

## Sample Problem/ Strength Menu in BASICS Hierarchy Model

The identified problem from the MDS is a 4lb. weight loss over the past month. This problem puts the resident at risk under the **Biological** level of need.

The strengths listed below were identified by reviewing the MDS, the resident's record and by obtaining information about the problem from the resident's primary caregivers on every shift. They will be used to develop strength based care plan approaches.

	Problem Index	Dimension of Need	Strength Index
	<b>Strengths are Outcome Goals for Problem Intervention</b>		
<b>MDS #</b>	<i>Resident has had a decline in ability to accomplish biological needs</i>  <i>*RAPS Trigger</i>	<b>Biological</b>	<i>Resident is able to self-perform all or part of biological needs</i>  <i>(MDS Section cited)</i>
K3a-1	*Primary problem: Gerald has lost 4lbs. in the last month	Food Water Oxygen Safety	Gerald has distinct food preferences (AC-1i). Drinks adequate amount of preferred fluids (ginger ale, fruit shakes, tea with honey). No signs of dehydration.
K4a	*Complains about the taste of many foods (all pureed food- refuses, coarse foods- spits out)	Rest Human Stimulation	No oral problems (K1d) (can chew and swallow if likes food such as finger sandwiches with soft fillings, such as fine ground ham or chicken salad, cream cheese with blended olives).
K4c	*Leaves 25% or more of food uneaten at most meals		Eats between meals all of most days (AC-1j). He will drink dietary supplement between meals when blended with a banana (K51).
K5c	*Mechanically altered diet (was spitting out foods on reg. and soft diet)		Vision adequate- able to see food (I 1-0).