assistance (caring any part of the resident weight).
- 4. Staff does more than the resident.



Total Dependence With A One Person Assist

Is a one person assist: with full staff performance of activity. The resident must be unable or unwilling to perform any part of the activity

- 1. Full staff performance of the task
- Complete non-participation by the resident in all aspects of the ADL task
- 3. No assistance or participation from the resident. Staff performs and completes the entire ADL task for the resident
- 4. Resident did absolutely nothing for self, staff did it all
- 5. If the resident performs part of the activity, it would not be considered Total Dependence



Total Dependence With Two or More Assist

Is a two or more-person assist: with full staff performance of activity that requires two or more person assistance.

Examples:

- Two staff members must totally dress a 425 lb. resident who is unable to put their own arms through sleeves or cannot lift their legs to put them into her pant legs.
- 2. A resident cannot transfer themselves out of the bed. The staff members must use a mechanical lift to transfer them to the chair.



Activity Did Not Occur

- 1. The activity was not performed by either the resident or the staff.
- 2. Neither the staff or the resident performed the ADL task during the entire shift.
- 3. Particular activity did not occur at all.

Questions:

- 1. Can you score Ambulation as Activity Did Not Occur?
- 2. Can you score Bed Mobility as Activity Did Not Occur?
- 3. Can you score Eating as Activity Did Not Occur?



Document the care provided by facility staff only

Definition of "Facility Staff":

Are direct employees and facility contracted employees such as rehab staff, and nursing agency staff.

"Family" is not staff. If a wife comes in every day and does husbands bed bath it cannot be captured in task documentation.



Reminders

- 1. If a resident cannot put their feet in bed, you will code weight bearing assistance for bed mobility, it is not considered part of the transfer.
- 2. Every time 2 or more-person assistance is needed to perform a task, you need to document this in your flow sheet.
- 3. Weight bearing assistance includes when a resident leans into your body as you are now supporting their weight



Reminders Continued

- 4. When toileting include how the resident transfers on and off the toilet, bedpan, or bedside commode.
- 5. Never include emptying the bedpan or bedside commode, urinal, or catheter bag or ostomy care into your ADL documentation.
- 6. Bathing includes how the resident transfers in and out of the shower or bath.
- 7. Total dependence of one person usually does not make sense for bed mobility, transfers, and sometimes toileting.