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### CARE TABLE

#### ACTIVITIES OF DAILY LIVING

<table>
<thead>
<tr>
<th>Getting out to bed:</th>
<th>Daily rounds:</th>
<th>Bed time:</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. EATING</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>b)</td>
<td>c)</td>
<td>d)</td>
</tr>
<tr>
<td>Dishes one at a time</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. WASHING</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Hair:</td>
<td>b) Nails:</td>
<td>c) Cream:</td>
<td>d)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. DRESSING</th>
<th>Except:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. GROOMING</th>
<th>Except:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. URINARY FUNCTION</th>
<th>Incontinence products</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. BOWEL FUNCTION</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### MOBILITY

<table>
<thead>
<tr>
<th>1. Transfers</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Walking</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Prosthesis or orthosis</th>
<th>Outside</th>
<th>N/A</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>4. Getting around</th>
<th>Room</th>
<th>Unit</th>
<th>Institution</th>
<th>Outside</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Negotiating</th>
<th>Elevator</th>
<th>Room</th>
<th>Unit</th>
<th>Institution</th>
<th>Outside</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Security</th>
<th>Other:</th>
<th>Wandering bracelet</th>
<th>Bed rails 1</th>
<th>D</th>
<th>E</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>2. D</td>
<td>E</td>
<td>N</td>
<td></td>
</tr>
</tbody>
</table>

#### COMMUNICATION

<table>
<thead>
<tr>
<th>Language spoken:</th>
<th>1.</th>
<th>2.</th>
<th>3.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>1.</th>
<th>2.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>3.</th>
<th>4.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>5.</th>
<th>6.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>R</th>
<th>L</th>
<th>Put in</th>
<th>Put on</th>
<th>Take out</th>
<th>Take off</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Smoker’s apron</th>
<th></th>
</tr>
</thead>
</table>

### ADDITIONAL INFORMATION:

- Housekeeping
- Meal preparation
- Shopping
- Delivery
- Delivery
- Telephone
- Transportation
- Adapted vehicle
- Taxi
- Bus
- Paratransit vehicle
- Ambulance
In general


Days abbreviations:

Meet the general rule according to:

Shaves with electric razor

Brushes teeth, looks after dentures

Comb hair

Puts on makeup

Puts in or takes out dentures

If applicable, uses mouthwash

Nails

Grooming

Bottling

Another person has to open all containers

Cutting food

Can eat all own food independently but with difficulty

Can eat all own food independently but needs stimulation or supervision

Grooms Name of person necessary

Another person has to cut food

Another person has to put on all food

Buttering food

Can butter all food independently but with difficulty

Can butter all food independently but needs stimulation or supervision

Another person has to butter food

Dishes are one at a time.

Check if dishes have to be presented one after another

For each part of the body

Nail care

Shaving

Tooth brushing

Face care

Beard care

Checking if the person has a bed time

Enter what has to be done during the rounds

Bed time

Enter what has to be done to get the person out of bed

Nurse

Enter what has to be done to transfer and move

Enter what has to be done to put in and take off

Check if applicable

Disturbs

Insomnia

D. MOBILITY

1. Walking

(a)iss not able to walk

(b)Can walk with support

(c)Must be pushed in wheelchair

(d)Must be carried

2. PROPELLING A WHEELCHAIR (W/C)

(a)Independent

(b)Needs help

(c)Use with assistance

3. USING THE TOILET

(a)Independent

(b)Needs help

(c)Use with assistance

4. USING TOILET INCONTINENCE PRODUCTS

(a)Normal

(b)Occasional

(c)Frequent

5.  BOWEL FUNCTION

(a)Normal bowel function

(b)Needs help

(c)Use with assistance

6.  URINARY FUNCTION

(a)Normal bladder function

(b)Occasional incontinence

(c)Frequent incontinence

7.   TOILETING

(a)Tuber

(b)Urinal

(c)Bedpan

(d)Toilet

(e)Mini-wash (face/buttocks)

(f)Incontinence pad

(g)Catheter

(h)Ostomy

(i)Incontinence product

(j)Other:

8. BUDGETING

(a)Uses money wisely

(b)Use of incontinence products

(c)Other:

9.  BUDGETING

(a)Uses money wisely

(b)Use of incontinence products

(c)Other:

CRITERIA FOR SCORING SUBJECTS ON CARE TABLE

A. ACTIVITIES OF DAILY LIVING

Getting out of bed

Enter what has to be done to get the person out of bed

Daily rounds

Enter what has to be done during the rounds

Bed time

Check the appropriate screwdriver

Check if staff have to put clothes away

Other – Enter what has to be done to put the person to bed

1. EATING

(a)Feeding self

(b)Needs food independently

(c)Needs food independently but with difficulty

(d)Needs food self stimulation or supervision

(e)Participates actively but needs some assistance for part of the activity

(f)Must be fed totally by another person

(g)Has a naso-gastric tube or a gastrostomy

(h)Swallowing

(i)Can serve all caregivers independently

(j)Can serve all independent caregivers but with difficulty

(k)Can serve all caregivers independently but needs stimulation or supervision

(l)Grooms Name of person necessary

(m)Another person has to open all containers

(n)Cutting food

(o)Can eat all own food independently but with difficulty

(p)Can eat all own food independently but needs stimulation or supervision

(q)Needs help to cut food

(r)Another person has to cut or put all food

(s)Buttering food

(t)Can butter all food independently but with difficulty

(u)Can butter all food independently but needs stimulation or supervision

(v)Another person has to butter food

(w)Dishes are one at a time.

Check if dishes have to be presented one after another

2. WASHING

(a)Washing

(b)Shaving

(c)Combs hair

(d)Must be shaved by another person

(e)Must be washed by another person

(f)Can use toothbrush independently

(g)Uses toothbrush independently but with difficulty

(h)Uses toothbrush independently but needs stimulation or supervision

(i)Needs help from another person to use toothbrush

(j)Other:

(k)Use of incontinence products

(l)Day (D), Evening (E), Night (N)

(m)Use of incontinence products

(n)Day (D), Evening (E), Night (N)

(o)Use of incontinence products

(p)Day (D), Evening (E), Night (N)

(q)Use of incontinence products

(r)Day (D), Evening (E), Night (N)

(s)Use of incontinence products

(t)Day (D), Evening (E), Night (N)

(u)Use of incontinence products

(v)Day (D), Evening (E), Night (N)

(w)Use of incontinence products

(x)Day (D), Evening (E), Night (N)

(y)Use of incontinence products

(z)Day (D), Evening (E), Night (N)

AA. CRITERIA FOR SCORING SUBJECTS ON CARE TABLE

1. MEMORY

(a)Normal memory

(b)Minor memory deficit (names, appointments, etc.) but remembers important facts

(c)Serious memory lapses

(d)Severe memory lapses

(e)Severe memory lapses

(f)Severe memory lapses

(g)Severe memory lapses

(h)Severe memory lapses

(i)Severe memory lapses

(j)Severe memory lapses

(k)Severe memory lapses

(l)Severe memory lapses

(m)Severe memory lapses

(n)Severe memory lapses

(o)Severe memory lapses

(p)Severe memory lapses

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