VITARYS
Healthcare AI Assistants

Barthel Index Assessment for Activities of Daily Living

Date: Tuesday 10th December 2024

Time: 09:15am

Patient: Jane Green

Assessor: Katy Houghton

1. Feeding

Jane requires some assistance with tasks such as cutting meat and dealing with certain textures like bread but can generally use a fork and spoon independently.

Score: 5 points

2. Bathing

Jane needs assistance with entering and exiting the shower due to leg weakness and requires some help with tasks such as scrubbing her back and shampooing her hair.

Score: 0 points

3. Grooming

Jane can perform most grooming tasks independently but occasionally needs assistance with tasks requiring more dexterity.

Score: 0 points

4. Dressing

Jane is mostly independent but needs some help with tasks like fastening buttons, zipping, or tying shoes.

Score: 5 points

5. Bowel Control

Jane has complete bowel control with no signs of incontinence.

Score: 10 points

6. Bladder Control

Jane experiences mild incontinence when coughing or laughing but can manage independently with the use of incontinence pads.

Score: 5 points

7. Toileting

Jane can use the toilet independently but occasionally needs help readjusting her clothing afterward.

Score: 5 points

8. Transfers (Bed to Chair and Back)

Jane can transfer between bed and chair with minimal assistance but sometimes needs help to get into a seated position.

Score: 10 points

9. Mobility (Walking)

Jane can walk short distances with a walking stick or cane but prefers using a walker for longer distances.

Score: 15 points

10. Stairs

Jane avoids using stairs due to difficulty and fear of losing balance.

Score: 0 points

Total Score: 55/100

Assessment Summary

Jane Green demonstrates a mix of independence and need for assistance in her daily activities. She can manage feeding, grooming, dressing, and toileting with some support, indicating moderate independence. However, she requires more significant help with bathing and using stairs. Her bowel control is intact, but she experiences mild bladder incontinence. Mobility is maintained with aids, and transfers are manageable with minimal help.

Care Plan Records

Care Plan 1: Enhanced Mobility Support

Goal/Aim:

To **improve stability, confidence, and safety in mobility**, enabling Jane to maintain as much independence as possible while reducing fall risk.

Interventions and Actions:

1. Strength and Balance Training

Objective: Improve lower limb strength and overall balance to enhance walking stability.

- Refer Jane to a **physiotherapist** for a structured **leg-strengthening and balance program**, focusing on exercises such as **sit-to-stand, leg raises, and step-ups**.
- Schedule **gentle, supervised mobility exercises** at least **5 times per week** to build endurance and confidence.
- Encourage **seated or supported standing exercises** to maintain activity levels on days when Jane feels weaker.

2. Walking and Mobility Aid Optimization

Objective: Ensure Jane has the most effective mobility aids for her needs.

- Conduct a **mobility assessment** to determine if a **rollator walker** would be more effective for longer distances than her current walking stick.
- Train Jane on **proper use of her mobility aids**, ensuring correct posture and gait to prevent strain or imbalance.
- Assess the need for **handrails or grab bars in high-risk areas** to support independent movement at home.

3. Fall Prevention Measures

Objective: Reduce the risk of falls by making adjustments to Jane's environment.

- Implement a **home safety check** to identify and remove trip hazards (e.g., loose rugs, clutter).
- Ensure **good lighting** in frequently used areas, especially hallways and the bathroom.
- Encourage Jane to **wear supportive, non-slip footwear** at all times while walking.

4. Psychological Confidence in Mobility

Objective: Address Jane's fear of falling on stairs and boost confidence in movement.

- Offer **stair safety training with a physiotherapist**, using handrails and supervised practice.
- If Jane continues to avoid stairs, explore **alternative solutions such as a stairlift or downstairs bedroom setup**.

Clinical Chart Records to be Maintained:

1. **Mobility and Transfer Assistance Chart** – Track Jane's level of independence in transfers and walking, noting any deterioration or improvements.
2. **Fall Risk Assessment Record** – Document any near falls or safety concerns, adjusting interventions as necessary.
3. **Physical Therapy Progress Log** – Monitor Jane's participation in therapy and record strength/balance improvements.

Review Schedule:

- **Monthly:** Mobility and transfers review to adjust therapy and walking aid recommendations.
- **Quarterly:** Full mobility reassessment with a physiotherapist.
- **As Needed:** If Jane reports difficulty or near-falls, reassess immediately.

Care Plan 2: Bathroom Safety Enhancements

Goal/Aim:
To ensure safe, independent bathing and toileting while reducing the risk of falls and injury.

Interventions and Actions:

1. Accessible Shower Installation

Objective: Enable Jane to bathe safely and comfortably.

- Expedite the **installation of a walk-in shower with a built-in seat** to reduce the need for step-in movement.
- Install **grab bars in the shower area and near the toilet** for additional support.
- Provide **non-slip mats** to prevent slipping while bathing or moving between the toilet and shower.

2. Assisted Bathing and Transfer Training

Objective: Improve Jane's ability to enter and exit the shower safely.

- Train caregivers in **safe transfer techniques**, ensuring proper support during shower entry/exit.

- Encourage Jane to **use a shower chair** if she feels unstable while standing.
- Provide a **long-handled sponge and hand-held shower head** to support independent bathing.

3. Toileting and Hygiene Support

Objective: Maintain Jane's dignity while ensuring proper toileting assistance.

- Offer **discreet assistance with post-toileting hygiene** when required.
- Ensure easy access to **incontinence pads** for bladder control and maintain a record of their use.
- Encourage **hydration monitoring** to prevent issues related to reduced fluid intake due to fear of accidents.

Clinical Chart Records to be Maintained:

1. **Bladder Control Monitoring Chart** – Track incidents of incontinence and assess the effectiveness of current management strategies.
2. **Bathroom Safety Log** – Document any incidents, near falls, or changes in Jane's ability to navigate the bathroom independently.
3. **Assisted Bathing and Transfer Record** – Note the level of support required for bathing and transfers, adjusting strategies as necessary.

Review Schedule:

- **Monthly:** Review bathroom safety modifications and adjust as needed.
- **Quarterly:** Assess bladder incontinence management and hydration levels.
- **Biannually:** Ensure all safety enhancements remain in good repair and are still effective for Jane's needs.

Risk Matrix

Activity	Risk Level	Risk Factors
Mobility	Moderate	Limited mobility, risk of falls
Self-Care	Moderate	Dependence on assistance
Nutrition	Low	Partial liquid diet
Mental Alertness	Low	Alert and oriented