



Occupational Therapy Functional Capacity Assessment Report

Client name	Andrea Lee-Berner
Date of Birth	26/11/1956
Contact	0402 704 306
Address	2 Tamboritha Place, HOPPERS CROSSING 3029
NDIS number	431729142
Initial Assessment date	11/10/2024
Present at assessment	Andrea, Janelle (Daughter), Colin Tang (OT)
Date of Report	13/10/2024

Purpose of report:

This report has been prepared to provide a comprehensive Functional Capacity Assessment for Andrea. The primary purpose of this assessment is to evaluate Andrea's current functional abilities and limitations. This evaluation aims to determine how her condition impacts her daily activities and overall quality of life and to identify any areas where she may require additional support or intervention. This information will be crucial in developing an appropriate treatment plan to enhance Andrea's overall quality of life and ensure she can engage in her daily activities effectively and safely.

Medical History

Andrea is a 67-year-old female diagnosed with Lymphoedema. According to the Australasian Lymphology Association, Lymphoedema is the accumulation of excess protein-rich fluid in the tissue, resulting in swelling of one or more areas of the body. While it commonly affects the limbs, it can also involve the trunk, breast, head, neck, or genital area. Over time, Lymphoedema becomes more permanent and progressive, with increasing fluid accumulation. For Andrea, this condition primarily affects her lower limbs, causing swelling, chronic pain, and recurrent infections, which significantly impact her mobility, transfers, and overall daily independence.

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Family and Living Arrangeme nt Andrea lives with her daughter, Janelle, in a single-storey, two-bedroom house. The primary entrance has been modified with a ramp for wheelchair access. However, within the home, the standard-sized doorways present significant difficulty for Andrea's bariatric wheelchair. To accommodate her needs, the half-wall of the doorway to Andrea's bedroom needs to be removed, allowing up to 3000mm of width for the wheelchair to turn and pass through. Additionally, there is an 800mm raised barrier at the shower entrance to prevent water from escaping, which poses a major obstacle for Andrea, as she is unable to lift her legs over the barrier. This has led to several reported falls, even with assistance from carers. The bathroom



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also lacks grab bars, making it	difficult for Andrea to transfer from her wheelchair to

also lacks grab bars, making it difficult for Andrea to transfer from her wheelchair to the toilet and shower safely. Furthermore, inadequate lighting in the bathroom worsens visibility, increasing the risk of falls and making it more difficult for Andrea to navigate the space safely.
Andrea's main informal support is Janelle, who will assist Andrea with bed-to-sit transfers and daily mobility tasks. Janelle is able to provide assistance to Andrea throughout the week, except on Friday mornings when she is unavailable due to work commitments.
Andrea receives formal support from two support workers who visit every Tuesday, Wednesday, and Thursday, providing a total of 11 hours of assistance each week. The support workers primarily help with bed transfers, showering, personal care, and domestic tasks such as cleaning and meal preparation.
In addition to these practical tasks, they also provide essential social interaction and emotional support to Andrea. She has a gardener who visit monthly. Andrea also receives support from a physiotherapist who works with her on managing her lymphoedema diagnosis, focusing on relieving pain and improving her mobility
At present, Andrea is bed-bound and spends most of her days confined to her bed. Her primary interest is watching TV, which occupies much of her time and provides her with entertainment and engagement while she remains in bed.
ivities of Daily Living
Janelle reported that Andrea is able to ambulate short distances using a walking
stick, such as walking from her bedroom to the ensuite bathroom, approximately 15
to 20 meters. However, for distances longer than 20 meters, Andrea relies on a wheelchair. Unfortunately, the wheelchair is too wide to maneuver through the house, which essentially confines Andrea to her bedroom. Andrea also experiences significant fatigue when ambulating, often needing to sit down and rest after short periods.



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	Andrea's fall risk is further complicated by her bariatric condition, as she weighs over 160kg, making manual handling extremely challenging and risky for both her and her carers. While Andrea can turn her body in different positions while in bed, she has difficulties with all other transfers. She requires the physical assistance of two people (support workers or Janelle) to transfer her from lying to a sitting position on the bed. She also requires two-person assistance to transfer from sitting to standing, and one person to assist her from standing to sitting.
Grooming	Andrea requires setup assistance for attending dental hygiene due to her limited mobility. She understands all the steps in grooming tasks and is able to complete without physical assistance.
Dressing	Due to limited lower limb control and constant swelling in her legs, Andrea requires assistance from her support workers with full body dressing.
Toileting	Andrea has a toilet surround in place as there are no grab rails installed in the bathroom. However, due to her limited mobility, she currently requires assistance and needs to use a bed pan, as transferring to the toilet without proper support is challenging and unsafe.
Showering	Andrea is currently receiving bed washes due to her limited mobility. The shower recess in her home has a shower base and no grab rails, making it difficult and unsafe for her to transfer into the shower, further limiting her ability to manage personal hygiene independently.
Eating	Andrea currently has her meals in bed due to her limited mobility. It is recommended to purchase a bedside table to facilitate eating, as this would provide a more stable and comfortable setup for her daily meals
Sleeping	Andrea sleeps on a queen-size electric bed and is able to use the remote to adjust her position on the bed. She uses a BiPAP machine to assist with her breathing during sleep. Due to her limited mobility, she spends most of her time in bed and often sleeps during the day. As a result, she does not have a regular sleep routine, which may further impact her overall health and well-being.
Taking	Andrea's medications are managed by her daughter, Janelle, who ensures that she
Medication	takes them as prescribed and on schedule. tivities of Daily Living
Shopping	Andrea depends on her daughter and support workers to handle all shopping tasks
J5	due to her limited mobility and the physical barriers in her home, such as narrow doorways, restricted door space, and steps at the main entrance. These environmental constraints significantly restrict her ability to access the community and complete shopping independently.
Cleaning and Laundry	Andrea requires physical assistance from support workers for cleaning tasks, as she is unable to access the laundry area and backyard due to her limited mobility and endurance. Additionally, the physical constraints of her home, such as narrow spaces and other barriers, significantly limit her ability to move around, further restricting her participation in cleaning and laundry tasks.



Meal	Andrea relies on her daughter and support workers for meal preparation tasks, as
Preparatio	she is mostly confined to her bed due to the physical constraints of her home,
n	which make it difficult for her to access the kitchen. Additionally, her limited
	endurance prevents her from completing meal preparation tasks independently.
Transport	Andrea experiences difficulty transferring in and out of vehicles and requires
	assistance from a support worker. She is also unable to drive and relies on support
	workers for all her transportation needs.

Fine motor

Andrea's grip strength is deteriorating, and she often drops items like a glass of water or the TV remote to the floor. When this happens, she needs Janelle to assist in picking them up, as she struggles to do so on her own.

Cognition

Andrea reported that her memory has been impacted by chronic pain and low oxygen levels, making it difficult for her to recall past events and requiring extended time to process and understand conversations. Janelle noted that since a recent fall on 27-11-2023, Andrea's focus and attention have declined; she can become vague and fade out at times. Janelle observed that Andrea was more alert before the fall. Despite these challenges, Andrea reported that her orientation and sequencing skills remain intact, as she can accurately identify time and place and understand the sequence of daily tasks.

Andrea is still able to identify different areas of concern regarding her health and well-being. She acknowledges the importance of following her physiotherapist and GP's recommendations to improve her condition and actively considers steps that could enhance her overall health. Despite the cognitive challenges she faces, Andrea demonstrates an awareness of her needs and the necessary actions to address them.

Communication

Andrea has no major concerns in communication, but she sometimes gets confused in conversation due to memory issues. During the assessment, Andrea was observed to repeat the last topic again even though that topic had ended, she needed prompting to come back to the topic that OT and she was discussing. Janelle also reported Andrea needs prompting and break down the conversation in complex or unfamiliar topics.

Behaviour

No behavioral concerns have been noted. Andrea maintains a close relationship with her daughter and her support workers.

Sensory / emotional regulation



There are no significant concerns regarding Andrea's emotional regulation. She receives strong social support from both her daughter and her support workers, which has been beneficial in helping her cope with her challenges and maintaining her emotional well-being.

Play/ social

Due to her limited mobility, Andrea finds it difficult to engage in various leisure or social activities. Currently, her social interactions are primarily through phone conversations with friends or occasional visits from them at her home.

Current Equipment

- Shower chair
- 4-wheeled walker
- Manual wheelchair
- Walking stick
- Toilet surround
- Non-slip mat
- Bed pan

Standardised Assessment

WHODAS 2.0

The World Health Organization Disability Assessment Schedule (WHODAS 2.0) is a comprehensive tool designed by the WHO to measure health and disability consistently across different cultures. WHODAS 2.0 evaluates Andrea's level of functioning in six vital areas of life: cognition, mobility, self-care, getting along with others, life activities, and social participation. The assessment results are presented on a scale from 0 to 100, where 0 represents no disability and 100 indicates full disability. This standardised approach helps in understanding Andrea's overall health and daily functional capabilities.

Summary:

Understanding and Communicating: 57.14%

Getting around: 100% Self-care: 100%

Getting along with people: 75%

Life activities: 100%

Participation in society: 100%



Andrea faces severe limitations in most areas of functioning, including mobility, self-care, life activities, and societal participation, where complete dependence on support is required. While her ability to understand and communicate presents moderate difficulties, social interactions remain a significant challenge, further isolating the Andrea. These results highlight the need for comprehensive support across physical, social, and cognitive areas to improve her quality of life and functional independence.

Lawton-Brody IADL Scale

The Lawton-Brody Instrumental Activities of Daily Living (IADL) Scale is a widely used assessment tool designed to evaluate an individual's ability to perform instrumental activities of daily living, which are more complex tasks required for independent living. Unlike basic activities of daily living (ADLs), which include self-care tasks like bathing and dressing, IADLs assess higher-level functions necessary for managing one's household and community life. These activities include tasks such as using the telephone, managing finances, shopping, preparing meals, housekeeping, and handling medications.

The IADL scale helps clinicians, caregivers, and healthcare professionals assess the functional abilities of older adults or individuals with cognitive or physical impairments, providing a clear picture of their capacity for independent living. It is often used in care planning, rehabilitation, and monitoring changes in a patient's functional status over time. A lower score indicates a greater need for assistance, while a higher score reflects greater independence in performing daily tasks

Total score: 1/8

Summary:

- Ability to use phone: Operates telephone on own initiative-looks up and dials numbers.
- Shopping: Completely unable to shop.
- Food preparation: Needs to have meal prepared and served.
- Housekeeping: Does not participate in any housekeeping activities.
- Laundry: All laundry must be done by others.
- Mode of transportation: Does not travel at all.
- Responsible for medications: Is not capable of dispensing own medications.
- Ability to handle finances: Incapable of handling money.





NDIS Goals

- I would like to be supported to obtain the required ATHM to support my mobility and safety at home and in the community for as long as possible.
- I would like to be supported to obtain 1:1 assistance with my daily activities to improve my quality of life.
- I would like to be supported to obtain the required assistance to improve my social interactions and provide my daughter with a break from her caring duties.
- I would like to be supported to develop a healthy diet to lose weight and maintain an overall healthy life.

Occupational Therapy Goals & Plan		
To Improve Andrea's independence in mobility and transfer.	 Hire an appropriate 4-wheel walker and hoist for Andrea. Recommend appropriate bed and hoist for improving Andera's bed transfers and decrease the reliance on support workers. 	
To improve Andrea's independence in self-care tasks.	 Educate support workers, family and Andrea on tasks breakdown and energy conservation strategies. Recommend appropriate and relevant assistive devices and home modifications to support Andrea. 	
To improve Andrea's sleep quality.	 Recommend appropriate bed frame and mattress for reducing her pain throughout the night. Educate Andrea and family on sleep hygiene strategies. 	

Recommendations



Core Funding

Support Worker Funding

Andrea has been diagnosed with lymphoedema, a condition that requires consistent management and support. To assist with her daily living and community engagement, it is recommended that she receives funding for a support worker. This support will cover essential activities, including personal care, meal preparation, and access to the community, ensuring Andrea maintains a good quality of life. The proposed funding will provide for a support worker for 15 hours per week, which is considered adequate to meet her needs and help manage her condition effectively. This support is crucial for Andrea's well-being and independence.

Consumable

To support Andrea in managing her physical condition of lymphoedema, it is recommended that core funding be allocated for consumable items. These items are essential to assist her with personal care activities and enhance her ability to perform daily living tasks independently. For instance, aids such as long-handled devices and a bedside table are suggested. These aids are crucial in promoting her comfort and independence in her daily routine.

Transportation

Andrea has been diagnosed with lymphoedema, a condition that involves swelling due to a buildup of lymph fluid in the body. This condition can significantly impact her mobility and ability to travel independently. To ensure she can attend necessary medical appointments, therapy sessions, and engage in community activities, it is recommended that level 1 transportation can be allocated.

Capital Funding

Home modification

In order to enhance Andrea's independence and safety at home, several modifications are recommended due to her condition of lymphoedema, which affects her mobility. The bedroom doorway should be widened to allow for wheelchair access, ensuring Andrea can move freely and comfortably throughout her home. In the bathroom, important changes include the removal of the existing shower base to facilitate easier access. It is crucial to replace the current lighting for improved visibility and to install slip-resistant tiles to prevent falls. Additionally, a bariatric toilet pan should be fitted to accommodate Andrea's needs, providing a more supportive and secure environment.



Capacity building Building

Occupational Therapy

Andrea, has been diagnosed with lymphoedema, which affects her physical capabilities. To enhance her mobility, personal care, and sleep quality, it is recommended that she utilise assistive technologies and undertake home modifications. These interventions will provide essential support in managing her condition and improving her daily functioning. It is advised that these activities occur on a regular basis to ensure consistent progress and adaptation to her needs. The role of the occupational therapist will be crucial in guiding Andrea through these adjustments, ensuring that the interventions are tailored to her specific requirements and contribute positively to her quality of life.

ITEM NAME	Occupational Therapy
Assessment Recommendation Therapy or	16 hours
Training	
Associated travel costs to support	8 hours
intervention in the community, maximum 30	
minutes	
Assessment and report writing	10 hours
Liaison with key stakeholders	5 hours
Arranging resources and assistive technology	10 hours
items	
Preparing resources	1 hours
Total hours	50

Total funding required: 50 hours in a 12-Month plan 50 * \$193.99 =\$9699.5

Psychology

Andrea has been diagnosed with lymphoedema, a condition characterised by swelling due to the accumulation of lymph fluid, impacting her physical well-being. In order to manage the symptoms effectively and enhance her quality of life, it is recommended that Andrea receive ongoing support from a psychologist as part of a capacity-building approach. Engaging in regular psychological activities can provide Andrea with coping strategies to manage the emotional and psychological challenges associated with her condition. The frequency of these activities should be determined based on her individual needs and progress, ensuring she receives the most beneficial support tailored to her circumstances.

Physiotherapy

Andrea is currently dealing with lymphoedema, which significantly impacts her physical mobility. To support her in managing this condition, it is recommended that she engages in physiotherapy sessions on a weekly basis. These sessions will focus on enhancing her mobility capabilities, addressing the physical challenges posed by lymphoedema, such as the pain in her limbs. Regular physiotherapy will aim to improve her functional movement, reduce swelling, and enhance her



overall quality of life. With consistent therapy, Andrea can work towards maintaining and potentially improving her physical independence, allowing her to participate more fully in daily activities and reduce the risk of complications associated with lymphoedema.

Therapy assistant

Andrea, benefits from **weekly** therapy assistant to provide reinforcement and practice to achieve OT and physiotherapy goals.

In the next 12-month NDIS plan, Therapy assistant hours will be used in the following ways:		
Weekly therapy assistant sessions followed by OT and speech	52 hours	
plan to improve communication, fine motor, gross motor,		
emotional regulation, daily living and social skills.		
Each session will take 1 hours.		
Associated travel costs to support intervention in the community,	26 hours	
maximum 30 minutes		
Liaison with key stakeholders.	7 hours	

Total Hours: 85 hours in a 12-month plan

Support Coordinator

Andrea would benefit from increased hours of support coordination to assist her in using her NDIS plan and coordinating supports. Andrea is not capable to manage her own plan due to her disabilities and requires significant advocacy and support when engaging with supports due to her cognitive deficits. Andrea requires support coordination to provide collateral information and a coordinated approach to Andrea's care to provide better outcomes. Please refer to support coordinator report for the number of hours and funding required.

Summary

Without the necessary provision of therapy and support, Andrea will be at risk of not achieving her stated therapy or NDIS goals. Her physical impairments, including lymphoedema, could worsen, leading to reduced strength, endurance, coordination, and balance. This deterioration might also extend to her ability to perform daily activities, necessitating increased assistance with



self-care and navigating her home and community environment. The lack of progress and increased dependence could have negative implications for her mental health, further impacting her overall well-being. These outcomes underline the importance of ensuring that Andrea receives the required support to maintain her health and independence.

Clinician Details

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