Epiphany Care Homes, LLC

Diagnosis / Comments	Date Client Name	Age: Male/Female
Dressing: Hearing: Independent Hearing: Independent with help Hearing aid inRL ear Aid of another person No problem with corrective devices Independent Needs assist with corrective devices Independent with help Aid in two or three areas Mobility: Independent Independent with walker/cane Sleep patterns: Independent with wheelchair Problem - describe: Needs assist with wheelchair Problem - describe: Aid of one person Eating: Potential for falls: Independent Supervision only Slight help to arrange food Feeds self with help Needs feeding Independent Supervision only Aid in and out of shower Good Aid in washing Problem: Bowel / Bladder: Potential for choking Continent of urine and bowel Problem: Independent with devices Problem: Memory: Memory: Memory: Memory intact Mild memory problems exhibited by:	Diagnosis/ Comments	
Independent	FUNCTIONAL ASSESSMENT	
Independent with help Aid of another person Brooming: Independent with walker/cane Independent with wheelchair Needs assist with wheelchair Aid of one person Bathing: Independent Sleep patterns: Independent Independent Sleep patterns: Independent Independe	Dressing:	
Aid of another person Hearing aid inRL ear No problem with corrective devices	Independent	
Grooming: Independent Independent with help Aid in two or three areas Mobility: Independent with walker/cane Independent with wheelchair Needs assist with wheelchair Needs assist with wheelchair Aid of one person Potential for falls: Yes No Bathing: Independent Slight help to arrange food Feeds self with help Needs feeding Independent Supervision only Aid in and out of shower Aid in washing Bowel / Bladder: Continent of urine and bowel Independent with devices Type: Reminders Mo Problem with corrective devices Needs assist with corrective devices Needs assist with corrective devices Needs passist with corrective devices Needs assist with corrective devices Needs passist with corrective devices Needs passist with corrective devices No Needs pasterns: Independent Sleep patterns: Sleep patterns: Independent Problem - describe: Independent Needs feeding Appetite: Good Problem: Potential for choking Problem: Potential for choking Appetite: Memory: Memory intact Mild memory problems exhibited by: Communication: exhibited by:		
Grooming: Independent	Aid of another person	Hearing aid inRL ear
Independent		
Independent with help Aid in two or three areas Able to use phone: Yes No Mobility: Independent Sleep patterns:		
Aid in two or three areas Mobility:		
Mobility:		devices
Independent	Aid in two or three areas	and the Mark No.
Independent Sleep patterns: Independent with walker/cane Independent with wheelchair Problem – describe: Problem – describe: Independent with wheelchair Problem – describe: Independent Problem – describe: Independent Independent with devices Potential for choking Independent I		Able to use phone: Yes No
Independent with walker/cane Independent with wheelchair Needs assist with wheelchair Aid of one person Eating:		
Independent with wheelchair Needs assist with wheelchair Aid of one person Eating:		
Needs assist with wheelchair Aid of one person Potential for falls:		
Aid of one person Potential for falls: IndependentYes No Slight help to arrange food Feeds self with help Needs feeding Independent Supervision only Aid in and out of shower Aid in washing Problem: Bowel / Bladder: Potential for choking Continent of urine and bowel Independent with devices PsyCHO - SOCIAL ASSESSMENT Type: Memory: Reminders Memory intact Mild memory problems Communication: exhibited by: exhibited by:		Problem – describe:
Potential for falls: YesNoSlight help to arrange foodFeeds self with help Bathing:IndependentSupervision onlyAid in and out of showerAid in washingProblem:		
Potential for falls: YesNoSlight help to arrange foodFeeds self with help Bathing:IndependentSupervision onlyAid in and out of showerAid in washingProblem: Bowel / Bladder:Continent of urine and bowelIndependent with devicesPsycho - social Assessment Type:	Aid of one person	Fating:
Yes NoSlight help to arrange food Feeds self with help	Detential for falls	
Feeds self with help		
Bathing: Needs feeding Independent Supervision only Aid in and out of shower Good Aid in washing Problem: Potential for choking Potential for choking Potential for choking Potential for choking Continent of urine and bowel Independent with devices PSYCHO - SOCIAL ASSESSMENT Type: Memory: Memory: Memory intact Mild memory problems Mild memory problems exhibited by: Communication: Communicates well	1es10	Feeds self with help
Independent Supervision only Aid in and out of shower Aid in washing Bowel / Bladder: Continent of urine and bowel Independent with devices Type: Reminders Reminders Communication: Communicates well Appetite: Good Problem: Potential for choking PSYCHO - SOCIAL ASSESSMENT Memory: Memory: Memory intact Mild memory problems exhibited by: Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory intact Memory intact Mild memory problems Exhibited by: Memory intact Memory intact Memory intact Mild memory problems Memory intact Memory intac	Pathing:	
Supervision only		
Aid in and out of showerGoodProblem:		Appetite:
Aid in washing Bowel / Bladder: Continent of urine and bowel Independent with devices Reminders Reminders Communication: Communicates well Problem: Potential for choking PSYCHO – SOCIAL ASSESSMENT Memory: Memory: Memory intact Mild memory problems exhibited by: Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory intact Memory intact Mild memory problems Exhibited by: Memory intact Memory intact Mild memory problems Exhibited by: Memory intact Me		
Bowel / Bladder: Potential for choking Continent of urine and bowel Independent with devices		
Continent of urine and bowel Independent with devices Type: Reminders Reminders Communication: Communicates well Continent of urine and bowel PSYCHO – SOCIAL ASSESSMENT Memory: Memory: Memory intact Mild memory problems exhibited by: Exhibited by: Memory: Memory intact Mild memory problems Exhibited by: Memory intact Mild memory problems Exhibited by: Memory intact Mild memory problems Exhibited by: Memory intact Memory intact Memory intact Mild memory problems Exhibited by: Memory intact Memory	744 #1 Washing	
Continent of urine and bowel Independent with devices Type: Reminders Reminders Communication: Communicates well PSYCHO – SOCIAL ASSESSMENT Memory: Memory: Memory intact Mild memory problems exhibited by: Exhibited by: Memory intact Exhibited by: Memory intact Exhibited by: Exhibit	Bowel / Bladder:	Potential for choking
Independent with devices Type: Memory: Reminders Memory intact Mild memory problems Communication: Communicates well		
Type: Memory: Reminders Memory intact Mild memory problems Mild memory problems exhibited by: Communicates well		PSYCHO – SOCIAL ASSESSMENT
Reminders Memory intact Mild memory problems exhibited by: Communicates well		Memory:
Communication: exhibited by: Communicates well exhibited by:		Memory intact
Communicates well		Mild memory problems
	Communication:	exhibited by:
Barriers to communication	Communicates well	
Builters to communication	Barriers to communication	
include:	include:	

Epiphany Care Homes, LLC

<u> Drientation:</u>	
Oriented	Regular intervention required
Disoriented to:	and responds to redirection
Time	Other:
Place	
Person	
	Mood and Temperament:
Recreational Skills / Interests:	Appropriate
Spiritual activities	Withdrawn
Recreational outings	Sad, cries frequently
Watching T.V.	Anxious, restless
Other:	Suspicious
	Irritable, angers easily
	Other:
PHYSICAL ASSESSMENT	Social Interaction:
Physical Health:	Socializes well
No problems	High social interest
Problem of:	Low social interest
	Problem:
	Potential for Abuse/Neglect:
Medications:	No problem
No medications taken	Physical
Manages independently	Verbal
Needs medications set up	Financial
Needs medication	Self
administration	
	Potentially Hazardous Activities:
Behavior:	No problem Drives ca
Not a problem	SmokesScooter
Occasional intervention	Chemical useOxygen
required	Risk of elopement
	Other:
Client receives home and community based w	vaivered services: □Yes □No
Which waivered service? □EW □CADI □ P	PRIVATE Other:
Staff Signature	