

Name: _____ Age: _____ Room: _____ Adm Date: _____ D/C Date: _____

Consent: Requested _____ Documented _____
 Equipment: Float Equip _____ Requested _____
 Initial Ax: _____ EPR: _____
 Plan of Care: _____ RA Assgn: _____
 FIM # completed: _____
 Ambulation/Aid: _____ Bed Mobility Ax: _____

Transfers Ax: Bed: _____ Chair/wc: _____
 Toilet: _____ Tub: _____

Driving: Driver License Other: _____
 Parking Permit: Has Needs

Dx & Chart Info:

Work: _____ Leisure: _____

ADLs	Current	Previous
Eating		
Grooming/Hygiene		
Bathing		
Dressing UE		
Dressing LE		
Toileting		

IADLs	Current	Previous
Meal Prep		
Laundry		
Cleaning		
Bedmaking		
Child/Elder/Pet Care		
Telephone Use		
Call Bell		
Outdoor Main.		
Shopping		
Banking/Finances		
Computer Use		
Env. Control Unit		
TV/Ent. System		
Medication Mgmt		

HOME ENVIRONMENT

Live with:

Type of Residence: House Townhouse
 Apartment Other _____

Rent/Own? Rented Own


of Levels: _____ Accessibility: _____

In-Stairs: _____ Railing: _____

Out Stairs: _____ Railing: _____

Bathrooms: _____

Self-Meds: Yes No

 **Sexual health conversation had:** yes no

If no, why?: _____

Unintended Consequences: _____

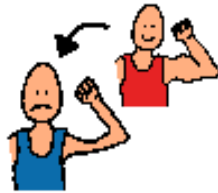
Equipment List	Description	Own	Rent
Bathroom Devices		<input type="checkbox"/>	<input type="checkbox"/>
Bedroom Devices		<input type="checkbox"/>	<input type="checkbox"/>
Mobility Devices		<input type="checkbox"/>	<input type="checkbox"/>
Assistive Devices		<input type="checkbox"/>	<input type="checkbox"/>
Medical Equipment		<input type="checkbox"/>	<input type="checkbox"/>

Figure 1. Updated Occupational Therapy admissions checklist. A section dedicated to sexual health is included on the lower right portion of the page (see blue star).

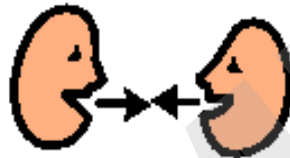
Changes After Stroke



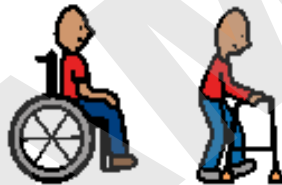
vision



weakness



talking



walking



mood



thinking



intimacy

Figure 2. Sample page from the supported conversation tool. Please email Candice.Fourie@westpark.org or Meiqi.Guo@uhn.ca if you would like a copy of the supported conversation tool in its entirety for your project. The Picture Communication Symbols ©1981–2015 by Mayer-Johnson LLC a Tobii Dynavox company. All Rights Reserved Worldwide. Used with permission. Boardmaker® is a trademark of Mayer-Johnson LLC.

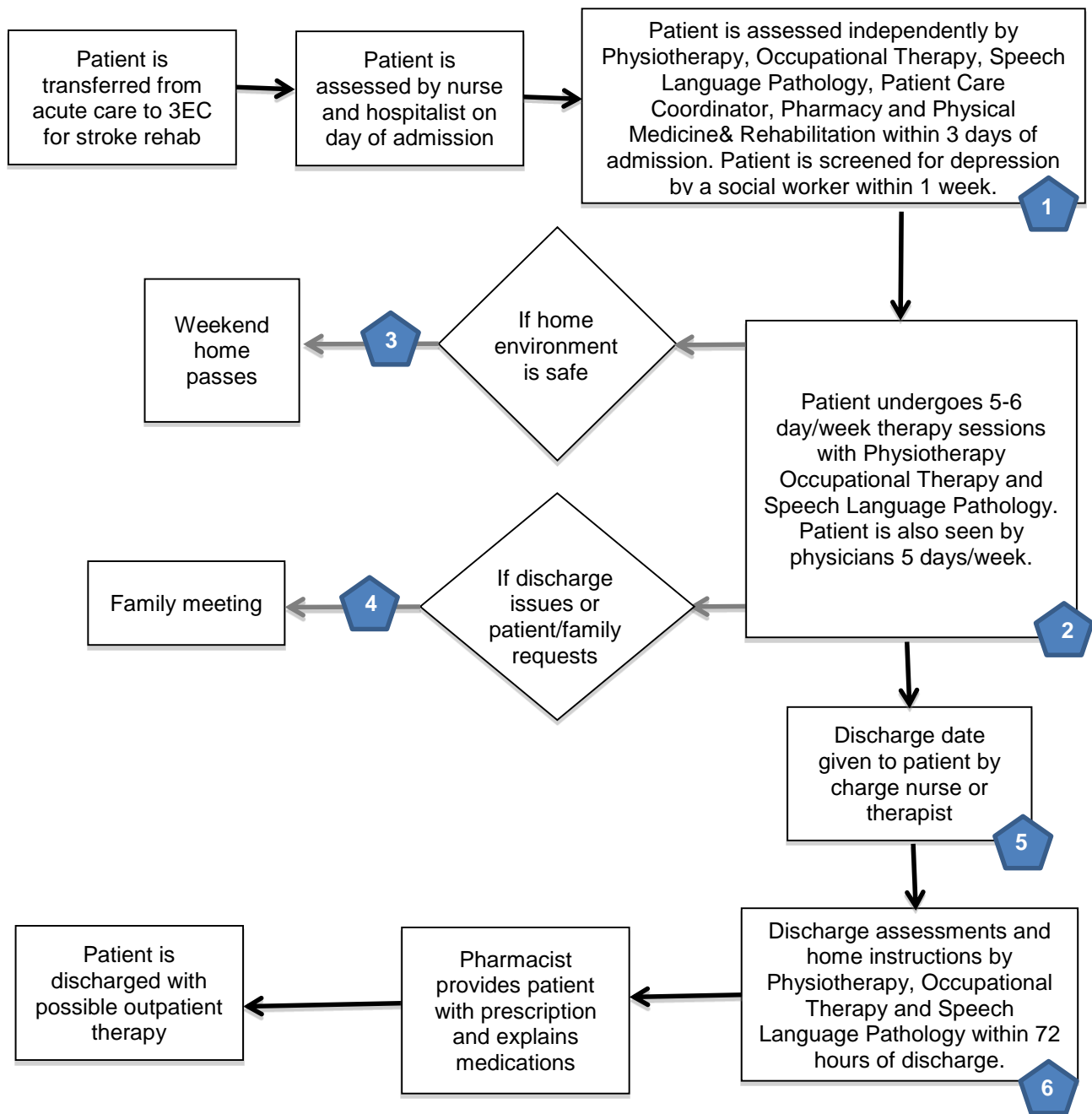


Figure 3. Potential Time Points for Sexual Health Discussion. In PDSA Cycle 3, the team came to the consensus that the OTs and SLPs should choose the most opportune time based on individual patient needs. Examples may include 1) at the admission assessment, 2) during therapy sessions, 3) before a planned home pass, 4) before a family meeting, 5) when a discharge date has been chosen and communicated to the patient and 6) during discharge assessments.