Holistic ADL Assessment Evidence Guide

Candidate Name:									
Assessor Name:	Jennifer Irvine								
Date assessed:									
Conditions: (On the job)	Professional practice environment - aged care Rehabilitation			mental health Acute					
Brief description of task:	ASSIST WITH PERSONAL HYGINE - including moving/transferring a pt (body mechanics/ lifting machine) to commode or assisting with ambulation, toileting, dressing/undressing. Ear care, eye care, hair care, mouth/denture care, skin care, physical assessment, documentation: NCP review, progress note, charts or health assessment forms, carrying out procedures the reflect an understanding of infection control, OH&S, manual handling practice and professional nursing practices,								
Did the candidate perform the following skills:		Yes	No	Comments					
Prepared self – researched nursing care plan, individual health conditions and identified impact of expected activities of the procedure on health status and suggests strategies to manage real and potential risks. E.g. cognitive function – pt. ability to understand instructions, physical limitations like OA – ability to mobilise safely and perform aspects ADL's, IVT – risk of trauma/dislodgement etc.									
Prepared the individual –negotiate plan of action, gain consent, consult about preferences and readiness to proceed e.g. assess pain and query need for analgesia prior to procedure.		۵							
Prepare equipment and environment for procedure; establish a warm private environment with clear path of access.									
Transfer/transport resident in a confident organised manner using principles of manual handling and necessary equipment.									
Assists with personal hygiene, explaining/communicating with resident throughout - including showering/drying, checking ears & eyes, mouth care, shaving using a safe, organised approach, maintaining dignity & privacy and promoting independence whenever possible. Offers resident to use the toilet prior to procedure									
control – throughout washing, use of glove	of OH&S – body mechanics, infection period of assessment including hand s, proper disposal of waste/contaminated eaks applied to bed/commode/lifter, no over reaching.								
e.g. day – including ha	comfortable and set up appropriately for aving relevant items left in reach, the eady, sleep – supported comfortable								

Observes for alterations in residents: skin integrity - rashes, breaks, identifies potential pressure ulcer risk, the individual's ability to assist, mental and cognitive status, etc – reports and records assessments and proposed interventions.										
Post procedure interview/ Q & A										
Questions						response				
	Yes	No								
Q1 self reflection - how do you think you did? What did you do we time? What did you learn?										
Q2 What alterations in functional &/or health status did you observe? Did your observation/assessment of the pt reflect information in the NCP? What would you suggest you need to do about the identified changes?										
Q3 Documentation - Write progress notes detailing the care you delivered, how the pt. Responded/coped with procedure, any changes you noted and what you did about any identified issues. Chart information e.g. bowel, continence, Hygiene, behaviour, mobility assessment, skin assessment etc.										
Q4 explain the rationale for at least 3 nursing actions you chose. E.g. limited mobility due to OA:. t/f with lifter. Placed plastic over IVT site/ POP/wound to protect from moisture										
The candidate's performance was:	Co	mpet	ent 🗖	Not Y	Yet Competent					
Student comments/feedback:										
Assessor comments/feedback:										
Candidate signature: Date:										
Assessor signature:			Date:							
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ASSESSOR USE ONLY:

Acceptable answers are:

- Q1recognise strengths & weakness' in performance using nursing standards, P&P and nursing theory as taught.
- Q2 using NCP, handover and pt history student should compare documented information and identify changes.
- Q3 Documentation is consistent with legal and ethical report writing frameworks and following facility policy.
- Q4 be able to link pt condition/signs/symptoms with nursing interventions.