SIMPLE BATHING ASSESSMENT

AIM
To assess the child’s basic function and postural needs identify problem areas and potential solutions with regard to bathing.

Procedure
1. Check referral/case notes to establish why and where assistance with bathing is required. If this is unclear contact the referrer for more information. Liaise with other’s involved (e.g. CDU, Portage, Physio, SALT) and if the case is likely to require a complex bathing solution or complex manual handling issues STOP and seek advice from Clinical Lead

2. If appropriate arrange an appointment in clinic, home or school setting as appropriate. Ensure an adult with parental responsibility will be present to give consent and make sure they understand the purpose of the assessment.

3. If the referral gives an indication as to the type of bathing solution required it may be possible to have the equipment (via loan stores) and /or rep present for the assessment. If not a second appointment will be needed to assess the child with the specific toileting solution(s) prescribed.

Child Considerations
4. Identify the child and check parent/carer/child’s communication and understanding. Build rapport to ensure they are comfortable and relaxed and ensure they understand the reason for the visit.

5. Ask parent/carer/child how they currently manage re bathing and where they are having problems and document on reasoning record.

6. Undertake objective assessment of child’s baseline physical abilities: Observe their posture and movement and performance skills as per clinical reasoning record. If the child’s condition is more severe than indicated in the referral STOP and seek advice from Clinical Lead.

7. Review the current bathing method and equipment; check whether this is adequate or compromises posture & performance through lack of support.

8. Observe the child’s behaviour e.g. unpredictable movements, poor safety awareness. If the child’s behaviour does not allow for satisfactory assessment STOP and seek advice from Clinical Lead
Environmental Considerations

9. Observe the bathroom and note the space around the bath. Note positions of any fixtures and how the current bathing equipment fits.

Carer Considerations

10. Take into account the type of carer support the child has (e.g. how do they assist, are they able to reach down into the bath).

11. If the current bathing equipment is unsuitable consider possible solutions as per reasoning record. Consider the impact of any proposed solution on other persons who access these facilities.

12. Arrange an assessment with an alternative bathing solution (ordered from loan stores/via rep). Check the carer can assist the child safely. Ensure written fitting (manufacturers) instructions are available.

13. Following delivery and fitting of bathing equipment, arrange to review the child to check their progress, and to ensure the carer knows who to contact if further advice is needed.

15. Document advice and instructions given to the carer.

16. If the solution identified is unacceptable to the carer/child or the problem is not resolved STOP and seek advice from Clinical Lead.
SIMPLE BATHING ASSESSMENT
REASONING RECORD

Name ……………………………… DOB…………………………

Address …………………………………………………………………
…………………………………………………………………………………………

Date of Assessment ............... 

People Present:

1. **Child Considerations**

Medical Conditions:

Reason for Referral & Current problems (reported):

**Posture and Movement**

**Sitting**
- Supported sitting: Head Control YES/NO
  Trunk Control YES/NO
- Independent sitting YES/NO

**Balance**
- Symmetry YES/NO
- Normal tone YES/NO

**Upper limb function:**
- can use arms to push/pull YES/NO

**Lower Limb Function:**
**Behaviour:** unpredictable movements/safety issues YES/NO
If YES describe:

**STOP and seek advice from Clinical lead**

If child becomes irritable/uncooperative so assessment not possible **STOP and seek advice from clinical lead**

2. **Environmental Considerations**

Location of bathroom:

Sketch to show bathroom fixtures and bath:

**STOP and seek advice if concerned about space in bathroom or bath (shape/size)**

3. **Carer Considerations**

How does the carer assist now?

Does the carer have any medical conditions impacting on their ability to assist?

Does current equipment make bathing easier?

Who else uses these bathing facilities?

**Bathing Solutions**

a) If the child has poor trunk control consider a supportive bath seat (with raised back to support the trunk) e.g. Rifton or Columbia.

b) If the child has developing sitting balance consider a corner seat

*What about rails?*

*Do you issue bath inserts or bath cushions?? who issues bath lifts?*

If the child does not appear safe or is unable to sit upright using the equipment **STOP and seek advice from registered practitioner.**
Agreed Bathing Solution

Reason for choice of Solution and Plan

Name………………………………………………  Position……………………………………

Signature ………………………………………………..Date………………