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| Example Interventions for the Service Plan**1. Bathing** |
| 1. Independent.
2. History of refusal of bathing redirect with stories of family or things of interest to tenant.
3. Assist of one with bathing.
4. If refuses explain water is very warm it will only take a few minutes and staff will be there the whole time to keep them safe.
5. Give step by step instructions for bathing.
6. If refuses come back in 10-15 minutes.
7. If still refuses try different care giver.
8. If tenant refuses bathing try different shift.
9. Hospice aide to give shower/bed bath on (give days that they will be there).
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| **2. Hygiene and Grooming** |
| 1. Independent.
2. Limited vision staff to hand tenant wash cloth to wash face and hands.
3. Limited vision staff to put the toothpaste on toothbrush and put in tenant hand to brush teeth. Use hand over hand method of brushing teeth.
4. Allow tenant to do as much for self as possible.
5. Complete peri care when incontinent in AM and PM. Allow tenant to complete as much per self as they can.
6. Remind tenant to brush hair.
7. Brush tenant hair.
8. Remind tenant to wash face and hands.
9. Clean tenant fingernails.
10. Wash tenant eyes without soap from inner, by nose, to outer by side of face, with one motion of the wash cloth. To wash other eye move to different part of wash cloth and repeat.
11. Remind tenant to put on glasses.
12. Apply glasses for tenant.
13. Remind tenant to brush dentures and apply denture cream.
14. Brush tenant dentures and apply denture cream.
15. Remind tenant to take out dentures, brush, and soak for the night.
16. Have tenant hand dentures to staff. Staff brush dentures and soak for the night.
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| **3. Dressing/Undressing** |
| 1. Independent.
2. Tenant requests assistance with bra daily.
3. Limited vision staff to assist with buttons, zippers, and what tenant wishes.
4. Staff to assist with socks and shoes.
5. Staff to apply Compression Stockings.
6. Staff to apply TED stockings.
7. Staff to assist with dressing upper extremities.
8. Staff to assist with dressing lower extremities.
9. Staff to assist with belt.
10. Staff to assist with applying Geri Sleeves.
11. Staff to assist with undressing with tenant requests.
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| **4. Transferring/Mobility** |
| 1. Independent.
2. Independent without devices.
3. Assist of one with transfers.
4. Assist of one because of limited vision.
5. Assist of one with gait belt with transfers.
6. Assist of one with ambulation.
7. Tenant requests assist of one with gait belt with ambulation. Tenant to use wheeled walker at all times.
8. Remind tenant to use wheeled walker at all times.
9. Tenant to have alarm on when in apartment.
10. Tenant to have alarm on when in recliner.
11. Tenant to sleep with body pillow under fitted sheet on outer side of bed to assist with tenant to not roll t of bed.
12. Remind tenant to lock wheel chair prior to transferring.
13. Tenant requests side rails on bed because has had falls out of bed. Staff to make sure side rails on bed when in bed.
14. Tenant has had number of falls. Floor pads to be on the floor in front of bed when tenant is in bed. Staff to make sure floor pads in place.
15. Staff to ambulate with tenant. Walk beside them.
16. Tenant independent in apartment with ambulation. Staff to ambulate with tenant in hallway.
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| **5. Continence** |
| 1. Independent.
2. History of UTI's.
3. Staff to watch for toileting frequently if increased, notify RN could have UTI.

Staff to watch for urine with foul smell, cloudy urine, pain with urination, blood in urine. Tenant could have UTI.1. Staff to encourage extra fluids with UTI. Staff to assist with changing depends/pad.
2. Staff to assist with toileting before meals, after meals, AM, PM and PRN. Tenant requests staff to remind to toilet.
3. Staff to watch for signs of wanting to toilet i.e... tenant looking for somewhere, tenant is acting anxious, tenant is holding peri area.
4. Staff to toilet tenant 2 times at night at about midnight and about 0400.
5. Tenant has an indwelling foley catheter and is able to manage per self.
6. Tenant has an indwelling foley catheter and staff is to empty leg/drain down bag each shift. Notify RN if urine is foul smelling, cloudy, or has blood in it.
7. Tenant has indwelling foley catheter, staff to change drain down bag to leg bag in the AM and change leg bag to drain down bag at night.
8. Tenant is having bowel incontinency. Staff to make sure tenant is wearing depends. Staff to complete peri care when tenant is incontinent of bowel. Staff to toilet before meals, after meals, AM, PM, and PRN. Staff to notify RN of incontinency.
9. Tenant requests bedside commode.
10. Tenant has toilet frame on toilet.
11. Staff to complete peri care after incontinent of urine.
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| **6. Food, Diet, Nutrition** |
| 1. Independent/3 meals prepared and served daily.
2. Independent with 2 meals prepared and served daily.
3. Staff to explain where food is on the plate as with the face of clock i.e... Meat at 1200 o'clock, Potatoes at 3 o'clock, vegetables at 9 o'clock.

Tenant requests bedtime snacks.1. Tenant requests supplements.
2. Tenant is on a mechanical soft diet.
3. Tenant is on a pureed diet.
4. Tenant is to have thickened liquids with a consistency of: Honey, Nectar, Pudding.
5. Tenant is aware if diabetic choices and makes good decisions per self.
6. Tenant does not make good choices with diabetic diet and staff reminds them of good choices.
7. Tenant wants to eat their own choices. Managed Risk is in place.
8. Staff to assist with tenant eating.
9. Staff to cue and remind tenant with eating.
10. Staff report to RN of weight loss. Encourage use of supplements. Encourage in between meal snacks.
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| **7. Housekeeping/Laundry** |
| 1. Basic Service.
2. Basic Service plus bed making daily.
3. Laundry 2 loads per week.
4. Tenant requests to complete laundry per self.
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| **8. Safety** |
| 1. Independent.
2. Tenant can evacuate with minimal assistance.
3. Tenant is able to evacuate with assist of 1.
4. Tenant needs to evacuate with total assist because of vision.
5. Tenant is able to evacuate with transfer assist of one then staff to push wheel chair. Tenant is able to demonstrate the use of their pendant.
6. Tenant requires safety checks every 2 hours day and night.
7. Tenant requires safety checks 2 times in the night, at midnight and 0400. Staff to complete safety checks 8 times a shift.
8. Staff to remind tenant to use pendant.
9. Staff to respond immediately to wander-guard alarm.
10. Staff to lock up tenant cigarettes and remind tenant to come to nurse’s office for cigarette. Staff to go with tenant outside to light cigarette.
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| 1. **Mental Status/Well-being**
	1. Independent.
	2. Tenant is a Cognitive of …
	3. Tenant is a GDS of …
	4. Tenant has a history of depression.
	5. Staff to listen with full attention.
	6. Engage tenant in activities.
	7. Tenant has made comments of wanting to die. Staff to listen to tenant concerns. Staff to report statements to RN.
	8. Tenant has history of hallucinations. Staff to report to RN if tenant is seeing or hearing things that are not there. Staff to give tenant support.
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| **11.** | **Nurse Support** |
| 1. Nurse to check blood pressure monthly/quarterly nurse review.
2. RN to inform staff when to take routine orthostatic blood pressures or neuro checks with falls hitting tenant’s head or a blood pressure medication change.
3. RN to monitor batteries of wander-guard bracelets.
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| **12.** | **Activities** |
| 1. Tenant is independent with activity choices
2. Staff to encourage participation with activities.
3. Staff to bring to activities.
4. Staff to complete spontaneous activities such as snacks, coloring, magazines, photo albums, stickers, cards, puzzles, circle a word, starting a phrase and having tenant finish the phrase, stuffed animals, baby dolls, bingo, reading, communication with what tenant life was like, and what they did previously.
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| **13. Outside Provider (home health, hospice, therapy, etc.)** |
| 1. None.
2. Physical Therapy for strengthening.
3. Physical Therapy because of fall.
4. Physical Therapy to work with wheeled walker.
5. Occupational Therapy to work with ADL's.
6. Occupational Therapy to work with being independent with showers, bathing, dressing. Home health agency for (wound care, catheter care).
7. Oxygen at 2 liters continuously (or what is ordered).
8. Oxygen at 2 liters on at night (or what is ordered).
9. Hospice care.
10. C-Pap. Staff to remind to apply or Tenant self-applies without reminders.
11. B-Pap.Staff to remind to apply or Tenant self-applies without reminders.
12. Nebulizer. Staff to apply for respiratory distress, follow orders on MAR.
13. Hospital bed. Has because is in Hospice or needed for medical reasons.
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| **14.** | **Managed Risk** |
| 1. None.
2. Managed Risk signed by tenant and RN for falls.
3. Managed Risk signed by tenant and RN for non-compliance with...
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| **15.** | **Other** |
| 1. Staff assists with arranging transportation to doctor's appointments PRN.

Staff to intervene immediately with any tenant to tenant conflicts and contact RN.Staff to notify RN of any areas on skin such as: bruising, rash, open areas, warmth, painful area, scratches, swelling.1. Tenant is ordered on oxygen. Staff to notify nurse if tenant is short of breath, pursed lip breathing, fingernails blue, nose blue, lips blue, or oximeter <90%.
2. RN to notify staff of any infections which would need to use protective equipment such as gloves, gown, mask, or shield.
3. Staff to report to RN any blisters, or pain that runs along a line. This could be shingles. Staff to notify RN if they are pregnant to not take care of a tenant with shingles.
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| **16. Nursing Home Preference** |
| 1. Undecided at this time.
2. ABC Nursing Home.
3. No preference at this time.
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| 1. **Behavior**
	1. None.
	2. Tenant has confusion.
	3. Tell tenant she is safe and family knows where she is. Family went to the store and will be back soon.
	4. Family is at work and will stop in later.
	5. Redirect to an activity if anxious.
	6. Ambulate with tenant to lessen anxiety.
	7. Tenant is wandering in program, redirect to an activity, talk about past life, talk about pictures in apartment, sit with tenant and look at photo album, look at a magazine together, give tenant a magazine to look at, give tenant a stuffed animal, give tenant a baby doll to hold when agitated or depressed, give tenant something to hold in their hands.
	8. Tenant has history of scratching, staff redirect with activities, use medication ordered by physician, give tenant something in their hands to hold.
	9. Tenant has refused cares, medication, showers, coming to dining room, staff doing blood sugars, to wear emergency pendant, etc...
	10. Staff to notify RN, redirect with conversation, reattempt after 5 minutes, try another staff if available, redirect with stories of past
	11. Staff redirect, include tenant with activities, direct to what tenant likes to do, with any physical aggression with tenant and notify RN.
	12. Tenant sometimes consumes unsafe items. Staff is to keep unsafe items out of tenant eyesight and each. Staff to redirect to areas that are safe and get involved with activities.

Tenant likes to undress in areas that are not appropriate. Staff is to keep tenant in staff line of vision, allow tenant to go to apartment to undress, put on clothes that are harder for tenant to remove, apply suspenders if tenant allows, have family bring in one piece outfits.* 1. Tenant makes inappropriate sexual comments to staff. Staff to be direct and state that it is not appropriate. Staff to notify RN.
	2. Tenant makes inappropriate sexual advances to another tenant that does not want advances. Separate tenants immediately. Do not put them at the same table for dining. Redirect to activity, to apartment, another staff member, engage with different conversation with 1:1. Keep family informed. Staff to notify

RN. |