

Care Plan Guide

FOCUS (Problem)

Residents participation barriers include ambulation/mobility, attention span, and memory deficit. Focus of programming will include creative and expressive activities, self-care activities, and sensory stimulation.

GOAL

Resident will choose and participate in programs both group and independent daily over the next review period.

APPROACHES

Resident is diabetic, activity staff will work with nursing and dietary staff during food related activity programs to provide appropriate substitutions as needed.

Staff will offer sensory stimulation activities and provide assistance to and from program locations.

Resident has various activity interests including but not limited to: arts and crafts, cooking, music, animals, outings, socials, grooming activities, movies, reading (romance/comedy/mystery). Staff will target group programs of interest with encouragement and assistance to and from. Staff will also target independent programs of interest as assist with set-up as needed.

Resident has a challenging time staying on task during activities. Staff will seat Resident near the program facilitator to provide assistance and verbal task cues. Staff will allow Resident to come and go from programs without pressure to complete a project or task.

Resident enjoys going for walks, staff will invite and encourage Resident to go for walks throughout the community as well as outside weather permitting.

Commented [VE1]: In this area you want to make a brief statement related to barriers and focus of programming. You can also add in additional brief information (i.e. "Resident is social and enjoys visiting with staff and peers." "Resident anticipates a short-term stay and is focused on therapy and returning home" "Resident is unable to communicate needs, care plan is developed based on information from family, staff, and observations." Etc.)

Commented [VE2]: Always use the resident's name

Commented [VE3]: Begin with any participation barriers – these could also include: hearing and vision loss, behaviors, communication, etc. Anything that may inhibit their daily routines and preferences.

Commented [VE4]: What is preferred by resident? What programs are you targeting.

Commented [VE5]: Goals have to be measurable Who, What, When, How Often

Commented [VE6]: WHO

Commented [VE7]: WHAT

Commented [VE8]: WHEN

Commented [VE9]: HOW OFTEN

Commented [VE10]: If a resident has any food allergies or diagnosis related to food, it's important to have an approach to address this while also ensuring all activity staff are aware.

Commented [VE11]: Addressing memory deficit (participation barriers)

Commented [VE12]: All preferences noted during the intake should be reflected in the approaches as well as how staff are going to assist.

Commented [VE13]: Addressing attention span and memory deficit (participation barriers)

Commented [VE14]: Any additional interests noted should be added along with how staff will assist.