

AROC FAM

Content of this presentation

- Essential background
 - Origins of the FIM and FIM+FAM
- How to rate the FIM+FAM
 - Broad overview

Functional Assessment Measure - FAM

- The FAM does not stand alone
 - Uses FIM as basis
 - Adds 18 items
 - specifically addressing cognitive and psychosocial areas
- FAM items developed by
 - Santa Clara Valley Medical centre – 1990s by Dr Karyl Hall
 - No longer being maintained
 - Originally designed especially for use in brain injury
- Developed by the UK FIM FAM User Group for AROC use with review and permission of Professor Lynne Turner-Stokes DM FCRP -Regional Hyper-acute Rehabilitation Unit Northwick Park Hospital UK

- The FAM has an ‘Extended Activities of Daily Living’ section addressing areas of functional ability when living in the community.
- FAM is essentially a rating of the need for assistance – what type of and how much assistance the person actually receives to complete tasks.
- FAM is environmentally sensitive – may or may not be disability-friendly.

Minimum Dataset

- Factors known to affect outcome
 - Age
 - Time delay since onset
- Severity and nature of deficits
 - Physical
 - Cognitive
 - Communication
- Complications
 - Visual, hearing
 - Behavioural problems
- Mood, motivation

FAM Items

- Self-care -
 - Swallowing
- Mobility –
 - Transfers: Car
 - Community Mobility
- Communication-
 - Reading
 - Writing
 - Speech Intelligibility
- Psychosocial –
 - Emotional Status
 - Adjustment to Limitations
 - Use of Leisure time
- Cognition –
 - Orientation
 - Concentration
 - Safety Awareness

FAM Items

Extended Activities of Daily Living (EADL)

- Meal Preparation
- Laundry
- Housework
- Shopping
- Financial Management
- Work/Education

Timing of scores

- Admission score – baseline rate within 48 hours following admission.
- Discharge score – Just before discharge.
- Obtaining the information for FAM scoring will be by observation and communication with the person, family or carer.

How to Rate FAM



- A broad view

Basic FAM Scoring Principals

- Previously FIM trained and credentialed.
- FAM user to be familiar with the person and FAM ratings.
- Best scored by the multi-disciplinary team.
- FAM is essentially a rating of the need for assistance – actual performance, not what they could do or might do in different circumstances or clinician thinks they can do.

Basic FAM Scoring Principals continued

- Each FAM item must be scored – no blanks, NA or half points
- Use the decision tree then check the level description on the text page
- If undecided between two scores use the lower score.
- Use the manual / tree structures
 - Use the decision tree
 - Check level description at the bottom

What if we disagree?

- Check the manual
 - Has one of you read it wrong?
- If genuine disagreement
 - Score the lowest
- If functions variably
 - Score the lowest

Description of the FAM levels or function

Independent – Another person is not required for the activity

7 Complete independence

- the person performs all of the tasks described as making up the activity within a reasonable time and does so safely without the need for modification, assistive devices or aids.

(No help, no devices, safe and timely)

6 Modified independence

One or the more may be true:

- a) Uses an assistive device
- b) Takes longer than a reasonable amount of time
- c) There is some concern for safety

(No help, but uses a device, or issues for safety or timeliness)

Dependent – Receives help from another person to perform the activity or does not do the activity

5 Supervision or set-up

- Receives no more than stand-by cueing, coaxing or verbal prompting without physical contact or help just to set-up, apply orthosis etc.
- (No help, but set-up or verbal cueing)

4 Minimal Assistance

- No more help than touching.
- Receives incidental help only to complete tasks
- Does at least 75% themselves
- (Help at level of touching only – e.g. contact-guarding, steadying assistance)

3 Modified assistance

- More than touching assistance
- Receives moderate help but still performs 50-74% of the task themselves
- (Hands-on help but the person does more of the task than the helper)

Complete Dependence - The person performs less than half of the task

2 Maximal assistance

- Receives substantial assistance – the person provides 25—49% of the effort to complete the task
- The person does less of the task than the helper but does contribute)

1 Total assistance

- Receives total assistance – the person contributes less than 25% of the effort
- Or
- The activity is not performed.
- The person is unable or does very little (<25%) of the task

Automatically score 1 if:

- The patient does not perform activity at all
- Needs 2 people to help
- The item is un-testable
- Information is unavailable
- Patient would be at risk of injury if tested

General decision tree

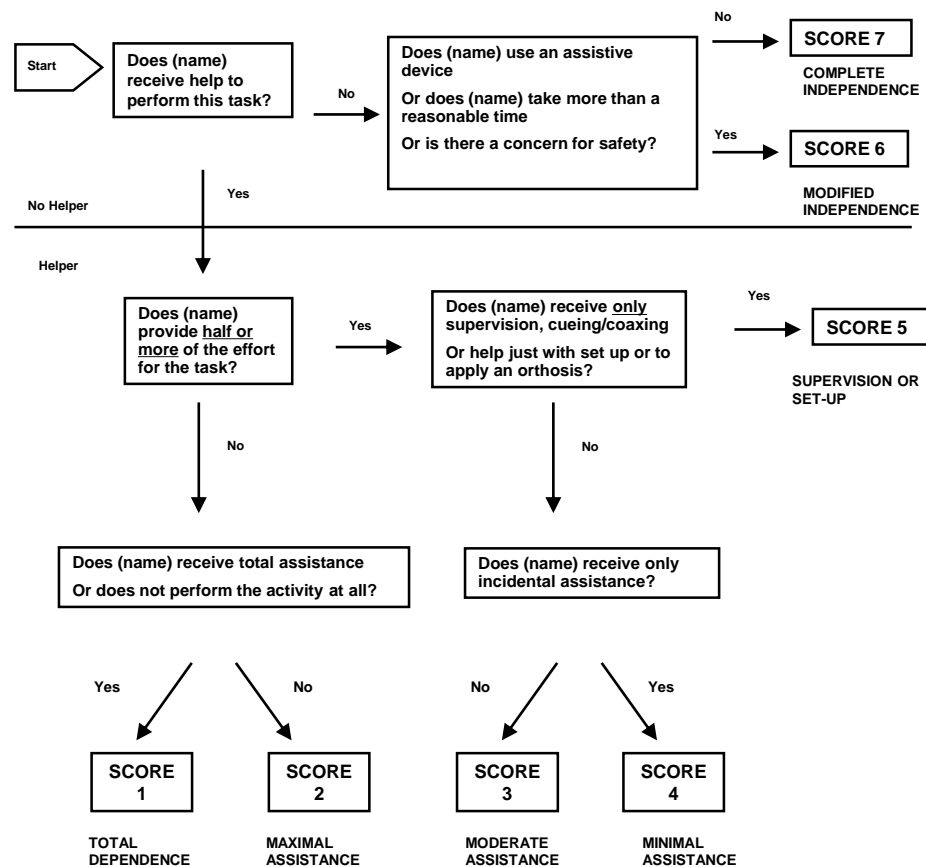
- Boxes at top of page
 - Left – what is included in the item
 - Right – a description of level 7
- Box at bottom of page
 - Level descriptors
 - Check this to make sure the description matches the level you have reached through the decision trees
- Additional Comments
 - Page opposite
 - Commonly encountered problems
 - These may help if you have difficulty agreeing a score

1. GENERAL DESCRIPTION OF ITEMS

Item includes:
• Various components included in the task.

At level 7, the person:
Description of complete independence.

Start at the top left hand corner
Follow the tree down



NOTES

- Level 7 : Complete independence: Performs independently and safely.
- Level 6 : Modified independence: Uses an assistive device, or there is consideration for time / safety.
- Level 5 : Supervision or set-up: Receives only cueing or coaxing but no physical contact - or help just with set-up.
- Level 4 : Minimal assistance: Receives incidental help but performs 75% or more of the task themselves.
- Level 3 : Receives moderate assistance: but still performs more than half the task themselves (50-74%).
- Level 2 : Maximal assistance: provides less than half of the effort to complete the task (25-49%).
- Level 1 : Receives total assistance - contributes less than 25% of the effort. Or does not perform the activity at all.

Pros and cons of using the FAM

- Scored by M-D Team -
 - Enhances team communication
 - Takes longer to score
 - Better description of problems
 - Especially for ‘walking wounded’ patients
 - Some psychosocial items are quite subjective
 - No FAM data previously collected by AROC

Swallowing

- Overlaps FIM eating item
 - Still score including swallowing
 - To maintain integrity of the FIM
- FAM item
 - Specifically separates swallowing
 - Need for SLT / dietetic involvement.
 - Supplementary feeding
 - FIM deals with help required to set up feeds
 - FAM deals with proportion of oral / enteral feeding

Swallowing includes:

- The ability to eat a regular diet by mouth

At level 7

- Complete independence
 - Eats a regular oral diet of choice
 - Including managing all consistencies
 - In a reasonable amount of time
 - Performs independently and safely

Swallowing - level 6

- **Modified independence**
- Pt takes all nourishment by mouth
- May require one or more of the following:
 - Devices / strategies to clear food
 - Eg multiple swallows
 - If requires modified consistency
 - Chooses and prepares these themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg choking

Swallowing - level 5

- Supervision or set up
 - No hands-on help
- Takes all nourishment by mouth
- Help may be required for:
 - Modified consistency
 - Making appropriate food choices
 - eg pureed diet
 - Verbal cueing / coaxing
 - Reminding to slow down
 - Supervision for safety

Swallowing levels 4, 3, and 2

- **Level 4** - minimal assistance
 - Patient provides >75% of the effort eg
 - Takes primary nourishment by mouth
 - Minimal contact to control speed of intake
- **Level 3** – moderate assistance
 - Patient provides more than half of the effort eg
 - Takes some nourishment by mouth
 - And/or moderate assistance to control speed of intake
- **Level 2** – maximal assistance
 - Patient provides less than half of the effort eg
 - Unable to receive adequate nourishment by mouth
 - Primary nutrition from tube feeding
 - Oral feeding is limited **and/or** requires maximal assistance
 - But still provides >25% of the effort

Swallowing - level 1

- Total assistance
 - Unable to take anything by mouth
 - All nutrition provided by tube feeding

Example – Swallowing

- David has one soft meal a day, which he manages safely, but gets his fluids and most of his nutrition through his PEG.
- *Score 2*
 - *Maximal assistance*
 - *Score lowest performance,*
 - *i.e. PEG but not unable to take anything*

Car Transfers

Car transfers

- Includes
 - Approaching car from pavement
 - Unlocking and opening car door
 - Transferring onto car seat
 - Fastening seat belt
- If uses wheelchair
 - Stowing wheelchair
- At level 7
 - Pt does all these independently and safely
 - Within a reasonable time

Car transfers

Level	Description
6	Independent with a device Or considerations for time and/or safety
5	Standby supervision or set-up only
4	Minimal contact Or help just to load wheelchair
3	Moderate assistance eg lifting legs in
2	Maximal assistance pt provides less than half the effort
1	Total assistance or does not transfer into car

Example – Car transfers

- Christos can transfer in and out of the car unaided, but, until he gets the new car with the wheelchair hoist, needs someone to stow the wheelchair for him.
- **Score 4**
 - Help with stowing wheelchair

Community Mobility

Community Mobility includes

- Organizing and managing personal travel within the community:
 - planning a route, time management, paying fares
- Using some form of public transport
 - (taxi, bus, underground or train)
- Or driving a car
- Getting around in the locality
 - on foot or in a wheelchair
 - including managing kerbs, crowds, escalators/lifts, road crossings, etc
 - including loading/unloading wheelchair

Community Mobility - level 7

- Complete independence
 - Patient uses some form of public transport
 - OR drives a car
 - OR uses normal taxi services from choice
 - Rather than necessity
 - Gets around in the locality
 - Fully independently and safely

Community Mobility - level 6

- Modified independence
- Requires one or more of the following:
 - An adaptive device / strategies eg
 - Modified car
 - Keeps trips short due to rest periods
 - Limited to certain taxi services
 - (eg Wheelchair adapted or using Taxicard)
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg getting lost

Community Mobility - level 5

- Supervision or set-up – but no hands-on help
 - Needs only supervision or set-up at the start of the journey
 - Eg to help plan the journey
 - Or to buy ticket in advance
 - Then manages independently

Community mobility - levels 4, 3, and 2

- **Level 4** - minimal assistance
 - Has help at both ends of journey
 - Eg to be put on a bus and met at the other end
 - Cannot score >4 if travels by car and requires help for car transfers
- **Level 3** – moderate assistance
 - Has constant presence of someone in community
 - Eg to help with kerbs, avoid obstacles
 - But still does more than half the task themselves
- **Level 2** – maximal assistance
 - Contributes to some of the tasks in getting around
 - But has help for more than half
 - Only one helper required

Community Mobility - level 1

- Total assistance
 - Patient contributes <25% of the effort
 - To getting around in the community
- **OR:**
 - requires 2 helpers
 - unable to move around in the community

Example – Community Mobility

- Mark found a number and called a taxi to take him to visit his mother.
 - However, he was unable to tell the driver where to go because he could not remember her address or the route there.
 - Also, he had not thought to take any money with him and had not rung his Mum to say he was coming.
 - The taxi driver refused to take him.
- Score 1
 - Effectively it did not happen!
 - The only thing he did was to call the taxi

FAM Communication items

- Reading
- Writing
- Speech intelligibility

Reading includes:

- Ability to understand written material
 - In the language of the environment
 - Note contrast to FIM in this respect
 - (The functional relevance of reading is to be able to make use of written cues in the environment)
- Complex material
 - Information leaflets
 - Menu cards
 - Timetables
 - Newspapers
- Simple material
 - Signs
 - Single words/ phrases
 - Simple cue cards
 - Large print
 - Word / picture matching
 - Single Letter cards

Reading - level 7

- Complete independence
 - Reads and completely understands complex material
 - Eg information leaflets, newspapers / books
 - In the language of the environment
 - Without help or prompting

Reading - level 6

- Modified independence
 - Reads complex material without assistance
 - Complex sentences and short paragraphs
- May require
 - Glasses or other assistive device
 - Adaptation
 - Eg Braille
 - Extra time to understand the information
 - Reduced speed or retention

Reading - level 5

- Reads simple material
 - Eg short sentences
 - Requires prompting
 - For longer or more complex sentences

Reading levels 4, 3, and 2

- **Level 4** – minimal assistance
 - Recognises single words and familiar short phrases
- **Level 3** – moderate assistance
 - Reads letters and recognises objects
 - Matches words to picture correctly > half the time
- **Level 2** – maximal assistance
 - Recognises identical objects / letters
 - Matches words to picture correctly < half the time

Reading - level 1

- Total assistance
 - Unable to match or recognise identical letters or objects consistently

Conundrums – Reading

- English not their first language
 - From the functional view-point
 - Reading ability must be judged in the predominant language of the environment
 - Ie English in rehab units in Australasia.
 - Whilst this may seem politically incorrect
 - The functional application of reading is to be able to read signs, written information, timetables etc
 - The FAM is environmentally dependent,
 - and the environment may be limiting
 - Even if they can read in their own language,
 - it is unlikely to be possible to test this accurately

Example - Reading

- John was dyslexic before his CVA. Reading is now limited to recognizing names and familiar words and phrases, eg. he gleans some information from newspaper headlines and football results.
- *Score 4*
 - *More than single words and letters*
 - *but not as much as sentences*

Writing

Writing includes:

- Ability to produce written material
 - In the language of the environment
 - Again, note contrast to FIM in this respect
 - (The functional relevance of writing is to be able to make use of written notes in the environment)
 - Includes
 - Spelling
 - Grammar
 - Syntax
 - Completeness of written communication

Writing - level 7

- Complete independence
 - Writes with acceptable accuracy in spelling, grammar, syntax and punctuation
 - Without help or prompting

Writing - level 6

- Modified independence
 - Writes sentences and short paragraphs accurately
- May require
 - Glasses or other assistive device
 - Eg word-processor
 - Errors
 - May make occasional spelling / grammatical errors
 - Extra time
 - Reduced speed of writing

Writing - level 5

- Writes simple material
 - Eg phrases / short sentences
 - May be evidence of spelling / grammatical errors
 - Requires prompting
 - For longer or more complex sentences

Writing levels 4, 3, and 2

- **Level 4** – minimal assistance
 - Writes single words and occasional short phrases
 - But with errors / poor legibility - some reader burden
- **Level 3** – moderate assistance
 - Writes their own name / some familiar words
 - Cueing may be required
- **Level 2** – maximal assistance
 - Writes some letter spontaneously
 - Able to trace or copy letters or numbers

Writing - level 1

- Total assistance
 - Unable to copy letters or simple shapes

Example - Writing

- Lisa writes letters for correspondence and university essays on her laptop, but her handwriting is only adequate for her signature or 1-2 messages.
- **Score 6**
 - Writes effectively using a device

Speech intelligibility

Speech intelligibility includes:

- Ability to produce intelligible speech
 - Articulation
 - Rate, volume, quality of vocal communication
- In this context:
 - Understandability reflects speech quality
 - Not language / meaning
 - Which are assessed separately under expression

Speech intelligibility - level 7

- Complete independence
 - Converses with a voice which is:
 - well-modulated
 - well articulated
 - In all situations, including:
 - Talking to strangers
 - Speaking on the telephone

Speech intelligibility - level 6

- Modified independence
 - Generally, speaks intelligibly in most situations
- May require:
 - Compensatory strategies
 - Eg to slow down, pinch nose for nasal speech
 - Uses these without prompting
 - Extra time
 - To get meaning fully across
 - Self corrects when not understood

Speech intelligibility - level 5

- Produces sentences intelligible to most people in most situations
 - Has occasional prompting
 - Eg to slow down, speak up
 - Or otherwise modify output to speak intelligibly

Speech intelligibility levels 4, 3, and 2

- **Level 4** – minimal assistance
 - Produces simple phrases
 - intelligible to most people
- **Level 3** – moderate assistance
 - Produces words / phrases
 - intelligible only by a familiar listener
 - or within a given context
- **Level 2** – maximal assistance
 - Produces single sounds / syllables
 - recognisable only by a familiar listener
 - or within context

Speech intelligibility - level 1

- Total dependence
 - Does not produce any recognisable speech or speech sounds

Example - Speech intelligibility

- Chris's voice and articulation are severely affected making speech rather unintelligible, though at times familiar listeners understand one or two words if the context is known.
- **Score 2**
 - *Not adequate but not all un-intelligible speech*

Conundrums – Speech intelligibility

- What if they speak gibberish with total clarity?
 - Can still score 7 in this item
 - Their inability to make meaningful conversation will be picked up in ‘Expression’

Emotional status

Emotional status includes:

- Ability to take responsibility for controlling emotions
 - impact of mood on day-to-day function
- Frequency and severity of emotional disturbance:
 - Depression
 - Anxiety
 - Euphoria
 - Frustration
 - Agitation

Potential overlap with FIM

- **Emotional Status and Social Interaction**
- **Social interaction -FIM**
 - Level of assistance to manage unwanted behaviours
 - Eg temper tantrums, aggressive outbursts, disinhibited behaviour
 - That impact on interaction with others
 - (May include very withdrawn behaviour due to depression)
- **Emotional status - FAM**
 - Separates out disorders of mood
 - Frequency of intervention (encouragement, advice, reinforcement)
 - To manage mood disturbance (eg tearfulness, lability)
 - At a level that may interfere with day-to-day function
 - But not necessarily impacting on interaction / behaviour with others

Emotional status - level 7

- Complete independence
 - Exhibits an appropriate emotional response
 - Without help from others
 - Emotional behaviours
 - do not interfere with day-today function

Emotional status - level 6

- **Modified independence**
 - Exhibits occasional emotional disturbance
 - But has adequate coping skills
- **May**
 - Take medication that is required for control
 - Eg anti-depressants

Emotional status levels 4, 3, 2 and 1

- Requires direct intervention (usually unplanned)
 - in the form of:
Encouragement/ advice, reinforcement or preventative action
 - Level is determined by frequency of intervention
- **Level 4** – minimal assistance
 - Once a week or less often
- **Level 3** – minimal assistance
 - Several times a week, but not daily
- **Level 2** – minimal assistance
 - Daily
- **Level 1** – total dependence
 - Many times each day

Example - Emotional status

- Ayesha is occasionally low and tearful and has a ‘bad day’ about once a week. At these times, she needs coaxing and prompting to rally round and to look at how well she is doing in therapy which makes her feel more positive.
- **Score 4**
 - Help required once a week or less often

Adjustment to limitations

Adjustment to limitations

- **Has two main components**
 - Above the 'help line'
 - A mental set of coming to terms with their disability
 - Insight, awareness and acceptance of limitations
 - Willingness to learn new ways of functioning
 - Having realistic expectations for the future
 - Below the help line
 - Help with making practical adjustments
 - eg using coping strategies
 - techniques to overcome or compensate for their disabilities

Adjustment to limitations - level 7

- Complete independence
 - Patient demonstrates
 - Awareness and acceptance of their limitations
 - Understands the implication of these
 - Uses appropriate strategies to compensate for them
- Has realistic expectations for the future

Adjustment to limitations - level 6, 5

- **Level 6: Modified independence**
 - Patient has some difficulty in coping with limitations
 - But not interfering with day-to-day function
 - Willing/able to learn new ways of functioning
 - May have some unrealistic expectations of long term recovery
- **Level 5: Supervision / set-up**
 - Manages with planned support or set-up
 - to use new ways of functioning

Adjustment to limitations levels 4, 3, and 2

- **Level 4 – minimal assistance**
 - Has occasional help or direction to cope with limitations or use new strategies
 - But manages > 75% of the time
- **Level 3 – moderate assistance**
 - Has some awareness of limitations
 - Needs moderate help to cope with limitations or use new strategies
 - But manages > half of the time
- **Level 2 – maximal assistance**
 - Has minimal awareness of limitations
 - Needs frequent help to cope with limitations or use new strategies
 - Requires help more often than not

Vignette - Adjustment to limitations

- Ron sets himself unrealistically high targets and will not accept or use help/ strategies suggested by others.
 - He will avoid or deny difficult situations but copes with familiar everyday situations.
 - He tries to do things that are now impossible and blames the equipment or someone else when things go wrong.
- **Score 6**
 - Might need help but does not take it,
 - unrealistic

Use of leisure time

Use of leisure time includes:

- Ability to engage in leisure activities
- **It has three steps:**
 1. Choosing the activity
 - eg swimming
 2. Arrangement to take part
 - Eg getting to the pool
 3. Performing the activity
 - Eg swimming
- Leisure activities can include passive activities
 - eg watching TV
 - Providing these are actually enjoyed
 - Eg concentrating on the programme

Use of leisure time - level 7

- Complete independence
 - The patient engages in and pursues a wide range of leisure activities
 - Without assistance
 - Or any special equipment
 - Performs all 3 steps
 - Independently and safely

Use of Leisure time - level 6,5

- **Level 6:** Modified independence
 - Uses leisure time without help
 - But
 - Choice may be limited
 - Or special equipment required
 - Or takes extra time
- **Level 5:** Prompting or set-up
 - Engages in leisure activities
 - Has prompting just at the start
 - Eg is lacking in initiative or motivation
 - But is then independent

Use of leisure time levels 4, 3, 2 and 1

Depends on the number of steps for which they require help

- **Level 4** – minimal assistance
 - Has help for just one step
- **Level 3** – moderate assistance
 - Has help for two of the steps
- **Level 2** – maximal assistance
 - Has help for all three steps
- **Level 1** – total dependence
 - Unable to engage in leisure activities, despite assistance

Example – Use of leisure time

- Kam watches recorded or Sky movies and likes most quiz and cookery shows.
 - She uses her head switch to operate the TV and video but someone has to change the videos.
 - She uses a switch operated page-turner if someone sets up a book, but she misses her dressmaking and cooking activities she did prior to her accident.
- **Score 4**
 - *Needs help with 1 of 3 aspects*
 - This item is unusual as set-up in this item takes you down to a 4, so need to ignore standard labeling on tree structure.

Orientation

Orientation includes:

- Orientation to:
 - Person
 - Place
 - Time
 - Situation

Orientation - level 7

- Complete independence
 - The patient is completely orientated
 - 100% of the time
 - In all 4 aspects, without cues

Orientation - level 6,5

- **Level 6:** Modified independence
 - Orientated without help from another person
 - But may
 - Take extra time to respond
 - Use self-initiated cues / aids
- **Level 5:** Prompting or set-up
 - Is orientated
 - but has help from another person
 - To set up aids
 - To prompt to use aids

Orientation levels 4, 3, 2 and 1

Depends on the no. of aspects for which they are orientated:

- **Level 4** – Minimal assistance
 - Orientated to 3 of the 4 aspects
 - Has incidental cues < 25% of the time
- **Level 3** – Moderate assistance
 - Orientated to 2 of the 4 aspects
 - Has regular cues from someone else
 - but manages more than half of the time
- **Level 2** – Maximal assistance
 - Orientated to only 1 of the 4 aspects
 - Has frequent cues – manages < half of the time
- **Level 1** – total dependence
 - Disorientated to all 4 aspects, or requires help all of the time

Vignette - Orientation

- Mick is orientated if he can see or has recently seen environmental clues, but can be misled, so he needs people to change his date board or throw away old newspapers.
- **Score 5**
 - Set-up

Concentration

Concentration includes:

- The length of time
 - that the patient can concentrate for
 - On a task or purposeful activity requiring concentration
- If variable
 - Score the lowest
- **At level 7**
 - Concentrates on a task for at least 30 mins
 - Without assistance
 - Self-directs back to the task after distraction

Concentration - level 6,5

- **Level 6:** Modified independence
 - Concentrates on task for 30 mins
 - But some difficulty getting 'back on track'
 - Or in switching attention to new task
- **Level 5:** Prompting or set-up
 - Concentrates on task for 30 mins
 - But needs set-up
 - Eg screened work area to remove distraction
 - Or prompting
 - To disengage from or return to task

Concentration levels 4, 3, 2 and 1

Depends on the length of time for which they can concentrate on a task with assistance from another person

- **Level 4** – minimal assistance
 - Concentrates on a task for 15 mins with assistance
- **Level 3** – moderate assistance
 - Concentrates on a task for 5-15 mins with assistance
- **Level 2** – maximal assistance
 - Concentrates on a task for 1-5 mins
 - May be easily distractible, or difficult to gain their attention
- **Level 1** – total dependence
 - No useful attention span
 - Highly distractible or unrousable to attend

Vignette – Concentration

- Kay can concentrate on an activity when motivated, such as when eating, which, with her severe ataxia, can take up to 45 minutes at lunchtime. In therapy, watching TV or on the edge of a group conversation, his attention drifts after 10 minutes or so.
- **Score 3**
 - Variable concentration
 - score to the lower

Safety awareness

Safety awareness includes:

- Ability to
 - anticipate potential danger and identify risks involved
 - plan ahead to avoid risk
 - avoid impulsivity
 - remember safety-related information
 - respond appropriately if danger arises
- It comprises both physical and cognitive ability.
- At level 7
 - Patient maintains their own safety at all times

Safety awareness - level 6,5

- **Level 6:** Modified independence
 - Has some supervision to maintain safety
 - While undertaking new or complex activities only

- **Level 5:** supervision or set-up
 - Safe to be left to cope with routine activities
 - Can be left alone for > ½ a day,
 - Eg while family are out at work)
 - but not safe to be left alone throughout 24 hours

Safety awareness levels 4, 3, 2 and 1

Depends on the time the person can be left alone for:

- **Level 4** – minimal assistance
 - Safe to be left alone for > 2 hrs or up to ½ a day
 - Requires safety check eg at mealtimes, if family are out all day
- **Level 3** – moderate assistance
 - Safe to be left alone for short periods (<2 hours)
 - Eg while carer goes briefly out to the shops
 - Able to summon help in an emergency
- **Level 2** – maximal assistance
 - Requires someone to be constantly in the vicinity
 - Cannot be left alone – unable to summon help
- **Level 1** – total dependence
 - Requires constant one-on-one supervision
 - eg 24 hour care in the community

Vignette – Safety awareness

- Ray's daughter pops in at lunchtime to make sure he is okay and cooks the lunch while his wife is working. They have an Alarm system for emergencies.
- **Score 4**
 - Safe to be left for up to ½ a day

Meal preparation
(FAM-DOM EADL item)

Meal preparation includes:

- Planning the meal
- Organising utensils and ingredients
- Preparing food
- Planning the order of tasks
 - So that the different components of the meal are ready at the appropriate time
- Safety in the kitchen
- **At level 7**
 - They prepare a full 2-course meal
 - Independently and safely, and in a timely manner

Meal preparation - Level 6,5

- **Level 6:** Modified independence
 - Able to prepare a full 2-course meal
 - But may use adapted utensils
 - Or consideration for time / safety
- **Level 5:** Supervision or set-up
 - Able to make a snack independently
 - But requires supervision / set-up
 - To prepare a full meal

Meal preparation Levels 4, 3, 2 and 1

- **Level 4** – minimal assistance
 - Able to microwave and help themselves
 - To a pre-prepared meal left in the fridge
- **Level 3** – moderate assistance
 - Able to help themselves to a cold meal / snack
 - If left out for them in the kitchen
 - And able to make themselves a hot or cold drink
- **Level 2** – maximal assistance
 - Able to help themselves to food left on a table near them
 - And pour a drink from a flask / jug
- **Level 1** – total dependence
 - Needs all meals preparing and putting in front of them

Example – Meal preparation

- Joe can make his own sandwich and a cup of tea while his partner is out.
 - He can also peel the potatoes in preparation for the evening meal.
 - But he tends to forget things on the stove,
 - And he gets flustered by the microwave,
 - So, he waits until his partner gets home who then takes charge of the evening meal
- **Score 3**
 - Makes a cold snack and hot drink

Laundry

(FAM-DOM EADL item)

Laundry includes:

- Washing the clothes
- Hanging out or drying them
- Ironing (if necessary) and folding
- Putting them away

- **At level 7**
 - They carry out all the tasks
 - And/or choose whether or not to use external laundry or dry-cleaning services
 - But able to manage by another route if normal process fails

Laundry- Level 6,5

- **Level 6:** Modified independence
 - Able to manage all laundry
 - But there may be a consideration for time / safety
 - Or limited only to use of external services
- **Level 5:** Supervision or set-up
 - Requires equipment to be set up
 - eg ironing board or clothes dryer
 - But can then manage alone
 - OR, able to do home laundry
 - But requires help to take/collect items from dry cleaners

Laundry

Levels 4, 3, 2 and 1

- **Level 4** – minimal assistance
 - Able to do most of their laundry
 - But needs help with just one of the tasks
- **Level 3** – moderate assistance
 - Needs help with more than one of the tasks
 - Still able to do most of their laundry themselves
- **Level 2** – maximal assistance
 - Able to assist with part of the laundry (eg folding clothes)
 - But needs help for most of it
- **Level 1** – total dependence
 - Needs all laundry doing for them

Example – Laundry

- Cheng independently puts own clothes in the washing machine and starts it running.
 - Another family member hangs out the clothes, irons/folds them and puts them away
- **Score 2**
 - Contributes to part of the laundry,
 - but does less than half the task

Housework

(FAM EADL item)

Housework includes:

- Heavy chores:
 - Vacuuming
 - Cleaning the bath and floors
 - Changing the bed linen
- Light chores:
 - Dusting, polishing, cleaning surfaces
 - Washing up
 - Making the bed
- **At level 7**
 - They carry out all the tasks in a safe and timely manner
 - And/or choose whether or not to use external cleaning services
 - But able to manage by another route, if normal process fails

Housework - Level 6,5

- **Level 6:** Modified independence
 - Able to manage all housework
 - But there may be a consideration for time / safety
 - Or limited only to use of external cleaning services
- **Level 5:** Supervision or set-up
 - Able to do most light and heavy chores
 - But just need reminding or quality check
 - **Or** needs occasional help with certain tasks
 - Eg cleaning the bath

Housework Levels 4, 3, 2 and 1

- **Level 4** – minimal assistance
 - Able to do all the light chores
 - But needs help with heavy tasks
- **Level 3** – moderate assistance
 - Able to do more than half the light housework
 - Needs help with two or more light chores
- **Level 2** – maximal assistance
 - Able to contribute a small amount eg some light dusting
 - But needs help for the majority of the housework
- **Level 1** – total dependence
 - Unable to do housework
 - Needs all chores done for them

Vignette – Housework

- Mario is in an powered wheelchair.
 - He uses the internet to book a cleaner to come and do all his cleaning for him.
 - If the cleaner does not arrive, he rings the agency to make sure that they send a replacement within a few days.
- **Score 6**
 - Limited to the use of external cleaning services
 - But manages these independently
 - Consideration for time / safety
 - Cleaning does not get done for a few days if cleaner does not come

Shopping

Shopping includes:

- Identifying the items needed
- Remembering and locating them in the shop
- Making appropriate choices
- Handling money
- Transporting them home
- **At level 7**
 - They carry out all the tasks in a safe and timely manner
 - And/or chooses whether or not to use internet shopping services
 - But able to manage shopping by another route, if the normal process fails

Shopping - Level 6,5

- **Level 6:** Modified independence
 - Able to manage all shopping
 - But there may be a consideration for time / safety
 - Or limited only to use of certain shops
 - eg those with home delivery services / internet shopping
- **Level 5:** Supervision or set-up
 - Needs help planning / preparing a list
 - But is then able to shop independently
 - **Or** needs help with very occasional items

Shopping Levels 4, 3, 2 and 1

- **Level 4** – minimal assistance
 - Able to meet immediate needs in local shops
 - But needs help for their ‘big supermarket shop’
 - Or help to get to the shops, wait and transport shopping home
- **Level 3** – moderate assistance
 - Needs accompanying and some help while shopping
 - But able to do more than half the task themselves
- **Level 2** – maximal assistance
 - Able to go with a carer to the shops, selects some items
 - But carer does more than half of the shopping tasks
- **Level 1** – total dependence
 - Needs all shopping done for them

Example – Shopping

- John likes to go to the supermarket with his mother.
 - He finds the milk and the bread, and likes to choose from his favourite biscuits,
 - But he tends to drift off to the magazine section, where his mother comes to find him when she has finished the rest of the shopping
- **Score 2**
 - Contributes less than half the task

Financial management

Financial management includes:

- Managing a bank account
- Paying bills
- Budgeting for personal and domestic needs
- Coping with unexpected financial demands
 - Eg a tax bill or parking fine
- **At level 7**
 - They manage all their own financial affairs
 - Without any concern for vulnerability
 - If they choose to appoint external financial services
 - able to arrange alternative advice, if the normal process fails

Financial management Levels 4, 3, 2 and 1

- **Level 4** – minimal assistance
 - Needs incidental help eg:
 - Planning budget on a monthly basis,
 - Overseeing bills/direct debits etc to make sure they are paid
- **Level 3** – moderate assistance
 - Needs help with paying larger bills
 - But able to plan their weekly budget themselves
- **Level 2** – maximal assistance
 - Needs help for routine weekly budgeting
 - Able to make some choices,
 - But needs help for most of their financial management
- **Level 1** – total dependence
 - Unable to manage finances
 - If they handle money at all, require pocket money on a daily basis

Vignette – Financial management

- Jin is careful with her money.
 - All her bills are paid through direct debit, and she scrutinises her bank statements carefully each month.
 - She stays within her weekly budget, and only occasionally has to ask her brother for help in coping with an unexpected bill
- **Score 5**
 - Set up
 - Occasional help with unexpected demands

Work education

Work/education includes:

- Ability to work within their normal job/educational role
- Including:
 - Travelling to and from work
 - Managing the physical requirements of the job
 - Communication and cognitive tasks
 - Self-presentation, organisation and punctuality
 - Safety awareness of self and others within the work place
 - Appropriate interaction with colleagues /
 - and clients (if relevant)
- **At level 7**
 - Work effectively in their normal job role
 - Manages all the physical and cognitive aspects of their work
 - Presents punctually and suitably dressed
 - Completes tasks in an organised and timely manner (including multi-tasking)
 - Communicates and interacts appropriately, as the job role demands

Work/ education - Level 6,5

- **Level 6: Modified independence**
 - Able to manage all of their work role
 - May require special equipment
 - Or a consideration for effort
 - eg they put in extra time to makeup
 - Work productivity is not affected
- **Level 5: Supervision or set-up**
 - Able to do most of their normal work role
 - But requires set up or a structured environment
 - Or supervision but with very occasional prompting / correcting
 - Work productivity is minimally affected

Work education Levels 4, 3, 2 and 1

- **Level 4** – minimal assistance
 - Able to manage >75% of the time
 - With regular planned support
 - Work productivity mildly affected - unable to do some aspects of their job
- **Level 3** – moderate assistance
 - Able to manage more than half of the time
 - Require unplanned intervention (on top of regular planned support)
 - Work productivity moderately affected - unable to do a significant part of their job
- **Level 2** – maximal assistance
 - Able to manage less than half of the time
 - Require frequent unplanned intervention
 - Work productivity severely affected - unable to do a substantial part of their job
- **Level 1** – total dependence
 - Effectively unable to work
 - Requires constant supervision with intervention several times a day

Example – Work/education

- George is keen to go back to his work as a forklift driver.
 - Unfortunately, his hemianopia and left sided neglect prohibits driving.
 - The factory foreman has offered to explore alternative roles, but Jeremy insists that he only wants to get back to his previous role because of his reputation as the fastest driver in the factory
- **Score 1**
 - Effectively unable
 - Other factory workers would be at risk if Jeremy goes back to work!

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