

ACL AT A GLANCE – Beginners Tips

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Score must be established by ACL trained clinician

DIFFERENTIATE BETWEEN PARTS OF AN ACTIVITY – ACL 4.2

Ability to learn **new tasks** similar to 5-year-old child

SUPERVISION – 24 HOURS

FUNCTIONAL CHARACTERISTICS	BEST APPROACH	ROLE OF THERAPY
<p>Does not notice floor or other hazards</p> <ul style="list-style-type: none"> • May report bowel or bladder problems • Working attention 24” (not across table) • Slow to act, slow to respond • Short term memory tests as impaired • Aware of “parts” of the activity, asks for help. Concept of personal goals limited to “walking” • Meal preparation limited to prepackaged meals or simple and familiar meal • Able to dial new phone number if written • Knows month not day • Asks for directions, day and date 	<p>Anticipate hazards, put supplies within arms reach</p> <p>Poor understanding of medication side effects – monitor closely</p> <ul style="list-style-type: none"> • Guide through tasks one step a time, not able to follow or read directions • Open new or difficult containers – watch at meals to ensure all containers can be opened • Extra time needed to complete daily self care • Leave medications in plain sight as reminder to take • May have false ideas about medications leading to poor compliance – guide appropriate use of medications • Increased care needed with room or residence changes • Problem solve when routine changes in minor ways • Provide self care supplies – able to perform routine ADL and valued activity 	<p>Crosses midline poorly or inconsistently - check stair safety</p> <ul style="list-style-type: none"> • Teach care providers fall prevention for ACL 4.2 • Person cannot learn hip precautions – teach care provider to monitor. Cannot safely use long handled devices. • Explain Allen Cognitive Levels model to care providers – teach safety and learning limits • Provide adaptive devices appropriate for ACL 4.2 • Limit introduction of new tasks & equipment (care provider must supervise) • Determine extent habit supports function – determine associated risks, care needs • Match remaining abilities and cognitive limits to demands of current environment • Teach care providers ways to encourage remaining abilities within safe limits • Teach appropriate cueing

Please refer to **At Home With the Allen Cognitive Levels** by Mary Platt, OTR/L for clinical assessment and intervention

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SUPERVISION – 24 HOURS

FALL PREVENTION PRECAUTIONS	CARE PROVIDER'S ROLE
<ul style="list-style-type: none"> • MAY BE UNSAFE ON STAIRS – ALWAYS SUPERVISE 	<ul style="list-style-type: none"> • 24 HOUR SUPERVISION
<ul style="list-style-type: none"> • TRAIN IN SAFETY SEQUENCE – DO NOT EXPECT CARRY OVER TO NEW PLACE, NEW EQUIPMENT OR MULTIPLE STEPS 	<ul style="list-style-type: none"> • Open difficult or new containers, supervise use of iron, knives, stove
<ul style="list-style-type: none"> • WILL NOT NOTICE GROUND LEVEL HAZARDS – REMOVE OR GUIDE TO AVOID 	<ul style="list-style-type: none"> • Show new activities one-step at a time. AVOID written or diagrammed instructions. Allow extra time to complete tasks.
<ul style="list-style-type: none"> • SUPERVISE USE OF WALKING AIDS 	<ul style="list-style-type: none"> • New tasks learned with 3 weeks of repeating each step
<ul style="list-style-type: none"> • CANNOT LEARN HIP PRECAUTIONS – WILL FOLLOW ONE AT A TIME WITH NO CARRY OVER 	<ul style="list-style-type: none"> • Set up sandwich supplies, prevent use of stove
<ul style="list-style-type: none"> • SUPERVISE THERAPEUTIC EXERCISE 	<ul style="list-style-type: none"> • Able to go to store to buy one item, may make repeated trips – no planning. May use cash not credit or checks
<ul style="list-style-type: none"> • SUPERVISE TUB & SHOWER TRANSFERS – CAREGIVER KEEP FLOOR DRY AND PROVIDE SUPPLIES 	<ul style="list-style-type: none"> • Needs help dialing phone
<ul style="list-style-type: none"> • PROVIDE STRONG VISUAL CUES TO AID SAFETY AWARENESS – BRIGHT COLOR TAPE ON WHEELCHAIR BRAKE, STEPS, RAILINGS, GRAB BARS 	<ul style="list-style-type: none"> • Provide supplies, coordinate clothing and grooming tools in visible location
<ul style="list-style-type: none"> • MONITOR MEDICATIONS THAT CONTRIBUTE TO FALLS – MORE THAN 4 OF ANY KIND = FALLS 	<ul style="list-style-type: none"> • Apply, supervise and maintain use of adaptive equipment • Solve problems that result from minor changes in familiar activities
<p>Wheelchair better than walker or cane if unsteady</p>	<ul style="list-style-type: none"> • Manage special diet needs, point out appropriate foods – do not expect person to understand reasons for choices • Person understands the concept of a “game” – use for fun and to support remaining abilities (picture domino, matching, sorting).

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