LEVEL OF ASSISTANCE DEFINITIONS

DESCRIPTION: Outline of levels of assistance clients may require when performing physical tasks

Aim: For the clinician to be able to define the meaning and requirements of different levels of assistance

Information which has formed these definitions is adapted from Queensland Health, CTI: Prescription of Mobility Aids and InterRAI http://www.interrai.org/assets/files/Scales/ADL-Hierarchy_rev-9-8-14.pdf

0 Independent (no help, setup or supervision)
  - The client is able to complete task safely and independently in total
  - No hands on assistance or stand by supervision is required for client to complete the task
  - The task is done with confidence and ease in a timely manner
  - There are no concerns over the safety of the task with either the physical component or the cognitive planning or the preparation for the task

1. Set-up help only

2. Supervision (Oversight and cuing)
  - The client is able to complete task reasonably safely, but there are some concerns.
  - No hands on assistance is required for client or to modify the environment
  - The task is completed, but possibly there is decreased ease or the task is not completed in a timely manner
  - There are minor concerns over the safety of the task with either the physical component or the cognitive planning and preparation for the task – this may be in relation to changes in the environment

3. Limited assistance/One Assist (Help on some occasions)
   The client is able to complete task, but there are some concerns regarding safety or hands on assistance is required to assist the client or to modify environment to complete the task, and can be completed by one person
   The task is able to be completed safely with assistance

4. Extensive assistance - One Assist (Help throughout the task, but performs 50% or more of task on own)
  - Assistance may be required because of decreased ease of movement, the task is not completed in a timely manner, or cognitive concerns regarding confidence or ability to perform in the given task (e.g. the client may need redirecting)
  - There are minor concerns over the safety of the task with either the physical component or the cognitive planning and preparation for the task, increasing the risk of fall
  - Can be broken down into minor 1x assist (minimal hands on required),
5. **Maximal Assistance 1-2 assist (Help throughout the task but performs less than 50% of task on own)**
   Can be broken down into minor 2x assist (some hands on required, second assist may just need to prepare environment as client enters (e.g. moving mobile commode behind client),
   - Moderate assist (hands on assist required most of the time), heavy assist (high level of caution must be exerted – would it be safer, for both the clinician and client, to have a second assist present)
   - The client is unable to complete task and there are concerns regarding safety due to co-morbidities (residual effects of stroke, obesity, arthritis etc), pain, increased risk of complication (e.g. vasovagal post-operatively), decreased ease of movement, the task is not completed in a timely manner, or cognitive concerns regarding confidence or ability to perform in the given task (e.g. aggression, hallucinations, STM loss, decreased co-operation)

6. **Total Dependence (Two + Assist) Full performance by others during entire period.**
   - Can be broken down into moderate assist (hands on assist required most of the time by two persons to maintain task), heavy assist (high level of caution must be exerted) would it be safer (for both the clinician and client) to have a third assist present or to complete the task with a higher level of assistance (such as slide sheet or hoist)
   - There is a high level of assistance required plus more. The client may require two assist to complete task safely, and a third person is required to prepare the environment
   - Equipment being used requires more than 2 persons to operate it
   - At this level of assistance need to consider if the task is safe to complete or not – do not perform task if unsafe – refer back to clinician in field of expertise

**NOTE:** Level of assistance required is often a subjective measurement. If you are concerned that the level of assistance you have will not be appropriate please abort task and refer back to clinician in field of expertise