



Transition Map Scale

Savvas S, Scherer S, and Vaughan M. 2019

Background:

Transitions occur for each resident in multiple domains (e.g. health, disability, relationships) and are not static. This form stratifies the resident into one of 9 pathways or goals of care, classified by the:

1. **Type of illness/disability**
(Body, Brain, or Mix of both); and
2. **Severity or stage of illness/disability**
(Restore, Maintain, or Comfort).

Transition mapping can be used to inform medical care approach, and provide staff with a greater sense of therapeutic direction and overall goals of care.

Instructions:

Based on your clinical judgement, mark a cross (x) in one of the boxes on the 3x3 map where you believe the resident is regarding the **overall** medical care they need.

Do NOT mark on the borders or gridlines.

Resident

Date

TYPE OF ILLNESS OR DISABILITY			SEVERITY OF ILLNESS OR DISABILITY
BODY RESTORE	MIXED (BODY & BRAIN) RESTORE	BRAIN RESTORE	
BODY MAINTAIN	MIXED (BODY & BRAIN) MAINTAIN	BRAIN MAINTAIN	
BODY COMFORT	MIXED (BODY & BRAIN) COMFORT	BRAIN COMFORT	
END OF LIFE	END OF LIFE	END OF LIFE	

GENERAL MAPPING STRATEGY

Note that this scale uses simpler terminology (Body, Brain) for ease of understanding to non-health professions.

Body - Somatic related illness. e.g. musculoskeletal, sensory loss, cancer, pain, organ related diseases, diabetes.

Mixed - Mixture of both Body and Brain (Somatic and Neurocognitive) illnesses/ impairments.

Brain - Neurocognitive impairments e.g. all dementia types, cognitive changes from brain injury, Parkinson's disease, behavioural and mood changes related to dementia (BPSD).

Restore - where a rehabilitative / re-enablement approach may be of value.

Maintain - where maintaining function / systems and slowing further deterioration is the main consideration.

Comfort - where symptom relief and providing comfort is the main consideration. Includes the 'End of Life' stage.

Psychological Factors

Tick box if there is a high impact of psychological factors. e.g. highly anxious, personality factors. Then proceed to map as normal but without considering psychological factors.

- ☐ Tick if resident has high impact of psychological factors. Still map resident above (do not map psych factors). Psychological factors:

- ☐ Tick if unable to map