



FLINT

INPATIENT REHABILITATION

MANDATORY QUALITY INDICATOR FLOWSHEET

Date: ____ / ____ / ____

AMOUNT OF ASSISTANCE:

Percentage of staff assistance -

0% (No assistance needed) 25% 50% 75% 100%

Not attempted due to:

Patient Refused - R

Medical Condition - M

Not Applicable - NA

Safety Concerns - S

FYI - Bowel or bladder accident means soiling of clothes or bed linen.

Table with columns: EATING, GROOMING, BATHING, DRESSING & UNDRRESSING, TOILETING. Rows include: Requires dentures to eat, Needs tray supervision / set-up, Eats regular consistency diet, Amount of assistance to eat, % eaten, Needs supervision / set-up, Amt. of assistance w/grooming, Amt. of assistance w/oral hygiene, Needs supervision / set-up, Amount of assistance, Needs supervision / set-up, Amt. of assistance w/ upper body dressing, Amt. of assistance w/lower body dressing, Amt. of assistance with socks/shoes, Asst. w/ perineal hygiene, Asst. to pull pants down, Asst. to pull pants up.

Table with columns: Night, Day, Eve. Rows include: BLADDER ASSISTANCE (# of wet linens, equipment used, Does pt empty cath, Amt. of assistance), BOWEL ASSISTANCE (# of soiled linens, equipment used, Amt. of assistance), BED TRANSFERS (Amount of Assistance, # of helpers), TOILET TRANSFERS (Asst. to toilet, # of helpers), SHOWER TRANSFERS (Amount of Assistance, # of helpers).

COMMENTS: _____

NURSING/ASSISTANT SIGNATURES:

Night _____
Day _____
Eve _____



PT.
MR.#/RM.
DR.