



Cerebral Palsy
Africa



Enablement

COMMUNITY REHABILITATION LOGBOOK

Name person:

Date of birth:

Age:

Gender:

City:

Name of caregiver, if any:

Name of fieldworker/therapist:

Mobile of person/caregiver:

Mobile of fieldworker/therapist:

Type of disability:

Level of disability: mild (some support)/ moderate (regular support)
/severe (full support)*

Epilepsy: yes / no* **Medication:** yes / no*, if yes, which: _____

*circle the answer that applies

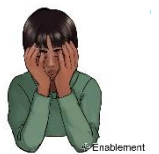
1. Ladder of Life

Assume this ladder pictures your life. The top of the ladder represents the best possible life for you, and the bottom represents the worst possible life for you. Indicate where you stand on the ladder at this moment in time?

Cantril, H. (1965). *The pattern of human concerns*. New Brunswick: Rutgers University Press

Write down any explanations that come up while answering the questions below:

BEST



9

8

7

6

5

4

3

2

1

WORST

Fill in these questions and circle the answer matching your response

- Where on the ladder do you stand at present time? 1 2 3 4 5 6 7 8 9
- What would help you move up the ladder?
- What would cause you to move down the ladder?

In case you are a caregiver and the person with a disability cannot respond (verbally or non-verbally):

- Where on the ladder does the person stand at present time? 1 2 3 4 5 6 7 8 9
- What would cause the person to move up the ladder?
- What would cause the person to move down the ladder?

2. REPORT: information from interview, direct and indirect observation

Ask: *Can you share with me what an average week in the your/the person's life looks like. Please describe the abilities, strengths and challenges in daily life from your experience.*

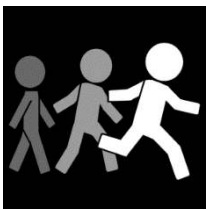
(Write down below and see Appendix I for examples of information to ask in addition)

Date of interview/observation:



BODY FUNCTIONS & STRUCTURES: Describe differences in body parts and inner functions of the body (e.g., muscle tension, brain function, breathing, heart, condition, health)

-
-
-



ACTIVITIES & PARTICIPATION: Describe strengths and limitations about what activities the person can and cannot do and strengths and restrictions in participation (activities of daily living e.g. moving, self-care, learning, school skills/work skills, play/leisure)

-
-
-



PERSONAL FACTORS: Describe information about the person (e.g. age, gender, character, likes, dislikes, beliefs (e.g. religion), feelings, dreams, attitude, habits, coping)

-
-
-



ENVIRONMENTAL FACTORS: Describe facilitators and barriers in the environment (physical, social, cultural, political) e.g. attitude and support of the family and community, accessibility of the house/community, socio-economic situation, access to services, living conditions

-
-
-

3. PLAN

Date of plan:

A. Prioritised difficulties according to the person/ caregiver (discuss together to manage expectations and set realistic goals)

- 1.
- 2.
- 3.

B. Prioritised difficulties according to the fieldworker (if this is not same as A, discuss through a process of shared decision making; observe activities mentioned as challenging if possible)

- 1.
- 2.
- 3.

C. Goals - what do you want to focus on within the next 1 month?

Which priorities do you together with the family decide to turn into SMART goals (figure below)

Score a*	Score b*
----------	----------

1.

2.

3.

D. Action plan:

Think of the ABC: Acute (urgent action), Barriers (relieve burden), Capacity (development), see Annex IV

Signature of the person/ caregiver:

Signature of the fieldworker/ therapist:

Score a = the person's current ability*

Score b = person's/caregiver satisfaction about the current ability at this moment in time*

not able to do at all 1 2 3 4 5 6 7 8 9 10 able to do it extremely well

not satisfied at all 1 2 3 4 5 6 7 8 9 10 extremely satisfied

Goal =

Who



What



How



Where



When



1

2

3

4

5

6

7

8

9

10

4. Daily Diary Write a few lines per day (person with a disability, caregiver if any) or per home visit (fieldworker)*

Date:

Date:

Date:

Date:

Date:

Date:

Date:

Date:

Date:

*Describe: things that stood out today for example something good that happened or challenges. What, Why, Where, How, Who, When: activities done at home, or agreements made together. If you have any questions for the next home visit or centre consultation, also write it down here.


5. Mid-term evaluation - Goals

Goal 1:

How would you score the goal now?

a. **not able to do at all** 1 2 3 4 5 6 7 8 9 10 **able to do it extremely well**

b. **not satisfied at all** 1 2 3 4 5 6 7 8 9 10 **extremely satisfied**



What has changed?

What made the change happen?


Advice:

Goal 2:

How would you score the goal now?

a. **not able to do at all** 1 2 3 4 5 6 7 8 9 10 **able to do it extremely well**

b. **not satisfied at all** 1 2 3 4 5 6 7 8 9 10 **extremely satisfied**



What has changed?

What made the change happen?


Advice:

Goal 3:

How would you score the goal now?

a. **not able to do at all** 1 2 3 4 5 6 7 8 9 10 **able to do it extremely well**

b. **not satisfied at all** 1 2 3 4 5 6 7 8 9 10 **extremely satisfied**



What has changed?

What made the change happen?

Advice:

Daily Diary Write a few lines per day*

Date:

Date:

Date:

Date:

Date:

Date:

Date:

Date:


Date:

* Describe: things that stood out today for example something good that happened or challenges. What, Why, Where, How, Who, When: activities done at home, or agreements made together. If you have any questions for the next home visit or centre consultation, also write it down here.

6. End-term evaluation - Goals

Goal 1:

How would you score the goal now?

- a. **not able to do at all** 1 2 3 4 5 6 7 8 9 10 **able to do it extremely well**
- b. **not satisfied at all** 1 2 3 4 5 6 7 8 9 10 **extremely satisfied**
- 


What has changed?

What made the change happen?

Advice:

Goal 2:

How would you score the goal now?

- a. **not able to do at all** 1 2 3 4 5 6 7 8 9 10 **able to do it extremely well**
- b. **not satisfied at all** 1 2 3 4 5 6 7 8 9 10 **extremely satisfied**
- 


What has changed?

What made the change happen?

Advice:

Goal 3:

How would you score the goal now?

- a. **not able to do at all** 1 2 3 4 5 6 7 8 9 10 **able to do it extremely well**
- b. **not satisfied at all** 1 2 3 4 5 6 7 8 9 10 **extremely satisfied**
- 

What has changed?

What made the change happen?

Advice:

Appendix I: Report examples of what information can be put in which domain

Date:	
<p>BODY FUNCTIONS & STRUCTURES:</p> <ul style="list-style-type: none"> Information about how the body's internal system works or if something is missing. We mean parts of the body such as organs, limbs and what they are made of. Mental functions and nervous system e.g. understanding the concept of time, how well the person sleeps, intellectual functions such as memory. Senses e.g. seeing, hearing, feeling pain. Voice and speech functions e.g. quality of the voice (can the person speak fluently, volume of speech). Talking, understanding communication and using gestures for example has to be put under activities and participation. Functions of the heart system, lymph, resistance to diseases and breathing system e.g. heart rate, heart rhythm. Functions of the food processing, body cells, circulatory system e.g. processing food, bowel movement. Genitals and reproductive functions e.g. genitals, peeing and pooing well and regularly etc. The activity of toileting has to be put under activities and participation. Movement and related functions e.g. joints, bones, reflexes, controlling movement. This is only information about the muscles and bones. The activities you do and movement you can make have to be put under activities and participation. Functions of the skin and related structures e.g. repair functions of skin, hair, nails. 	<p>ACTIVITIES & PARTICIPATION:</p> <ul style="list-style-type: none"> Information about what activities the person can and cannot do (e.g. activities of daily life, learning, schooling, play, household). Participation is being involved in a life situation such as being with friends. Learning and applying knowledge e.g. understanding tasks, remembering what is said, done, heard, felt, seen, reading, math. General tasks and demands e.g. responding to an instruction with an action, aiming your attention, holding attention, ability to plan tasks in partial steps in the right sequence or understanding the sequence of steps. Communication e.g. understanding words, saying words, making conversation, indicating what you want (with or without words). Mobility e.g. moving (e.g. rolling, crawling, creeping, moving on buttocks, walking) indoors, outdoors, transportation, going up/down stairs. Self-care e.g. washing, dressing, eating. Domestic life e.g. doing or helping in household tasks like cleaning etc., using household appliances. Interactions between persons and relationships e.g. understanding and applying social rules, managing your behaviour, ensuring it is suitable for a certain situation or activity. Major life areas e.g. how does school go, can the person spend time and enjoy it by him- herself? Community and social life e.g. joining activities in organised social life such as play, visiting friends, family or neighbours, parties.
<p>PERSONAL FACTORS:</p> <ul style="list-style-type: none"> Information about what the personal preferences are and characteristics of the person. Gender. Age. How does the person deal or cope with his/her life, strengths and challenges? What feelings have they or their family shared, or what do you observe? Lifestyle: how does the person live his/her life? Social background: what does the person prefer in terms of friends, family, community? Wishes, goals and preferences in life of the person e.g., education, work, well-being, enjoying life. Character of the person e.g. happy, motivated or not, interested in the world around him/her. Personality: attitude of the person. Habits: which routines and habits does the person like or has the person developed? Preferences: what does the person like or not like? What are his/her dreams? Religion: does the person have religious beliefs or a certain response to religion? 	<p>ENVIRONMENTAL FACTORS:</p> <ul style="list-style-type: none"> Information about the family and community e.g. the physical environment like buildings and devices, socio-economic conditions of the family, access to services. Environmental factors make up the physical, social and attitudinal environment in which people live and conduct their lives such as: Products and technology e.g. materials to assist in daily living like an adapted cup to drink, wheelchair, communication aids like pictures, accessibility of the house, vehicles to transport the person with. Natural environment and human-made changes to environment e.g. quality of the light (in the house), sounds, air, paved or unpaved roads, house being near or far from the road, influences and risks from natural forces such as rain and wind or a nearby river. Support and relationships e.g. from family, friends, neighbours, health professionals etc. Attitudes e.g. from family, community, neighbours (is there a lot of stigma, are they supportive or not?). Services, systems and policies e.g. transportation, regulations to keep in mind, allowance from government. Economic situation e.g. income level, living conditions (is the house stable, protected from rain and draft etc.).

Appendix II: DEVELOPMENT CHART PHYSICAL (for children 0-5 years)

RECORD SHEET 6
(page 1)

EVALUATION OF A CHILD'S LEVEL OF PHYSICAL DEVELOPMENT

Name: _____
 Birth date: _____
 Date: _____

Note: Although on these guides physical and mental skills are separated, the two are often closely interrelated. These charts show roughly the average age that a normal child develops different skills. But there is great variation within what is normal.

PHYSICAL DEVELOPMENT	Average age skills begin	3 months	6 months	9 months	1 year	2 years	3 years	5 years	What to do if a child is behind
Head and trunk control	lifts head part way up	holds up head and shoulders briefly	holds up head and shoulders	holds head up well when lifted	moves and holds head easily in all directions				Activities to improve head and trunk control (see p. 302).
Rolling		rolls back to belly	rolls back to belly	rolls over and over easily in play					Activities to develop rolling and twisting (see p. 304).
Sitting		sits only with full support	sits with hand support	begins to sit without support	sits well without support	twists and moves easily while sitting			Work on sitting. Special seating if needed (p. 308).
Crawling and walking		begins to creep	scopes or crawls	pulls to standing	takes steps	walks	walks easily backward	hops on one foot	Activities to improve balance (see p. 306).
Arm and hand control	grips finger put into hand	begins to reach towards objects	reaches and grasps with whole hand	passes object from one hand to other	grasps with thumb and forefinger	grasps with thumb and forefinger		throws and catches ball	Eye-hand activities. Use toys and games to develop hand and finger control (see p. 305).
Seeing	follows close object with eyes	enjoys bright colors/shapes	enjoys bright colors/shapes	eyes focus on far object	looks at small things/pictures	looks at small things/pictures			Have eyes checked (see p. 452). If poor, see Chapter 30.
Hearing	moves or cries at a loud noise	responds to mother's voice	enjoys rhythmic music	understands simple words	understands simple words	hears clearly and understands most simple language			Have hearing checked, if poor, see Chapter 31.

Appendix III: DEVELOPMENT CHART EMOTIONAL (for children 0-5 years)

Name: _____
 Birth date: _____
 Date: _____

EVALUATION OF A CHILD'S LEVEL OF MENTAL AND SOCIAL DEVELOPMENT

MENTAL DEVELOPMENT	Average age skills begin	3 months	6 months	9 months	1 year	2 years	3 years	5 years	What to do if a child is behind
Communication and language	cries when wet or hungry	coos when comfortable	makes simple sounds	uses certain sounds for different things	begins to use simple words	begins to use simple words together	uses simple sentences	uses simple sentences	Speak and sing often to child. If needed, develop alternatives to speech (p. 313).
Social behavior	smiles when wet or hungry	smiles when smiled at	smiles when smiled at	begins to understand and respond to "NO"	begins to do simple things when asked	likes to be praised after completing simple tasks	interacts with both adults and children	interacts with both adults and children	Consider trying behavioral approach to social behavior (see p. 349).
Self-care	suckles breast	takes everything to mouth	chews solid food	begins to feed self	drinks alone from glass	takes off simple clothes	bathes and dresses	helps with simple work	Encourage child to help self if possible. Use behavioral approach to learning (see p. 350).
Attention and interest	smiles when smiled at	smiles when smiled at	develops strong attachments to caretakers	begins to enjoy first social games (peek-a-boo)	takes longer interest in toys and activities	sorts different objects	builds playthings with several pieces	builds playthings with several pieces	Early stimulation activities (see Chapter 35). Provide toys and 'furr' objects.
Play	grasps things placed in hand	plays with own body	plays with simple objects	looks for toys that fall out of sight	imitates and copies people	begins to play with other children	plays independently with children and toys	plays independently with children and toys	Guided play, lots of stimulation and interaction with other children.
Intelligence and learning	cries when hungry or uncomfortable	recognizes mother	recognizes several people	looks for toys that fall out of sight	copies simple actions	points to things when asked	follows simple instructions	follows multiple instructions	Early stimulation (p. 316). Lots of toys, talk, and step-by-step training.

RECORD SHEET
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(page 2)

Put a **circle** around the level of development that the child is now at in each area.
 Put **squares** around the skill to the right of the one you circled, and focus training on that skill.
 If the child has reached an age and has not mastered the corresponding level of skill, special training may be needed.

Appendix IV: ABC TO HELP DECIDE ON INTERVENTIONS

ABC of assessment & action

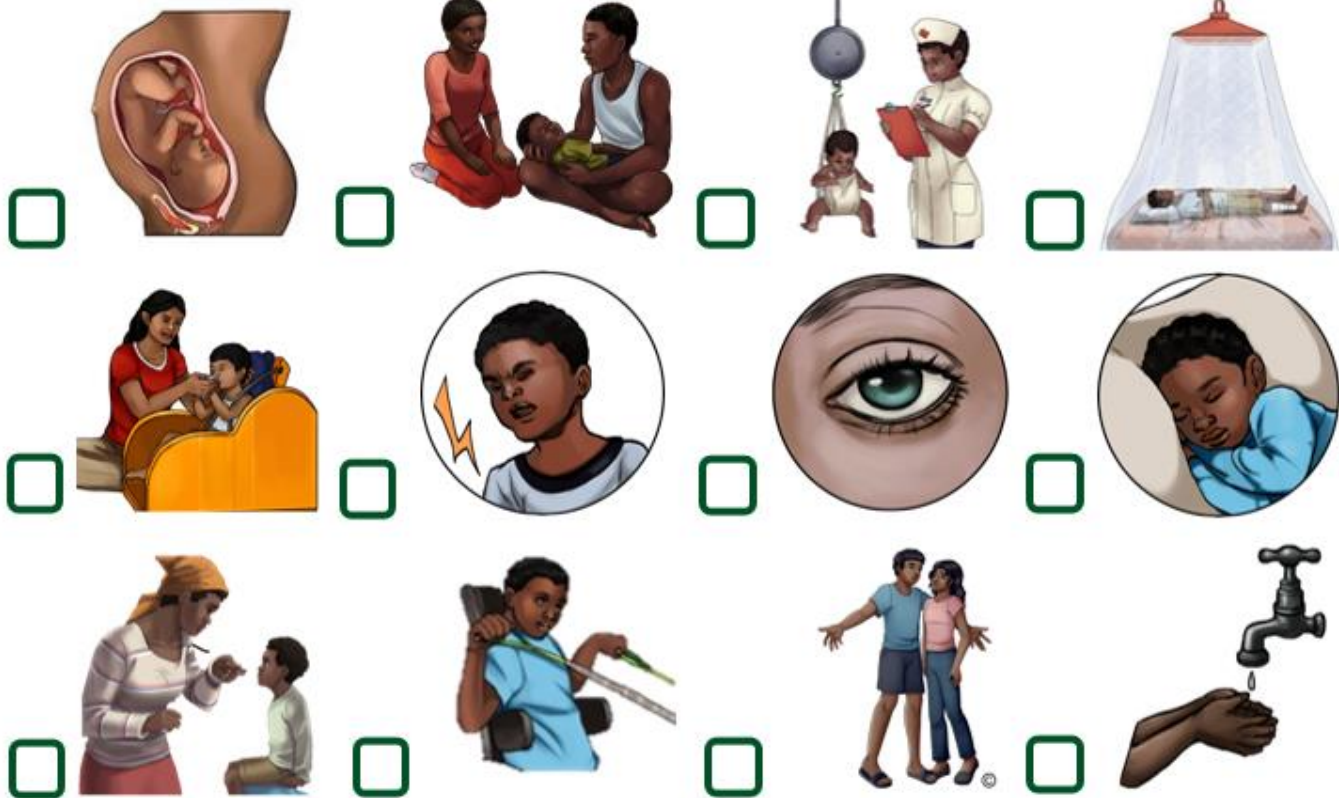


ABCs show the priority of issues that need to be addressed, connecting to a person's and family's needs. Always keep them in mind. Refer timely if needed, especially with urgent issues in red.

- A: ACUTE (health)
- B: BARRIERS (burden)
- C: CAPACITY (development)



- CHECK:**
- A: ACUTE (health)**
- (Maternal) health: nutrition, vaccination, mosquito nets
 - General health of the person and family:
 - fever
 - lung problems, coughing, difficulty breathing
 - seizures
 - wounds
 - dehydration, malnutrition (growth)
 - Eating problems: choking, vomiting
 - Pain: contractures, hip problems, constipation
 - Sensory problems: can the person see and hear well?
 - Sleep problems
 - Medication monitoring
 - Fitness of the person
 - Safety and understanding personal and social boundaries (intimacy, abuse, safe environment)
 - Hygiene of the person and environment



B: BARRIERS (burden)

- Psychosocial support: are family, friends, neighbors supportive? Does the person feel isolated?
- Grieving process: what are the expectations, worries and questions of the person and family?
- Connect with a parent support group or peer support group
- Facilitate if needed livelihood support and income generating activities
- Relief physical strain: explain and coach parent or caregiver how to carry and position a person, that cannot move him- herself, with least physical strain for both
- Assistive devices: are there any? Are any needed? Refer and help facilitate provision.



C: CAPACITY (development)

- Stimulate: communication, moving inside/outside the house, (self)care, sitting [give the person time, make it fun and motivating, include caregivers and peers]
- Active lifestyle for health and well-being: moving together, being moved, stimulated to move, changing positions, going outside
- Support learning through school (daycare, primary, secondary, university), play or similar activities
- Facilitate participation in the community: friends, religious activities, community activities
- Community involvement: inform and involve community members if needed to reduce stigma
- Coach the person, caregiver, peers, friends and family how to support physical, social and emotional development

