


Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none">Alteration in skin integrity with risk for infection or complications related to WOUND hospital acquired. Returned from hospital on September 30th 2025 <p>#24 - Pressure - Stage 2 Right Heel Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</p>	<ul style="list-style-type: none">To minimize risk of WOUND (Stage # 2) infection each day until fully healed. Revision on: 10/10/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026To promote optimal healing of WOUND (Stage #2) within the target date. Revision on: 10/10/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	<ul style="list-style-type: none">TREATMENT PLAN: Administer treatment for Stage #2 Wound as per MD Order. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)MONITORING: Utilize holistic perspective of continuous monitoring of resident with Stage #2 Wound for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none">Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility and transfer). Wheel chair tilt to OFF load both the heel d/t ulcer. Revision on: 10/07/2025 Revision by: Rana Maghnieh (RPN)	<ul style="list-style-type: none">Saverio will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility and transfer) each day through to the next review date. Revision on: 03/14/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026	<ul style="list-style-type: none">HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of two 1/4 bed rails. Revision on: 03/14/2025 Revision by: Suzanne Azar (RN)MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use two 1/4 bed rails as to support appropriate bed mobility. Revision on: 03/14/2025 Revision by: Suzanne Azar (RN)BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 03/14/2025 Revision by: Suzanne Azar (RN)TILTED CHAIR in USE as a PASD to support resident with OFF load both the heel d/t ulcer. Monitor every shift. Revision on: 10/07/2025 Revision by: Rana Maghnieh (RPN)	PCA	D/E/N	
<ul style="list-style-type: none">At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to sleeping a lot in room and on	<ul style="list-style-type: none">To support Sam's Psycho-Social well being through to the next review.	<ul style="list-style-type: none">Recreation staff will continue to provide Sam with one on one and friendly visits in his room, programs will provide Sam with palliative visits in his room also as needed. Revision on: 10/03/2025			
Allergies	No Known Allergies	D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)	Admission Date	04/27/2021	Location	2 224 C
Last Care Plan Review Completed:		10/06/2025			



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palliative care now. His ISE score is 3/6. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	Target Date: 01/06/2026	Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy, antipsychotic, antidepressant use Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with Saverio/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident using poly-pharmacy, etc. for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. 	Registered Staff		
<ul style="list-style-type: none"> Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, comfort care.) Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To minimize the potential for episodes/ complications of constipation through to the next review date Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. <ul style="list-style-type: none"> BOWEL PROTOCOL: In place as per MD order 	Registered Staff Registered Staff		
<ul style="list-style-type: none"> Potential for Expressive Behaviour repetitive expressed behaviours of wanting to home, history of exit seeking and elopement related to Alzheimer's Disease Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To decrease episodic frequency of wandering, socially inappropriate behavior and resistive to care by next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Saverio for indications to change in or for escalating expressive behaviour risk. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRIGGERS leading to RESISTANCE to Care Needs of (o refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (oconfusion, misunderstanding care needs, poor judgement, etc.) 	All		
Allergies	No Known Allergies	D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)	Admission Date	04/27/2021	Location	2 224 C
Last Care Plan Review Completed:		10/06/2025			

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		(RAI Coordinator) Target Date: 01/06/2026	Revision on: 06/21/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Saverio is refusing to bathe, change clothes, take medications, eat and re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 06/21/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • Repetitive Behaviour: If Saverio is noted to be asking to call a cab, asking to go home gently redirect him to move to a quieter area, redirect him calmly back to his room, etc. Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> • SOCIALLY Inappropriate Behaviour: If Saverio is noted to (digging, playing with his own feces and messing up his beddings, etc.) clean area using appropriate PPE. Report episode to Registered Staff. Revision on: 02/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • WANDERING: Permit Saverio to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 09/22/2021 Revision by: Leslie Meloche (Activities/Rec Therapy)			All	
<p>• Decline in ADL function and increased dependency for ADL care related to the End of Life phase</p> <p>Revision on: 10/02/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>		<p>• To ensure Savario dignity and care needs are met each day through to the End of Life.</p> <p>Revision on: 10/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 01/06/2026</p>	<p>• BED MOBILITY - 1-2 staff TOTAL care to turn and re-position Saverio every 2 hours and PRN to promote comfort.</p> <p>Revision on: 10/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BATHING - 1-2 staff provide (TOTAL) care with (bed or sponge) bath daily as tolerated.</p> <p>Revision on: 10/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING - Meal service provided at bedside. 1 staff to feed resident snacks/meals/fluids as tolerated. Monitor swallowing and notify Nurse if difficulty noted</p> <p>Revision on: 10/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HYGIENE - 1-2 staff TOTAL care for hygiene care every shift + PRN.</p>			PCA	Q2h
Allergies		No Known Allergies	D.O.B.	11/04/1941	Physician	Albert Patrick Ng	
Diagnosis		Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses					
Facility		Berkshire Care Centre				Print Date	12/11/2025
Resident		Carosella, Saverio (922131005394)	Admission Date	04/27/2021	Location	2 224 C	
Last Care Plan Review Completed:		10/06/2025					

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			<div>Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • ORAL HYGIENE: 1 staff to complete oral care every 2 hours and as needed. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • EYE CARE: 1 staff to complete eye care every shift and as needed Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• DRESSING - 1-2 staff TOTAL care to dress Savario in (pajamas, hospital gown) per identified preference. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOILETING: 1-2 staff TOTAL care for check and changes check every 2 hours and change as soiled. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFER -Saverio prefers to remain in bed. If transfer required/requested; 2 staff TOTAL Maxi lift. Revision on: 11/21/2025 Revision by: Rana Maghnieh (RPN) • LOCOMOTION (in/out of room): 1 staff to porter to/from destination as needed per resident preference.</div> <div>Resident is bedbound but may request to get up. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>						PCA PCA Registered Practical Nurse RN PCA PCA PCA PCA	
• Need for PAIN and Symptom Management related to End of Life Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Saverio to be comfortable and have pain managed each day through to his/her end of life. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident in Palliative/End of Life phase for Pain/change to comfort level and symptoms of impending death Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • FATIGUE: Encourage Saverio to rest as needed. Revision on: 10/01/2025							
Allergies	No Known Allergies			D.O.B.	11/04/1941		Physician	Albert Patrick Ng		
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(110.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses									
Facility	Berkshire Care Centre						Print Date	12/11/2025		
Resident	Carosella, Saverio (922131005394)			Admission Date	04/27/2021		Location	2 224 C		
Last Care Plan Review Completed:		10/06/2025								

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	<ul style="list-style-type: none">To provide Saverio with End of Life symptom management each day through to the End of Life. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">OXYGEN: Provide Oxygen therapy as needed as per MD/NP Order. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">MEDICATION: Administer medications for (SOB, secretion management, pain, etc.) as per MD/NP order. Monitor effectiveness and seek re-assessment if clinically needed. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">POSITIONING: Turn and reposition Q2h and PRN. While repositioning monitor for moaning, facial grimacing, guarding, rigidity and obvious discomfort. If symptoms are noted; report to Registered Staff immediately after repositioning resident.	PCA	Q2h	
<ul style="list-style-type: none">Potential for altered hematologic symptoms or complications related to Black tarry stools, admitted with G.I. Bleed September 18th 2025 Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">To treat and/or minimize complications associated with GI. Bleed each day through to the next review date. Target Date: 01/06/2026	<ul style="list-style-type: none">MONITORING: Utilize holistic perspective of continuous monitoring of resident with G.I. Bleed for complications or changes to health status.LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.	Registered Staff		
<ul style="list-style-type: none">Potential to experience alteration in MOOD as exhibited by (restless, complaints, fears, frustration, negative statements) related to Alzheimer's Disease Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">Sam will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none">ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Sam for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none">Altered COMMUNICATION as exhibited by limitations to (self expression,	<ul style="list-style-type: none">Sam will be supported to maintain current communication	<ul style="list-style-type: none">SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.).			
Allergies	No Known Allergies	D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)	Admission Date	04/27/2021	Location	2 224 C
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comprehension) related to Cognitive loss Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	abilities each day through to the review date. Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Sam needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to history of falls, unsteady gait, Alzheimer's disease. Revision on: 11/18/2024 Revision by: Haley Barisic (Quality Improvement Coordinator)	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• COMMUNICATION: Involve/collaborate with Saverio/SDM in decision making in fall prevention Plan of Care. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within Saverio's reach. Check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Jenny Liu (RAI Coord Back-up) • BED: (place bed in lowest position) to lower risk for injury. Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • ALARMS: Requires bed alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 11/15/2025 Revision by: Tola Omolade (ADOC)	PCA PCA PCA	D/E/N Q1H		
• Risk for/Impaired SKIN INTEGRITY related to Incontinence, Impaired Mobility. Revision on: 03/20/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To protect and maintain skin integrity each day through to the next review. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. • EQUIPMENT: Savario requires (pressure reduction offloading from heels bilaterally) to offload pressure. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA			
• COGNITIVE LOSS; alteration in thought processes; memory loss, difficulty concentrating, poor judgement related to Alzheimer's Disease.	• Saverio will be supported to maintain cognitive function through the review date. Current CPS is 3/6 Revision on: 10/02/2023	• COMMUNICATION: Involve/collaborate with Saverio/SDM in decision making of Cognitive Loss for Alzheimer's. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)		Admission Date	04/27/2021	Location	2 224 C
Last Care Plan Review Completed:		10/06/2025				

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Revision on: 03/20/2024 Revision by: Jenny Liu (RAI Coord Back-up)		Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> • ORIENTATION: Gently reorient to place and time as needed when Saverio is feeling lost or in confused state. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Savario can comprehend and follow. Revision on: 08/26/2025 Revision by: Danielle Loreto (RAI Coordinator) 			
<ul style="list-style-type: none"> • Potential to experience FOOT/FEET complications related to diabetic diagnosis. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN) 		<ul style="list-style-type: none"> • To maintain adequate Foot/Feet/Toenail care and minimize episodes of inflammation, infection or complications through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Sam in decision making for footcare treatment plan. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN) • TREATMENT PLAN: Sam requires footcare/treatment during shower days and PRN. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN) • PREFERENCE: Sam likes to have footcare to be completed on shower days by registered staff. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN) 		Footcare Nurse - Internal	
<ul style="list-style-type: none"> • Saverio is at high risk for ELOPEMENT related to Alzheimer's disease Revision on: 04/06/2022 Revision by: Maryola Perion (RN) 		<ul style="list-style-type: none"> • To promote Saverio's safety and minimize risk for episode of elopement each day through next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026 	<ul style="list-style-type: none"> • ALERT: Saverio has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 04/06/2022 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Saverio away from elevator or exit doors as needed. Revision on: 04/06/2022 Revision by: Maryola Perion (RN) 		PCA	
<ul style="list-style-type: none"> • Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS 		<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 10/02/2023 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/ collaborate with Saverio/SDM in decision making of musculoskeletal care management. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to 			
Allergies	No Known Allergies		D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)		Admission Date	04/27/2021	Location	2 224 C
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		Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	health status. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 01/27/2022 Revision by: Maryola Perion (RN)				
• Altered VISION related to use of glasses daily. Revision on: 07/23/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• Saverio will use glasses for vision correction daily through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• EYEGLASSES: Saverio wears eyeglasses at all times. Assist to clean eyeglasses as needed and store on bedside table when sleeping. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
• SPIRITUAL BELIEFS: Saverio is of the Catholic Faith. Revision on: 05/25/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• To provide Saverio spiritual support as interested through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• PERSONAL CHOICE: Respect Saverio's right to decline participation in Spiritual Programs. Revision on: 07/23/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)				
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To promote adequate rest/sleep for Saverio based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• PREFERENCE: No preference noted. Due to fluctuating health status he sleeps on and off and at times stays in bed. Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential for gastric discomfort/complications related to		• To treat and/or minimize complications associated with	• MONITORING: Utilize holistic perspective of continuous monitoring of Saverio for management of Colon Ca for discomfort/ complications or changes to health status.				
Allergies	No Known Allergies			D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)			Admission Date	04/27/2021	Location	2 224 C
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diagnosis of Colon Ca. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		Bowel Ca each day through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	Revision on: 01/27/2022 Revision by: Maryola Perion (RN)				
• Expressed Wishes and Beliefs related to Saverio's Medical Treatment and End of Life Care Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To support and honor Saverio's expressed wishes and beliefs through to the End of Life. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• CPR: Saverio's wishes express NO CPR and NO TRANSFER to hospital. Revision on: 02/25/2025 Revision by: Teresa Quinto (RPN)				
• Potential to experience alteration in CARDIAC FUNCTION related to; A Fib, HTN. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with Atrial Fibrillation/ HTN through to the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	• COMMUNICATION: Involve/collaborate with Saverio/SDM in decision making of Cardiac Care Management for A Fib, HTN. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of Saverio with HTN/Afib for changes to health status and alteration or complications affecting cardiac function. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for A Fib, HTN as per MD Order and monitor for side effects. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) • PACEMAKER Insitu: Saverio has pacemaker (2019). Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			Registered Practical Nurse RN	
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Revision on: 04/27/2021		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to	• COMMUNICATION: Involve/ collaborate with Saverio/SDM in decision making of diabetes care management. Revision on: 01/27/2022 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies		D.O.B.	11/04/1941	Physician	Albert Patrick Ng	
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Carosella, Saverio (922131005394)		Admission Date	04/27/2021	Location	2 224 C	
Last Care Plan Review Completed:		10/06/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Katie Wolters-Savo (RAI Coordinator)	the next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of Saverio for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • RESCUE MEDICATION: Administer GLUCAGON for hypoglycemia as per MD order. • LAB WORK: Monitor lab and diagnostic results for fasting blood glucose and/or HbA1c and report results to MD as needed. Follow up as indicated. Revision on: 01/27/2022 Revision by: Maryola Perion (RN) 	Registered Staff	
<ul style="list-style-type: none"> • Potential for BOWEL INCONTINENCE related to Alzheimer's Disease. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) 	<ul style="list-style-type: none"> • Saverio will have bowel incontinence managed every shift through to the next review period. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026 	<ul style="list-style-type: none"> • BOWEL: CHECK and CHANGE: Saverio experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: Saverio uses an incontinent product. Blue prevail Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	
<ul style="list-style-type: none"> • URINARY Mixed INCONTINENCE related to Alzheimer's Disease. Revision on: 04/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) 	<ul style="list-style-type: none"> • Saverio will have urinary incontinence managed every shift through to the next review period. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026 	<ul style="list-style-type: none"> • CHECK and CHANGE: Saverio experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 10/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Saverio uses an incontinent product- blue prevail Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	

Allergies	No Known Allergies	D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)	Admission Date	04/27/2021	Location	2 224 C
Last Care Plan Review Completed:		10/06/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		• Sam will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026 • Will weigh within GWR/IBW/Realistic weight range of 90-95kg through to next review date. Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/06/2026 • "Sam" will be adequately hydrated aeb drinking at least 75% of total fluid requirement 1716mL per day through to next review date. Revision on: 02/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 01/06/2026 • Will meet estimated nutritional requirements of 1840-2300 kcal @ 20-25kcal/kg, 73-92g protein @0.8- 1g/kg through to next review date. Revision on: 09/16/2024 Revision by: Sasha Sonny (Dietitian	• Labelled Item Lunch: Magic Cup daily Revision on: 11/28/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN Dietitian (RD)	D
			• NUTRITION RISK: "Sam"is high risk level. Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)				
			• DIET ORDER: Sam will receive regular diet, pureed texture. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• THICKENED FLUIDS: Resident drinks thickened fluids at mildly thick level 2 (nectar-like) consistency. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• FLUID TARGET: Encourage Sam to drink a minimum of 1287 ml per day. Revision on: 02/24/2025 Revision by: Brittany Hyde (Registered Dietitian)			PCA	
			• DINING INSTRUCTIONS: Provide small bites of food and alternate with sips of fluids. Add extra gravy to mashed potatoes. Revision on: 12/04/2025 Revision by: Holly Laasanen (Dietitian (RD))			Registered Practical Nurse	
			• FOOD ALLERGY/INTOLERANCE: Intolerance to regular cow's milk. Provide Lactaid milk (thickened). Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Restorative Care Aide	
			• COMFORT NUTRITION: Sam will be offered favourite meals/fluids and their intake will be as tolerated. Respect resident choice to refuse intake. Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)			PCA RN	
Allergies	No Known Allergies			D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)			Admission Date	04/27/2021	Location	2 224 C
Last Care Plan Review Completed:		10/06/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	(RD)) Target Date: 01/06/2026			

Diagnosis

Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of cardiac pacemaker(Z95.00), Atrial fibrillation, unspecified(I48.90), Primary generalized (osteo)arthrosis (M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastrointestinal haemorrhage, unspecified(K92.2), Other injury of lung without open wound into thoracic cavity(S27.380)

Allergies	No Known Allergies	D.O.B.	11/04/1941	Physician	Albert Patrick Ng
Diagnosis	Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm colon, unspecified(C18.9), Presence of ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Carosella, Saverio (922131005394)	Admission Date	04/27/2021	Location	2 224 C
Last Care Plan Review Completed:		10/06/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential to experience alteration in fluid volume or episode of DEHYDRATION related to varied fluid consumption, use of diuretic medication. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote fluid consumption and minimize risk for dehydration each day through to the next review date Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. PROMOTE FLUIDS: Promote Teresa to consume fluids; amount as per Nutrition Care Plan. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff		
<ul style="list-style-type: none"> Teresa is at high risk for ELOPEMENT related to Dementia. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote Teresa safety and minimize risk for episode of elopement each day through next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> ALERT: Teresa has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. ELOPEMENT ALERT: Redirect Teresa away from elevator or exit doors as needed. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> STRONG PARTICIPATION in Activities. ISE Score: 6/6 Revision on: 10/18/2025 Revision by: Eliane Piccoli (Recreation Aide)	<ul style="list-style-type: none"> Teresa will be supported to maintain participation in activities 15-20 times per month by the next review date. Revision on: 04/22/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/22/2026	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite her to programs of personal interest; 1:1/friendly visits, comedy corner, discussion group, exercise groups, physical games, manicures & hand massages, music appreciation, reminiscing group, sensory - aromatherapy, Happy Hour, hymn sing, TV - movie night, etc. SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as Watching/listening to TV, listening to music, individual spiritual activities, visiting with residents/team members, etc. ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - Accompany in the elevator, Walk with, Guide to, Porter, Cue Direction, Reminders, etc. Revision on: 12/22/2021 Revision by: Mitchell Atkinson (Recreation Aide)			
Allergies	No Known Allergies	D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025			



Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• STRONG PARTICIPATION in Activities. ISE Score: 6/6 Revision on: 10/18/2025 Revision by: Eliane Piccoli (Recreation Aide)			• ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music, spiritual talk, etc. Revision on: 12/22/2021 Revision by: Mitchell Atkinson (Recreation Aide) • FAMILY INVOLVEMENT: High. Revision on: 12/21/2021 Revision by: Shayna Lee Wonsch			ACT 	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Increased risk for FALLS related to history of falls, unsteady gait and impaired balance. Revision on: 08/30/2025 Revision by: Maryola Perion (RN)		prevent injuries.			
<ul style="list-style-type: none"> Potential for gastric discomfort/complications related to episodes of (Nausea, complaints of stomachaches) Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To treat and/or minimize complications associated with nausea Revision on: 06/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of NAUSEA/VOMITING or changes to health status. MEDICATION: Administer medication for NAUSEA/VOMITING as per MD order. Monitor effectiveness and for side effects. 	Registered Staff Registered Staff		
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by negative statements and anger towards other residents related to Dementia. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> Teresa will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Teresa for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. DISTRACTION ACTIVITIES: Teresa can be calmed doing activities of interest including (cleaning the hand rails) Revision on: 11/27/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Potential for acute PAIN and alteration in 	<ul style="list-style-type: none"> Promote MDS Pain Score of 0 	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of 	RN		
Allergies	No Known Allergies	D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved	
comfort level related to hx of hip fracture (right hip), right leg pain, back pain, stomach pain (epigastric) headaches. Most Current MDS Pain Score is 0/3. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)		through to the next review. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • NON VERBAL CUES of PAIN for Teresa includes - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			Registered Practical Nurse		
						PCA		
						Registered Practical Nurse RN		
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 07/21/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Teresa will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 07/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order			Registered Staff		
						Registered Staff		
						Registered Staff		
• Nutrition Risk Level Revision on: 07/18/2025 Revision by: Holly Laasanen (Dietitian (RD))		• Teresa will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026 • Will weigh within GWR 55-60 kg through to next review date. Revision on: 07/18/2025	• Labelled Item Breakfast: Greek yogurt daily Revision on: 06/26/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Dinner: pudding daily Revision on: 06/26/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Lunch: Magic Cup daily Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	D	
						Registered Practical Nurse RN		
						PCA	E	
						Registered Practical Nurse RN		
						PCA	D	
						Registered Practical		
Allergies	No Known Allergies		D.O.B.	03/10/1933	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Cascapera, Teresa (922131005439)			Admission Date	12/27/2023	Location	2 203 A	
Last Care Plan Review Completed:		10/22/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/22/2026 • Teresa will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (~27 ml/kg using 56.3 kg weight) through to next review date. Revision on: 07/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/22/2026	• NUTRITION RISK: Teresa is at moderate risk level. Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Teresa will receive Regular diet, Regular texture. Cut food into small pieces. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Teresa drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/26/2021 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Teresa to drink a minimum of 1200 ml per day. Revision on: 07/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DINING INSTRUCTIONS: For GI condition - Cut food into small pieces - Provide crustless bread/toast - No salads/raw vegetables - No whole beans - No corn - No bran oatmeal (can have other oatmeal) - Provide lactose-free milk to drink Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 60 ml Resource 2.0 (diluted with 60 ml water or lactose-free milk) QID Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD))	Nurse RN Dietitian (RD) PCA Diet PCA PCA Registered Practical Nurse		
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension, CHF Revision on: 06/23/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. Revision on: 02/18/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of Teresa with HTN for changes to health status and alteration or complications affecting cardiac function. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for HTN as per MD Order and monitor for	Registered		
Allergies	No Known Allergies	D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	side effects. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			Practical Nurse RN	
• Sleep Patterns; Potential for alteration in sleep patterns to monitor for having difficulty sleeping at night. Revision on: 06/18/2025 Revision by: Teresa Quinto (RPN)		• To promote adequate rest/sleep for Teresa based on identified sleep patterns/preferences each night through to the next review date. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• REST PATTERN: Preferred bedtime 0800, usual wake time 2000 and daytime naps frequently at her own discretion. Teresa will go and take a nap when she is tired. She may get up and wander throughout the night- assess for unmet needs. Offer a drink, snack. Assess for pain and discomfort. She may just want to walk around. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• Risk for Impaired SKIN INTEGRITY related to fragile skin, left leg swelling, Callous to right great toe Revision on: 05/22/2024 Revision by: Katie Savo		• To protect and maintain skin integrity each day through to the next review. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.			PCA	
• Potential for BOWEL INCONTINENCE related to deconditioning, confusion. Revision on: 05/21/2024 Revision by: Katie Savo		• Teresa will have bowel incontinence managed every shift through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is continent however it varies and she can be frequently incontinent depending on expressed behaviours and cognition. Report change to level as noted. Revision on: 02/06/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor Teresa for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 05/21/2024 Revision by: Katie Savo • INCONTINENCE PRODUCT: Teresa wears Prevail white brief.			Registered Staff PCA PCA PCA	
Allergies	No Known Allergies		D.O.B.	03/10/1933	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)		Admission Date	12/27/2023	Location	2 203 A	
Last Care Plan Review Completed:		10/22/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Potential for BOWEL INCONTINENCE related to deconditioning, confusion. Revision on: 05/21/2024 Revision by: Katie Savo 		Revision on: 09/06/2025 Revision by: Teresa Quinto (RPN)			
<ul style="list-style-type: none"> • URINARY (Mixed) INCONTINENCE related to deconditioning, confusion. Revision on: 05/21/2024 Revision by: Katie Savo 	<ul style="list-style-type: none"> • Teresa will have urinary incontinence managed every shift through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is Totally incontinent. Report changes to level as noted. PCA Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Teresa wears a Prevail white brief. PCA Revision on: 09/06/2025 Revision by: Teresa Quinto (RPN) 			
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of history of WANDERING, VERBAL, PHYSICAL aggression in nature, Calling Police Department, barricading self in room, Threatening the team "dad is part of the mafia, I will end you", threatening to hurt herself, anger towards others, Refusal of showers, pushing her dresser up to the door so nobody can go into room related to Dementia. Revision on: 02/24/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) 	<ul style="list-style-type: none"> • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be maintained to 0. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/22/2026 	<ul style="list-style-type: none"> • TRIGGERS leading to PHYSICAL and verbal EXPRESSIONS (PUSHING, swatting, hitting). Others getting too close, entering room uninvited as expression of behaviour include becoming agitated, verbal, and physical by pushing others away who are too close Revision on: 04/30/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL; yelling, screaming, calling names as expression of behaviour include frustration, misunderstanding, other residents entering personal space. Revision on: 07/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • WANDERING: Permit Teresa to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 11/25/2024 Revision by: Danielle Loreto (RAI Coordinator) 			
Allergies	No Known Allergies	D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Casapera, Teresa (922131005439)	Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<p>• ENVIRONMENT: Teresa is most calm with the door closed when in her room, quiet area, small groups.</p> <p>Revision on: 04/30/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SPECIAL CONSIDERATIONS: The resident is high intensity for accomodation. BSO - Internal</p> <p>Revision on: 09/11/2024 Revision by: Ranjita Yadav (RPN)</p> <p>• BSO RECOMMENDATIONS: Teresa has been placed in a private accommodated room and will be on HIN as of Feb 21/22 and is being followed by Internal BSO.</p> <p>PHYSICAL Behaviour: If Teresa is attempting to strike out; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance.</p> <p>VERBAL Behaviour: If Teresa is heard yelling, swearing, or calling others names; calmly remind her to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</p> <p>WANDERING: Permit Teresa to safely roam in the common area. Give resident a cloth as she will clean the railings and tables when wandering.</p> <p>RESISTANCE to Care Need: If Teresa is refusing to bathe, stop and re approach when calm. Report episode to Registered Staff.</p> <p>Triggers: Certain residents and residents entering Theresa's room/space.</p> <p>Teresa likes to listen to music and finds it comforting. She enjoys Italian, Christmas and also polka music. Teresa also enjoys watching Al Pacino movies.</p> <p>Let Teresa sleep until she is ready to wake up on her own time (ex, after breakfast).</p> <p>The staff is to make eye contact when talking to her, to encourage her to go back to her room and offer snacks if she is agitated.</p>		
Allergies	No Known Allergies		D.O.B.	03/10/1933
Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location 2 203 A
Last Care Plan Review Completed:		10/22/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for Expressive Behaviour of history of WANDERING, VERBAL, PHYSICAL aggression in nature, Calling Police Department, barricading self in room, Threatening the team "dad is part of the mafia, I will end you", threatening to hurt herself, anger towards others, Refusal of showers, pushing her dresser up to the door so nobody can go into room related to Dementia. Revision on: 02/24/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<p>Staff to avoid arguing or reasoning with her and to listen to her concerns and needs and give reassurance and comfort.</p> <p>Team reports resident continues to become upset about money and her son taking her to the bank. Recommend the following approaches:</p> <p>A. Do not ignore residents' concerns. Do not tell Theresa you will call her son if you are not calling him.</p> <p>B. Listen to concerns and validate residents' feelings. "I am sorry you are feeling upset right now.</p> <p>C. Consider questions about her children. Try to avoid conversations about the husband as the resident has reported abuse.</p> <p>Theresa also likes to go down for main floor programs such as happy hour and bingo occasionally</p> Revision on: 12/10/2025 Revision by: Leslie Meloche (Recreation Aide)		
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of use of anti-psychotic medications. Revision on: 05/31/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of Teresa using anti-psychotic medication, poly-pharmacy, etc. for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 05/31/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed Revision on: 05/31/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> PHARMACY MEDICATION REVIEW: Request Pharmacy Medication Review when clinically appropriate Revision on: 05/31/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		

Allergies	No Known Allergies	D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, slurred speech, mumbled speech, etc. related to alternate Primary Language Italian Revision on: 03/08/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Teresa will continue to freely express self and adequately comprehend information each day through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• PRIMARY LANGUAGE: Teresa's primary language is Italian. She is able to understand English. Revision on: 12/08/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • INTERPRETER Required: Utilize Teresa's family for interpretation when needed. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases). Revision on: 04/30/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Teres has impaired understanding- use short, direct communication with intermittent visual cues/guidance. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• SPIRITUAL BELIEFS: Teresa is of the Roman Catholic Faith. Revision on: 12/22/2021 Revision by: Mitchell Atkinson (Recreation Aide)		• To provide Teresa spiritual support as interested through to the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including Hymn Sing, Church Service, prayer circle, etc. Revision on: 12/22/2021 Revision by: Mitchell Atkinson (Recreation Aide) • SELF-DIRECTED SPIRITUAL Activities: Teresa engages in praying. Revision on: 12/22/2021 Revision by: Mitchell Atkinson (Recreation Aide)			
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia. Female caregivers only. Revision on: 12/10/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Teresa will have ALL ADL care tasks met each day through the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	• BATHING: Teresa prefers (tub bath) on Monday and Friday Day shifts. Teresa participates by (holding a wash cloth with cueing). One staff EXTENSIVE assistance for bathing.Nail care to be provided on shower/bath day. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Teresa is able to turn and reposition independently while in bed without assistance or oversight from the team. When she is fatigued and/or confused she will require 1 team member extensive assistance. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	No Known Allergies		D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)		Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<p>• DRESSING: Teresa requires one team member extensive assist to dress from head to toe. She participates throughout out and at times will dress herself.</p> <p>Prefers female caregivers only. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p> <p>• EATING: Teresa is able to eat independently with cueing and reminders from staff but may require one staff to feed her at times as she will play with her food. If she is eating in her room, staff ensure proper positioning when feeding her. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: Teresa is able to walk Independently on the unit with supervision from staff. She may require one staff Extensive assistance to walk her in her room and in the corridor, to and from room to the dining room if she is weak or unsteady.</p> <p>She refused to use her walker, staff will continue to encourage her to use it. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Teresa is able to wash her own face, brush her own teeth with encouragement and cueing from the team. She requires one team member to provide extensive assistance with providing peri care. Prefers female caregivers only. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p> <p>• HAND HYGIENE: 1 staff to provide REMINDERS to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• TOILET USE: Teresa requires 1 team member with extensive assistance with toileting. She can use the toilet on her own as well. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p> <p>• TRANSFERRING: Teresa is able to transfer herself. She may require 1 team member at times to assist. Revision on: 04/30/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	PCA	
Allergies	No Known Allergies		D.O.B.	03/10/1933
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)		Physician	Albert Patrick Ng
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location 2 203 A
Last Care Plan Review Completed:		10/22/2025		

Care Plan Report


Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Altered ability to complete Activities of Daily Living (ADLs) related to Dementia. Female caregivers only. Revision on: 12/10/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			<ul style="list-style-type: none">ORAL CARE: Teresa has her own teeth and a partial plate for her lower palate. She need one staff member to brush teeth and store her partial plate on. Revision on: 06/29/2025 Revision by: Jiss Mathew (RN) <ul style="list-style-type: none">FOOT CARE: To be trimmed and cleaned by PSW staff during shower days & PRN. PCA Report long toe nails or other abnormalities as noted. Revision on: 01/25/2023 Revision by: Katherine Arca (RPN)				
<ul style="list-style-type: none">Expressed Wishes and Beliefs related to Teresa's Medical Treatment and End of Life Care Revision on: 12/08/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none">To support and honor Teresa's expressed wishes and beliefs through to the End of Life. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none">CPR: DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">FUNERAL Arrangements: Families First on Dougall Avenue, (Heather). Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			Social Worker ST	
<ul style="list-style-type: none">Altered VISION related to glasses used for reading. Revision on: 11/26/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none">Teresa will use glasses for vision correction daily through to the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">EYEGLASSES: Resident does not use glasses anymore. Monitor for changes in vision and safety risks.			PCA	
Allergies	No Known Allergies			D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)			Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 01/22/2026			
<p>• COGNITIVE LOSS; alteration in thought processes poor judgement related to Dementia</p> <p>Revision on: 11/26/2021</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>• Teresa will be supported to maintain cognitive function through the review date. Current CPS is 3/6.</p> <p>Revision on: 02/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 01/22/2026</p>	<p>• COMMUNICATION: Involve/collaborate with Teresa/SDM in decision making of Cognitive Loss for (Dementia).</p> <p>Decision making is severely impaired. Team to anticipate her needs. Monitor for restlessness, agitation and other verbal and non-verbal expressions related to decisions you may be assisting with for success.</p> <p>Revision on: 07/23/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• ORIENTATION: Gently reorient to place and time as needed when Teresa is feeling lost or in confused state.</p> <p>Revision on: 11/26/2021</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• CUE TASKS: Break tasks into manageable subtasks, Teresa can comprehend and follow.</p> <p>Revision on: 04/30/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>		

Allergies	No Known Allergies	D.O.B.	03/10/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Congestive heart failure(I50.0), Polyp of colon(K63.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cascapera, Teresa (922131005439)	Admission Date	12/27/2023	Location	2 203 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Cognitive Limitation, Loss of Independence.</div> <div>ISE Score: 1/6</div> <div>Revision on: 10/07/2025</div> <div>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</div>	<div>• Team members will support Ivka in decreasing social isolation by participating in group and/or 1:1 activities of personal choice 10-20 times by the next review date.</div> <div>Revision on: 07/30/2024</div> <div>Revision by: Laura Morris (Restorative Care Aide)</div> <div>Target Date: 01/16/2026</div>	<div>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; friendly/1:1 visits, comedy corner, exercise groups, physical games, games - balloon paddles & trivia, Montessori fluff and fold, music appreciation, reading - short stories, reminiscing group,YouTube videos, spiritual programs, etc.</div> <div>Revision on: 10/07/2025</div> <div>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</div> <div>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities (may require set-up) such as visiting with residents/team members, listening to music (Johnny Cash, Western), watching/listening to TV, helping team members, folding laundry, cleaning/tidying room, etc.</div> <div>Revision on: 07/09/2025</div> <div>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</div> <div>• ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - cue and remind to attend programs on her floor, not recommended to attend main floor programs at this time as is exit seeking and doesn't want to go back to her floor afterwards,</div> <div>Revision on: 07/09/2025</div> <div>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</div> <div>• ONE to ONE: Provide her with individual visits for conversations, videos, doll therapy, chores of interest, electronic pet visits, music, etc.</div> <div>Revision on: 05/08/2023</div> <div>Revision by: Mitchell Atkinson (Recreation Aide)</div>	ACT			
<div>• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility)</div> <div>Revision on: 07/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>	<div>• Ivka will have regular soft formed bowel movements every 1-2 days through to the next review.</div> <div>Revision on: 07/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 01/16/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.</div> <div>• BOWEL PROTOCOL: In place as per MD order</div>	Registered Staff	Registered Staff		
<div>• Potential for Expressive Behaviour (Exit seeking, resisting care/meds/resists showers from the staff, pacing and</div>	<div>• To promote safety for Ivka and/or others during each episode of Expressive</div>	<div>• COMMUNICATION: Involve/collaborate with (Ivka)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</div>	BSO - Internal Social Worker			
Allergies	No Known Allergies	D.O.B.	11/01/1948	Physician	Albert Patrick Ng	
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Cesnik, Ivka (922131005330)	Admission Date	01/20/2020	Location	2 221 C	
Last Care Plan Review Completed:		10/16/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
wandering, hallucinations, delusions) related to adjustment to the new environment due to vascular dementia and schizophrenia. Revision on: 06/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	Behaviour through to the next review date. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) Target Date: 01/16/2026 • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be maintained to 0. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/16/2026	Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize the holistic perspective of continuous monitoring of Ivka for indications to change in or for escalating expressive behaviour risk. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of refusing medication as expression of behaviour include poor judgement, fearfulness, paranoid thought process. Ivka will refuse her IM medication for Schizophrenia. Continue to encourage resident to accept medication. Inform MD when resident refuses. Revision on: 06/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESISTANCE to Care Need: If Ivka is refusing to (bathe, change clothes, take medications) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • WANDERING: Permit Ivka to safely roam in common area. Redirect away from exit doors, elevator. Distraction with assisting with folding towels and setting tables for meals. Revision on: 02/19/2020 Revision by: Teresa Quinto (RPN) • DELUSION AND AUDITORY HALLUCINATIONS: She hears and believes that Archie Bunker is a real person that is living and that he is telling her that she should die. List to Ivka when she is expressing her concerns with Archie Bunker. Do not argue with her. Offer reassurance. Gently gather information from Ivka as to what she is being told from Archie Bunker.	Registered Practical Nurse RN		
Allergies	No Known Allergies	D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)	Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for Expressive Behaviour (Exit seeking, resisting care/meds/resists showers from the staff, pacing and wandering, hallucinations, delusions) related to adjustment to the new environment due to vascular dementia and schizophrenia. Revision on: 06/05/2025 Revision by: Danielle Loreto (RAI Coordinator)			Inform the MD/NP of delusions/Hallucination. Monitor for changes in her affect and behaviour as a result and risks of self harm. Report all changes in behaviours Revision on: 06/05/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential to experience alteration in MOOD as exhibited by (negative statements) related to cognitive loss Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To decrease the episodic frequency of (negative statements)by next review date. DRS score will be maintained to 0. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/16/2026	• RESIDENT STRENGTHS: Build on Ivka effort to maintain control. Encourage her to All express self, state preferences and make safe choices for care and activities. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Ivka is at high risk for ELOPEMENT related to elopement Revision on: 07/31/2024 Revision by: Katie Savo (RAI Coordinator)		• Ivka will remain safe within the home unless accompanied by staff or other authorized persons through next review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	• Assess/record/report to MD risk factors for potential elopement such as; wandering, repeated requests to leave the building, statements such as "I'm going home", attempts to leave, previous attempts • ELOPEMENT ALERT: Redirect Ivka away from elevator or exit doors as needed. Ensure area is safe and redirect as needed. Revision on: 10/31/2024 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies			D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)			Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Ivka is at high risk for ELOPEMENT related to elopement Revision on: 07/31/2024 Revision by: Katie Savo (RAI Coordinator)							
• Increased risk for FALLS related to HTN and Psychotropic drug use. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	• COMMUNICATION: Involve/collaborate with (Ivka)/SDM in decision making in fall prevention Plan of Care. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • ENVIRONMENT: Secure environment: reduce clutter to reduce fall risk for Ivka. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for ambulation Revision on: 07/07/2023 Revision by: Chelsea Campbell-Wright (ADOC) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)			PCA	D/E/N
• Nutrition Risk Level Revision on: 08/14/2023 Revision by: Helen Bradley (Dietitian)		• Ivka will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	• NUTRITION RISK: Ivka is moderate risk level. Revision on: 06/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Ivka will receive regular diet, regular texture. Revision on: 12/10/2020 Revision by: Anna Slack • FLUID CONSISTENCY: Ivka drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/15/2021			Dietitian (RD)	
Allergies	No Known Allergies		D.O.B.	11/01/1948	Physician	Albert Patrick Ng	
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Cesnik, Ivka (922131005330)		Admission Date	01/20/2020	Location	2 221 C	
Last Care Plan Review Completed:		10/16/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> • Nutrition Risk Level Revision on: 08/14/2023 Revision by: Helen Bradley (Dietitian)	<ul style="list-style-type: none"> • Will weigh within realistic weight range of 55-65 kg through to next review date. Revision on: 10/07/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/16/2026	Revision by: Olivia Kuhlmann (Dietetic Intern) <ul style="list-style-type: none"> • FLUID TARGET: Encourage Ivka to drink a minimum of 1500 ml/day Revision on: 10/07/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> • FOOD PREFERENCES: Offer peanut butter and jam sandwich at lunch if meal declined. Revision on: 08/14/2023 Revision by: Helen Bradley (Dietitian)	PCA	
	<ul style="list-style-type: none"> • Ivka will be adequately hydrated aeb drinking at least 99% of total fluid requirement: 1512 ml/day (25 ml/kg using 60.5 kg weight) through to next review date. Revision on: 10/07/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/16/2026		PCA	
<ul style="list-style-type: none"> • Potential for Acute PAIN and alteration in comfort level related to Dx with osteoarthritis, back pain. Most Current MDS Pain Score is (0) Revision on: 06/17/2021 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Ivka/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options.Explain her treatment before utilizing it. Revision on: 03/29/2024 Revision by: Ranjita Yadav (RPN)		
	<ul style="list-style-type: none"> • Promote MDS Pain Score of 0 through to the next review. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. 	RN Registered Practical Nurse	
		<ul style="list-style-type: none"> • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 06/17/2021 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN	

Allergies	No Known Allergies	D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)	Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025			

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Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Risk for/Impaired Skin Integrity r/t Thin fragile Skin, Dementia. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator) 	<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 	<ul style="list-style-type: none"> • SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. 	PCA		
<ul style="list-style-type: none"> • Altered VISION related to able to see large print, but not regular print. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator) 	<ul style="list-style-type: none"> • Ivka will have no s&s infection through the next review. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 	<ul style="list-style-type: none"> • READING: Ivka uses large print material to aid with reading. Revision on: 03/27/2020 Revision by: Qiufeng Liu (RPN/RAI back up) 	PCA		
<ul style="list-style-type: none"> • Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Vascular Dementia. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator) 	<ul style="list-style-type: none"> • Ivka will be supported to maintain current communication abilities to (express self, comprehend information)each day through to the review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 • Ivka will be able to make basic needs known each day through to the review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 	<ul style="list-style-type: none"> • PRIMARY LANGUAGE: Ivka primary language is English. She is (able to speak/understand) English. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed.Explain her any care or treatment before utilizing it. Revision on: 03/29/2024 Revision by: Ranjita Yadav (RPN) • INSTRUCTION GUIDANCE: Ivka needs (minimal) cueing or demonstrative instruction in tasks and activities. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) 			
<ul style="list-style-type: none"> • COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty 	<ul style="list-style-type: none"> • Ivka will be supported to make independent choice and safe decisions each day through to 	<ul style="list-style-type: none"> • ORIENTATION: Gently reorient to (place, time) as needed when Ivka is feeling lost or in confused state. Revision on: 10/25/2021 			
Allergies	No Known Allergies	D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)	Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025			

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Focus		Goal	Interventions			Position	Freq/Resolved
concentrating, poor judgment) related to Vascular Dementia. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator)		the review date. Current CPS is (3) Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	Revision by: Katie Wolters-Savo (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN)			PCA	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Vascular Dementia, Osteoarthritis and HTN. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator)		<ul style="list-style-type: none"> Ivka will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	<ul style="list-style-type: none"> BATHING: Ivka prefers (sponge bathing herself in her bathroom with staff to set her up with towels, clothes, etc.) on (Mondays and Thursdays evening shift). One staff SUPERVISION for bathing. Staff to offer Ivka to take to the shower.Nail care to be provided on shower/bath day. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> BED MOBILITY: Independent. Ivka is capable of turning and repositioning herself independently while in bed. Revision on: 04/21/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> DRESSING: Ivka dresses independently with cues and reminders. May require set up. PCA Ivka May require one team limited to extensive to assist when confused. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> EATING: Ivka is Independent, requires set up only. She eats in the Orchid lane dining room. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> LOCOMOTION: She is able to walk Independently. Supervision when off the home area. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> PERSONAL HYGIENE: Ivka requires the team to assist with setting her up with the necessary tools to wash her face, brush her teeth and brush her hair. She will PCA				
Allergies	No Known Allergies			D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)			Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025					

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Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Vascular Dementia, Osteoarthritis and HTN. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator)		otherwise complete hygiene tasks on her own. Revision on: 01/20/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> TOILET USE: Independent. Ivka is capable of transferring herself onto and off of the toilet independently. She may require 1 team member limited to extensive when confused. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> TRANSFERRING: Ivka is able to transfer herself from a sit to stand position without assistance or oversight from the team. Revision on: 01/21/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> ORAL CARE: Ivka is EDENTULOUS, and is able to wash her mouth independently. Doesn't wear dentures. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> FOOT CARE: PSW to complete toenail care on her bath days. Report long toe nails or other abnormalities as noted. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN)	PCA			
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Ivka Medical Treatment and End of Life Care. Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor Ivka expressed wishes and beliefs through to the End of Life. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	<ul style="list-style-type: none"> CPR: DO NOT ATTEMPT CPR: Do not transfer to hospital, plan includes death at home - see PoET Individualized Summary Revision on: 01/31/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"> BOWEL Continence - Ivka is continent and has self recognition of urge to defecate. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN)	<ul style="list-style-type: none"> Ivka to remain continent of bowels through next review date Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	<ul style="list-style-type: none"> BOWEL Continence level is CONTINENT. Report change to level as noted. SELF TOILETING: Ivka toilets self for bowel movements. Each shift ask if he/she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 03/05/2020	PCA PCA			
Allergies	No Known Allergies		D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)		Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		Revision by: Qiufeng Liu (RPN)			
<ul style="list-style-type: none"> • URINARY Continence - Ivka is continent and has self recognition of urge to void. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) 	<ul style="list-style-type: none"> • Ivka will maintain continence level through next review date Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 	<ul style="list-style-type: none"> • URINARY Continence Level is: Usually CONTINENT. Ivka has had episode of incontinence related to dribbling and prefers to wear a pullup daily. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • SELF TOILETING: Ivka toilets self. Each shift ask if she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) 	PCA		
<ul style="list-style-type: none"> • Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS 	<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to health status. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) 			
<ul style="list-style-type: none"> • Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension 	<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with HTN for changes to health status and alteration or complications affecting cardiac function. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) • BP MONITORING: Monitor BLOOD PRESSURE (monthly and as needed). Notify MD of abnormalities as needed. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) 			
<ul style="list-style-type: none"> • Potential to experience complications and side effects impacting quality of life related to use of (use of anti-psychotic medications, etc.) Revision on: 03/05/2020 	<ul style="list-style-type: none"> • To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 08/11/2023 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Ivka)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident 			
Allergies	No Known Allergies	D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)	Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025			

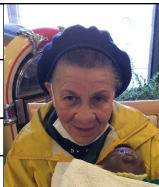
Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Qiufeng Liu (RPN)	Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	using (anti-psychotic medication) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff	
• Sleep Patterns; Potential for alteration in sleep patterns related to disease progression and cognitive decline. Revision on: 01/31/2020 Revision by: Meghan Sears (ADOC)	• To promote adequate rest/sleep for Ivka based on identified sleep patterns/preferences each night through to the next review date. Revision on: 07/18/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 01/16/2026	• REST PATTERN: Preferred bedtime, usual wake time: no specific time whenever she is tired. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN) • SLEEPWEAR: Ivka prefers to wear regular clothes. Revision on: 03/05/2020 Revision by: Qiufeng Liu (RPN)	PCA PCA	
• SPIRITUAL BELIEFS: Ivka is of the Catholic Faith. Revision on: 01/21/2020 Revision by: Mitchell Atkinson (Activities/Rec Therapy)	• To provide Ivka spiritual support as interested through to the next review date. Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/16/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including prayer circle, spiritual music, spiritual discussions, etc. Revision on: 05/01/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	ACT	

Allergies	No Known Allergies	D.O.B.	11/01/1948	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Schizophrenia, unspecified(F20.9), Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Cesnik, Ivka (922131005330)	Admission Date	01/20/2020	Location	2 221 C
Last Care Plan Review Completed:		10/16/2025			

Care Plan Report

Focus	Goal	Interventions				Position	Freq/Resolved
<div>• Increased risk for FALLS related to Dementia and postural hypotension, history of falls. Revision on: 11/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>	<div>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026</div>	<div>• COMMUNICATION: Involve/collaborate with Aszlrree/SDM in decision making in fall prevention Plan of Care. Revision on: 09/23/2024 Revision by: Maryola Perion (RN)</div> <div>• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 12/15/2023 Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• ADAPTIVE EQUIPMENT:Aszrlee has adaptive equipment:Portable wheelchair as needed with Nursing/PSW guidance and support. Revision on: 09/11/2025 Revision by: Teresa Quinto (RPN)</div> <div>• ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Aszlrree. Revision on: 09/23/2024 Revision by: Maryola Perion (RN)</div> <div>• BED: place bed in lowest position, use high/low bed, etc.) to lower risk for injury. Revision on: 11/08/2025 Revision by: Tola Omolade (ADOC)</div> <div>• FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 09/23/2024 Revision by: Maryola Perion (RN)</div> <div>• HIP PROTECTORS: Aszrlee wears hip protectors, at all times to safeguard against injury. Report to Registered Staff if not wearing as she often refuses them. Revision on: 02/19/2025 Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• SPECIAL CONSIDERATION to PREVENT FALLS: monitor resident whereabouts. Revision on: 09/02/2025 Revision by: Jane Del Rosario (RPN)</div> <div>• SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.</div>				PCA	D/E/N
<div>• Potential for Expressive Behaviour of (hx of WANDERING,ENTERING INTO OTHER RESIDENTS ROOMS,</div>	<div>• To promote safety for Aszrlee and/or others during each episode of Expressive</div>	<div>• COMMUNICATION: Involve/collaborate with Chase/SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</div>				BSO - Internal Social Worker	
Allergies	Ciprofloxacin, Penicillins		D.O.B.	09/07/1944	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Chase, Aszlrree (922131005547)		Admission Date	12/15/2023	Location	2 212 A	
Last Care Plan Review Completed:		11/28/2025					



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Focus	Goal	Interventions	Position	Freq/Resolved	
<p>RUMMAGING VERBAL, PHYSICAL (punching staff when care is provided), Delusions RESISTANCE to care need/meals/coming out of her room), anger towards roommate related to dx with Dementia.</p> <p>Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</p>	<p>Behaviour through to the next review date.</p> <p>Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026</p> <p>• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 3.</p> <p>Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026</p>	<p>Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk.</p> <p>• TRIGGERS leading to PHYSICAL (pushing, Punching, pulling, grabbing) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning, being redirected from areas that are not residents personal space e.g. when falling asleep in other residents beds, believing that someone elses belongs are hers. Anger with roommate)</p> <p>Revision on: 12/19/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Aszrlee is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Monitor interactions with other residents, try to redirect her from going into others spaces, Seek Registered Staff assistance.</p> <p>Revision on: 12/09/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (yelling) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.)</p> <p>Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• VERBAL Behaviour: If Aszrlee is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</p> <p>Revision on: 12/15/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, medication, to eat, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</p> <p>Revision on: 09/23/2024 Revision by: Maryola Perion (RN)</p>	Registered Staff		
Allergies	Ciprofloxacin, Penicillins	D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)	Admission Date	12/15/2023	Location	2 212 A
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (hx of WANDERING, ENTERING INTO OTHER RESIDENTS ROOMS, RUMMAGING VERBAL, PHYSICAL (punching staff when care is provided), Delusions RESISTANCE to care need/meals/coming out of her room), anger towards roommate related to dx with Dementia.</p> <p>Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</p>		<p>• RESISTANCE to Care Need: If Aszrlee declining to (refusing to change clothing, refusal to bathe, medication, to eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 09/23/2024 Revision by: Maryola Perion (RN)</p> <p>• WANDERING: Permit Aszrlee to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 11/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</p> <p>Revision on: 09/23/2024 Revision by: Maryola Perion (RN)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction Refusing care: Refusing to change clothes, care, eat Triggers: Confusion, misunderstanding care needs, misunderstanding care intentions Use Stop and go approach. Reapproach when the resident is calm/ready. The resident likes to eat in her room and may do better with finger foods. Wandering: Wandering through halls and into rooms Triggers: Not sleeping well at night, confusion Recommendations: The resident likes to be social, enjoys music, holding her baby doll and hand massages/manicures. These activities may help with the resident's wandering. Sleep: May prefer to sleep on the couch in the hallway. Allow her to sleep on the couch as waking her can be a trigger.</p> <p>Revision on: 12/10/2025 Revision by: Leslie Meloche (Recreation Aide)</p>	Registered Practical Nurse RN		
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to disinterest.</p> <p>ISE Score: 6/6 Revision on: 08/19/2025 Revision by: Hannelore (Hannah) Steinke-</p>	<p>• Team members will support Lee in decreasing social isolation by participating in activities of personal choice for 10-15 times per month by the next review date.</p> <p>Revision on: 08/19/2025</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; friendly/1:1 visits, music programs, happy hour, special events, hymn sing, manicures and hand massage etc.</p> <p>Revision on: 05/27/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities listening to music/radio, visiting with residents/team members, doll therapy etc.</p>			
Allergies	Ciprofloxacin, Penicillins	D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)	Admission Date	12/15/2023	Location	2 212 A
Last Care Plan Review Completed:		11/28/2025			

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Nelson (Recreation Aide)	Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/28/2026	Revision on: 05/27/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide her with individual visits for conversation, reminiscing, music, humor, etc. Revision on: 05/27/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SOCIAL INTERACTION: Promote the opportunity for Lee to make friendships and sit with friends during activities. Revision on: 01/22/2024 Revision by: Mitchell Atkinson (Recreation Aide)			
• Sleep Patterns; Potential for alteration in sleep patterns related to cognitive loss, restless at night. Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Chase based on identified sleep patterns/preferences each night through to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• REST PATTERN: Preferred bedtime 2000, usual wake time 0700 and takes daytime naps whenever she is tired. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)	PCA		
• Potential to experience alteration in MOOD as exhibited by FRUSTRATIONS, ANXIOUSNESS, ANGER, RESTLESSNESS Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Aszrlee will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Aszrlee for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 12/24/2024 Revision by: Danielle Loreto (RAI Coordinator) • DISTRACTION ACTIVITIES: (Resident's Name) can be calmed doing activities of interest including (listening to music, doing puzzles, watching movies, COLOURING etc.) Revision on: 12/24/2024 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential for PAIN and alteration in comfort level related to Dementia, left wrist pain. Most Current Pain Score is 0/3. Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 03/18/2025	• COMMUNICATION: Involve/collaborate with (Aszrlee)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 09/23/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of	RN		
Allergies	Ciprofloxacin, Penicillins	D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)	Admission Date	12/15/2023	Location	2 212 A
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		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 09/23/2024 Revision by: Maryola Perion (RN)		Registered Practical Nurse Registered Practical Nurse RN	
• Potential to experience REACTIONS related to ALLERGY of Penicillin and Ciprofloxacin. Revision on: 03/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Aszrlee will be protected from exposure to allergen each day through the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Aszrlee)/SDM in decision making and health teaching about ALLERGY to Penicillin and Ciprofloxacin. Revision on: 09/23/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status and complications. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • ALLERGY ALERT: Aszrlee has ALLERGY to Penicillin and Ciprofloxacin. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 09/23/2024 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Aszrlee Allergy to Penicillin and Ciprofloxacin and minimize risk for exposure to allergen. Revision on: 12/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy and antidepressant use. Revision on: 12/24/2024 Revision by: Danielle Loreto (RAI Coordinator)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Chase)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using poly-pharmacy for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and		Registered	
Allergies	Ciprofloxacin, Penicillins		D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)		Admission Date	12/15/2023	Location	2 212 A
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		as needed.	Staff		
<ul style="list-style-type: none">• Nutrition: Chewing difficulty related to refusing to use her dentures. Dentures have been taken home with the POA. Revision on: 11/11/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• To maintain safe chewing through to next review date Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026• To obtain or maintain adequate intake to meet estimated nutritional requirements through to next review date Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none">• Provide diet/texture interventions as per Nutrition Risk Level• Monitor Aszrlee to eat slowly and to swallow before next bite or drink. Monitor tolerance to diet and report any changes in chewing and swallowing. Revision on: 11/11/2024 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none">• URINARY (Mixed) INCONTINENCE related to Dementia. Revision on: 09/23/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Aszrlee will have urinary incontinence managed every shift through to the next review period. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 11/28/2025 Revision by: Danielle Loreto (RAI Coordinator)• URINARY Continence level is occasionally to frequently incontinent. Report change PCA to level as noted. Revision on: 11/28/2025 Revision by: Danielle Loreto (RAI Coordinator)• INCONTINENCE PRODUCT: Resident wears XL pull ups daily Revision on: 11/12/2024 Revision by: Idylle Labrado (RPN)	PCA		
<ul style="list-style-type: none">• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, etc. related to Hard of hearing and Dx of Dementia Revision on: 09/23/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Aszrlee will be supported to maintain current communication abilities to express self, comprehend information, etc. each day through to the review date.	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Chase/SDM for decision making about strategies needed to support effective communication. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)• PRIMARY LANGUAGE: Aszrlee primary language is English. she is able to speak/understand English.			
Allergies	Ciprofloxacin, Penicillins	D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)	Admission Date	12/15/2023	Location	2 212 A
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		Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026 • Aszlrlee will be supported to make basic needs known each day through to the review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	Revision on: 12/15/2023 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 12/15/2023 Revision by: Jenny Liu (RAI Coord Back-up) • INSTRUCTION GUIDANCE: Aszlrlee needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 03/05/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Expressed Wishes and Beliefs related to Aszlrlee Medical Treatment and End of Life Care Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)		• To support and honor Aszlrlee expressed wishes and beliefs through to the End of Life. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• CPR: Aszlrlee wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 11/17/2025 Revision by: Maryola Perion (RN)			
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, and postural hypotension. Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)		• Chase will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026 • Chase will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through	• BATHING: Aszlrlee prefers (shower/bath) on (Tuesday and Friday Evening shift). Resident participates by (transferring herself in the shower chair). One staff (LIMITED to EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. 1 Team member extensive assistance with sponge or bed bath when resident refuses. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Aszlrlee is able to turn and reposition herself in bed without any assistance from staff. Revision on: 12/15/2023 Revision by: Jenny Liu (RAI Coord Back-up) • DRESSING: Aszlrlee requires extensive assistance from 1 team member to		PCA	
Allergies	Ciprofloxacin, Penicillins		D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Chase, Aszlrlee (922131005547)		Admission Date	12/15/2023	Location	2 212 A
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		to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	undress/dress her up Revision on: 12/24/2024 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Aszrlee is able to eat by herself once set up by staff. The team encourages her to eat in the floor 2 dining room though she often prefers to eat in her room. PCA				
			May requires supervision and cues as she may wander away at meals. Revision on: 08/26/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Aszrlee is able to ambulate independent on the home area and with supervision when off the home area. PCA				
			May require one staff limited assistance at times. Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL HYGIENE: Aszrlee is able to wash her hand, face, comb her hair. Requires one team member to extensive assistance. Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 12/15/2023 Revision by: Jenny Liu (RAI Coord Back-up) • TOILET USE: Aszrlee is able to go on/off the toilet herself, able to cleanse herself and adjust her clothes after. PCA				
			May require 1 team member to provide assistance with peri-care and adjust clothing. Varies if resident has been incontinent. Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFERRING: Aszrlee is able to transfer herself between surfaces without any assistive device or staff. May require one staff assistance at times. Revision on: 09/23/2024 Revision by: Maryola Perion (RN) PCA				
Allergies	Ciprofloxacin, Penicillins			D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)			Admission Date	12/15/2023	Location	2 212 A
Last Care Plan Review Completed:		11/28/2025					

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• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, and postural hypotension. Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)			• ORAL CARE: Aszrlee has own lower teeth. Team to assist with brushing her teeth. PCA Upper denture given to the POA on 11/8/24 Revision on: 11/09/2024 Revision by: Maryola Perion (RN)				
• COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, altered judgement, etc. related to progression of Dementia Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)		• Aszrlee will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3/6. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• ORIENTATION: Gently reorient to person,place and time as needed when Chase feeling lost or in confused state. Revision on: 12/24/2024 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 09/23/2024 Revision by: Maryola Perion (RN) • CUE TASKS: Break tasks into manageable subtasks, Aszrlee can comprehend and follow Revision on: 03/05/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• Chase is at high risk for ELOPEMENT related to exit seeking and wandering. Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)		• To promote Chase safety and minimize risk for episode of elopement each day through next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI	• ALERT: Chase has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • ELOPEMENT ALERT: Redirect Chase away from elevator or exit doors as needed. PCA				
Allergies	Ciprofloxacin, Penicillins		D.O.B.	09/07/1944		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)		Admission Date	12/15/2023		Location	2 212 A
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	Coordinator) Target Date: 02/28/2026	Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)			
• Altered VISION related to aging Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)	• Chase supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• EYEGLASSES: Chase wears eyeglasses. Assist to clean eyeglasses as needed and store (on night table, in night table drawer, etc.) when sleeping. Will refuse to wear glasses. Reading vision in question but resident can identify objects and safety get about. Monitor for changes. Revision on: 06/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• Risk for Impaired SKIN INTEGRITY related to dx with Dementia and postural hypotension. Revision on: 09/20/2024 Revision by: Shina Wadhwa (Physical Therapist)	• To protect and maintain skin integrity each day through to the next review. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.	PCA		
• Potential for CONSTIPATION related to decreased mobility Revision on: 03/18/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To minimize the potential for episodes and complications of constipation through to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Aszrlee/SDM) for decision making regarding constipation management. Revision on: 09/23/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order	Registered Staff Registered Staff Registered Staff		
• SPIRITUAL BELIEFS: Aszrlee is of the Methodist Faith.	• To provide Lee spiritual support as interested through to	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including; Spiritual discussion, spiritual music, hymn sing etc.			
Allergies	Ciprofloxacin, Penicillins	D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
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Revision on: 01/22/2024 Revision by: Mitchell Atkinson (Recreation Aide)		the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	Revision on: 05/27/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• BOWEL Continence -Chase is continent and has self recognition of urge to defecate. Revision on: 12/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)		• Aszrlee to remain continent of bowels through next review date Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• BOWEL Continence level is usually CONTINENT. Report change to level as noted. PCA Revision on: 06/25/2024 Revision by: Katie Savo (RAI Coordinator) • SELF TOILETING: Chase toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. PCA She cannot recall if she had a bowel movement. Team to perform bowel assessment as needed. May require 1 team member to provide limited to extensive assistance with toileting when incontinent. Revision on: 08/26/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypotension		• To treat and minimize signs/symptoms or complications associated with Postural hypotension through to the next review date. Revision on: 03/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with Chase/SDM in decision making of Cardiac Care Management for Hypotension. Revision on: 12/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Specify cardiac condition) for changes to health status and alteration or complications affecting cardiac function. Registered Staff				
• Nutrition Risk Level		• Aszrlee will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 03/18/2025	• LABELLED SNACK PM: vanilla ice cream and assorted minced fruit daily for bowel health PCA Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) Registered Practical Nurse RN				
Allergies	Ciprofloxacin, Penicillins			D.O.B.	09/07/1944	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Orthostatic hypotension(I95.1)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Chase, Aszrlee (922131005547)			Admission Date	12/15/2023	Location	2 212 A
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	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026 • Will weigh within GWR 65-70 kg through to next review date. Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/28/2026 • Aszrlee will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1668 ml/day (25 ml/kg using 66.7 kg weight) through to next review date. Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/28/2026	• NUTRITION RISK: Aszrlee is moderate risk level. Revision on: 12/21/2023 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: Aszrlee will receive regular diet, minced texture Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Aszrlee drinks REGULAR/THIN Level 0 Fluids. Revision on: 12/15/2023 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Aszrlee to drink a minimum of 1334 ml/day Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • DINING INSTRUCTIONS: Include 1 bowl of oatmeal or cream of wheat at breakfast daily for bowel health Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH FIBRE: Offer fruit rite to spread on toast at breakfast daily Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD))	Dietitian (RD) PCA PCA PCA Dietary aide PCA Registered Practical Nurse PCA	

Allergies	Ciprofloxacin, Penicillins	D.O.B.	09/07/1944	Physician	Albert Patrick Ng
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Focus		Goal	Interventions			Position	Freq/Resolved
• Gait and Transfer Training Revision on: 12/05/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Reduce fall risk from high to low in next 3 months; Revision on: 12/05/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/20/2026	• 1:1 Gait Training with RW, cue for proper use of RW and brakes; Distance as best; 2-3 x a week; Revision on: 12/05/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• Alteration in skin integrity with risk for infection or complications related abrasion to right dorsum Revision on: 12/02/2025 Revision by: Haley Barisic (Quality Improvement Coordinator)		• To promote optimal healing of SKIN TEAR within 2 weeks of the date of occurrence with no complications Revision on: 12/02/2025 Revision by: Haley Barisic (Quality Improvement Coordinator) Target Date: 12/14/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to right dorsum for changes to health status and alteration or complications affecting skin integrity. Revision on: 12/02/2025 Revision by: Haley Barisic (Quality Improvement Coordinator) • TREATMENT PLAN: Administer treatment for SKIN TEAR to right dorsum as per MD Order. Revision on: 12/02/2025 Revision by: Haley Barisic (Quality Improvement Coordinator) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 12/02/2025 Revision by: Haley Barisic (Quality Improvement Coordinator)				
• STRONG PARTICIPATION in Activities. ISE Score: 4/6 Revision on: 11/13/2025 Revision by: Laura Morris (Restorative Care Aide)		• Richard will be supported to maintain participation in activities 20-30 times per month by the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; friendly/1:1 visits, comedy corner, discussion group, physical games, trivia, music programs, patio time, outdoor programs, reminiscing groups, special events, TV/movie - Arm Chair Travel, etc. Revision on: 05/13/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as smoking on the patio, watching/listening to TV, listening to music, visiting with residents/team members, family/friend visits, helping team members, patio socializing/enjoying outdoors, etc. Revision on: 05/28/2020 Revision by: Shayna Lee Wonsch (Activation Manager) • ASSISTANCE: Provide assistance/encouragement to get him to scheduled activities - Accompany off home area, Walk with, Guide to, Cue Direction,			ACT	
Allergies	Penicillins		D.O.B.	11/08/1961	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication (E13.9), Human immunodef...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Churchill, Richard (922131008008)		Admission Date	03/09/2018	Location	2 218 B	
Last Care Plan Review Completed:		11/20/2025					



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Focus		Goal	Interventions		Position	Freq/Resolved
• STRONG PARTICIPATION in Activities. ISE Score: 4/6 Revision on: 11/13/2025 Revision by: Laura Morris (Restorative Care Aide)			Reminders, etc. Revision on: 05/28/2020 Revision by: Shayna Lee Wonsch (Activation Manager) • HELPFUL HINTS: Identify Helpful Hints to ease communication while providing care/interactions for topics of interest such as sports (Amy Grant hockey) Music (70-80s, Journey, CCR, Back Street boys) enjoys conversation about food, NASA & tropical storms. Revision on: 05/13/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation (sports, family, food), reminiscing, music, humour, etc. Revision on: 05/02/2022 Revision by: Mitchell Atkinson (Recreation Aide) • FAMILY INVOLVEMENT: Moderate. Revision on: 05/28/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		ACT 	

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Focus		Goal	Interventions			Position	Freq/Resolved
• Increased risk for FALLS related to history of falls, use of antipsychotic medication, tremor gait. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator)			Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) • SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.			Registered Staff	
• Risk for/Impaired Skin Integrity r/t Stroke, Anxiety, DM, Depression/Paranoid, HIV, Hx of secondary Syphilis and GERD, jaundice intermittently. Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.			PCA	
• Potential for Acute PAIN and alteration in comfort level related to Stroke, GERD, intermittent back pain, intermittent right shoulder pain. Most Current MDS Pain Score is (0/3). Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)		• Promote MDS Pain Score of 0 through to the next review. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• COMMUNICATION: Involve/collaborate with Richard)/(SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 12/11/2019 Revision by: Qiufeng Liu (Registered Practical Nurse) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.			Registered Staff RN Registered Practical Nurse Registered Practical Nurse RN	
• Behaviour problem Potential for		• Richard will be supported to	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Richard				
Allergies	Penicillins		D.O.B.	11/08/1961	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency virus infection, unspecified stage(Z22.0), See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Churchill, Richard (922131008008)		Admission Date	03/09/2018	Location	2 218 B	
Last Care Plan Review Completed:		11/20/2025					

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Focus	Goal	Interventions	Position	Freq/Resolved
Expressive Behaviour of (Hx of resist care. Resistive to changing out of dirty clothing, refuses breakfast) r/t Dx of anxiety disorder and Depressive/Paranoid. Revision on: 06/08/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	maintain behavior stability as evidenced by ABS score at a range of 0-2 by the review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	for indications to change in or for escalating expressive behaviour risk. Revision on: 03/10/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • RESISTANCE to Care Need: If Richard is refusing to eat- re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 06/08/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) • HALLUCINATION: (will be seen talking to someone, laughing out loud with no known trigger) Team to monitor his affect. Monitor for interruptions in his daily functioning. Do not argue with resident. Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)	Registered Practical Nurse RN Registered Practical Nurse RN	
• Potential to experience alteration in MOOD as exhibited by (repetitive physical movements/paces and repetitive questions) related to anxiety disorder and Depressive/Paranoid. Revision on: 07/25/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Richard will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Richard for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 05/06/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 05/06/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	Registered Staff Registered Staff	
• Richard is at high risk for elopement related to Exit seeking. Revision on: 12/07/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Richard will remain safe within the home unless accompanied by staff or other authorized persons through next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Assess/record/report to MD risk factors for potential elopement such as; wandering, repeated requests to leave the building, statements such as "I'm going home", attempts to leave, previous attempts • Ensure area is safe and redirect as needed.	Registered Staff PCA	
Allergies	Penicillins	D.O.B.	11/08/1961	Physician Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre	Print Date	12/11/2025	
Resident	Churchill, Richard (922131008008)	Admission Date	03/09/2018	Location 2 218 B
Last Care Plan Review Completed:		11/20/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Coordinator) Target Date: 02/20/2026				
<ul style="list-style-type: none"> Advanced Wishes and Beliefs related End of Life Revision on: 12/07/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Support Resident in expressing advanced wishes and beliefs related to End of Life. Honor/follow Resident expressed wishes and beliefs. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	<ul style="list-style-type: none"> Richards expressed wishes are: Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 02/23/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (memory loss, poor judgment) related to cognitive decline. Revision on: 05/28/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		<ul style="list-style-type: none"> Richard will maintain current cognitive abilities through the review date. Current CPS is 3/6. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when (Richard) is feeling lost or in confused state. Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension.) related to cognitive decline. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)		<ul style="list-style-type: none"> Richard will continue to freely express self and adequately comprehend information each day through to the next review period. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Richard primary language is English. He is able to speak/understand English. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			
		<ul style="list-style-type: none"> Richard will be able to make basic needs known each day 	<ul style="list-style-type: none"> SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed and ensure understanding. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			
Allergies	Penicillins		D.O.B.	11/08/1961	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency virus infection, unspecified (Z21) See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)		Admission Date	03/09/2018	Location	2 218 B
Last Care Plan Review Completed:		11/20/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none">Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension.) related to cognitive decline. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)	through to the review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026				
<ul style="list-style-type: none">Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA)	<ul style="list-style-type: none">To treat and minimize signs/symptoms or complications associated with (specify Etiology or diagnosis) through to the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	<ul style="list-style-type: none">MEDICATION: Administer medication as per MD order. Monitor effectiveness and for side effects. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) <ul style="list-style-type: none">MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status and alteration or complications affecting neurological function. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			
<ul style="list-style-type: none">Potential to experience (rash, hives, anaphylaxis.) related to ALLERGY of Penicillins. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)	<ul style="list-style-type: none">Richard will be protected from exposure to allergen each day through next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	<ul style="list-style-type: none">ALLERGY ALERT: Richard has ALLERGY to Penicillin. Prevent contact with and report if noted to experience symptoms (Specify; rash, hives, swelling, difficulty breathing, etc.). Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) <ul style="list-style-type: none">MD/PHARMACY ALERT: Notify the MD and Pharmacy of Richard Allergy and minimize risk for exposure to allergen. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			
<ul style="list-style-type: none">SPIRITUAL BELIEFS: Richard is of the Christian Faith. Revision on: 11/27/2019 Revision by: Hannelore Steinke-Nelson (Activation aide)	<ul style="list-style-type: none">To provide Richard spiritual support as interested through to the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">SPIRITUAL PROGRAMS: Encourage him to attend spiritual programs of his choice ACT including church service (Parkwood, Heritage Park), spiritual music, etc. Revision on: 07/18/2022 Revision by: Mitchell Atkinson (Recreation Aide)			
Allergies	Penicillins	D.O.B.	11/08/1961	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency virus infection and acquired immunodeficiency syndrome (HIV infection) (B20), See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)	Admission Date	03/09/2018	Location	2 218 B
Last Care Plan Review Completed:		11/20/2025			

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Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 02/20/2026				
• Bladder Continent. Revision on: 03/31/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)		• Richard will maintain continence level through next review date Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• URINARY Continence Level is: CONTINENT • SELF TOILETING: Richard toilets self. Each shift ask if he has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. will notify staff of any changes in continence level or output (eg s/sx infection, episodes of incontinence) Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)		PCA	
• Activities of Daily Living, self care r/t Stroke, DM, Anxiety, Depressive/Paranoid, HIV, Hx of secondary syphilis and GERD. Revision on: 03/31/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)		• Richard will have ALL ADL care tasks met each day through the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• BATHING: Richard prefers (shower,) on (Mondays and Fridays Evening shift). Richard participates by (transferring himself to the shower chair). One staff (SUPERVISION and set up) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Independent. Richard is capable of turning and repositioning himself independently when in bed without assistance or oversight from the team. Revision on: 02/23/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • DRESSING: Richard is independent with dressing upper and lower body. Richard requires the team to encouraging him to change out of his existing clothing into new clothing. He is capable of independently dressing himself once cued to do so. Richard has refused to change out of his old clothing. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Independent and Richard eats on the floor dining room. Richard is capable of eating independently without assistance from the team. Revision on: 02/23/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		PCA	
Allergies	Penicillins		D.O.B.	11/08/1961	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency virus infection, unspecified stage(Z22.82), See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)		Admission Date	03/09/2018	Location	2 218 B
Last Care Plan Review Completed:		11/20/2025				

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Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Activities of Daily Living, self care r/t Stroke, DM, Anxiety, Depressive/Paranoid, HIV, Hx of secondary syphilis and GERD. Revision on: 03/31/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)			<ul style="list-style-type: none">LOCOMOTION: Resident on a secured home area. He is independent with his walking with no gait aid.			PCA	
			Supervision when not on home area required. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none">PERSONAL HYGIENE: Richard is capable of brushing his own teeth, washing his own face. Set Up as needed.			PCA	
			Richard is capable of shaving his face once provided his shaver and shaving cream. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none">TOILET USE: Independent. Richard is capable of transferring himself onto and off of the toilet and is capable of adjusting his clothing independently without oversight from the team.			PCA	
			Revision on: 02/23/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
			<ul style="list-style-type: none">TRANSFERRING:Independent. Richard is capable of transferring himself form a sit to stand position without assistance or oversight from the team.			PCA	
			Revision on: 02/23/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
			<ul style="list-style-type: none">ORAL CARE: Set up help only, own teeth. Richard is capable of brushing his teeth independently once he is set up with his tooth brush and tooth paste.			PCA	
			Revision on: 02/23/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
			<ul style="list-style-type: none">FOOT CARE: HCA			PCA	
			Revision on: 04/01/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)			Registered Staff	
<ul style="list-style-type: none">Sleep Patterns for Richard. Revision on: 03/31/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)		<ul style="list-style-type: none">To promote adequate rest/sleep for Richard based on identified sleep patterns/preferences each night through to the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI	<ul style="list-style-type: none">REST PATTERN: Preferred bedtime 23:00, usual wake time 06:30. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			PCA	
			<ul style="list-style-type: none">SLEEPWEAR: Richard prefers to wear own PJ Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			PCA	
Allergies	Penicillins		D.O.B.	11/08/1961		Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodef...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)		Admission Date	03/09/2018		Location	2 218 B
Last Care Plan Review Completed:		11/20/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Coordinator) Target Date: 02/20/2026				
• Richard has potential for complications, discomfort, related to Dx of GERD Revision on: 03/31/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) • POSITIONING: Encourage resident to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) • MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)	PCA		
• Bowel Continent	• Richard to remain continent of bowels through next review date Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Richard toilets self for bowel movements. Each shift ask if he had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)	PCA PCA		
• Potential for hyper/hypoglycemia, other complications related to Diabetes Mellitus.	• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) • MEDICATION: Administer medication (specify ORAL ANTIHYPERGLYCEMIC medication and/or INSULIN) for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up)			
• Alteration in immune status related to Richard testing positive for HIV. Revision on: 03/20/2018	• To lower risk of infection and prevent transmission of identified Antibiotic Resistant	• COMMUNICATION: Involve/collaborate with Richard/SDM) with decision making for Antibiotic Resistant Organism treatment plan and update accordingly. Revision on: 03/28/2020			
Allergies	Penicillins	D.O.B.	11/08/1961	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodef...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)	Admission Date	03/09/2018	Location	2 218 B
Last Care Plan Review Completed:		11/20/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Maryola Perion (Registered Nurse)		Organism through to the next review. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	Revision by: Qiufeng Liu (RPN/RAI back up) • Follow all universal precautions as relate to HIV. Revision on: 03/20/2018 Revision by: Maryola Perion (Registered Nurse) • PPE PRECAUTIONS: Precaution identified as (CONTACT) for HIV and requires use of the following PPEs (Gloves) when providing direct care, handling soiled clothes and linens. Revision on: 07/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			Personal Support Workers	
• Nutrition Risk Level (diet details)		• Richard will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026 • Will weigh within Realistic weight range of 100-105 kg through to next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026 • Richard will be adequately hydrated aeb drinking at least up to 1500mL per day due to a fluid restriction Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• NUTRITION RISK: Richard is moderate risk level. Revision on: 02/23/2021 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: Richard will receive regular diet, regular texture. Revision on: 11/24/2020 Revision by: Anna Slack • FLUID CONSISTENCY: Richard drinks REGULAR/THIN Level 0 Fluids. 1500cc fluid restriction. Revision on: 12/16/2022 Revision by: Teresa Quinto (RPN) • FLUID TARGET: Encourage Richard to drink no more than 1500mL fluids per day due to a fluid restriction. Breakfast: does not usually eat breakfast AM: Total 200mL Lunch: Total 400mL PM: Total 200mL Supper: Total 300mL HS: Total 200mL			Dietitian (RD) Dietary Manager Diet Food Services Aide PCA Diet PCA Diet PCA	
Allergies	Penicillins		D.O.B.	11/08/1961	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodef...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Churchill, Richard (922131008008)		Admission Date	03/09/2018	Location	2 218 B	
Last Care Plan Review Completed:		11/20/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details)	• Will meet estimated nutritional requirements of 2478-2973 kcal @ 25-30 kcal/kg, 99g protein @ 1g/kg through to next review date. Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	50mL fluid with each Medpass 0800,1200,1600, 2000 Please monitor and ensure he is not drinking excessive fluids from the tap Revision on: 12/19/2022 Revision by: Anna Slack (Registered Dietitian) • DINING INSTRUCTIONS: Ok to have seconds at meals when he requests Revision on: 07/05/2022 Revision by: Anna Slack (Registered Dietitian)	Diet Food Services Aide Personal Support Workers Registered Practical Nurse	
• Richard has potential for safety hazard, injury related to smoking Revision on: 03/11/2018 Revision by: Maryola Perion (Registered Nurse)	• Richard will be safe when choosing to smoke through to the next review Revision on: 03/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/20/2026	• COMMUNICATION: Involve Richard/SDM in review of smoking legislation (No smoking inside the home or within 9 meters from any doorway) and identify the designated area/s where smoking is permitted. Revision on: 03/28/2020 Revision by: Qiufeng Liu (RPN/RAI back up) • STORAGE: Smoking materials to be appropriately stored by Nurse and Richard to return cigarettes/lighter/matches after each smoke break. Richard has a total of 6 cigarettes per day Revision on: 11/05/2021 Revision by: Haley Cadarian (Quality Lead)	Social Worker Clerk	

Allergies	Penicillins	D.O.B.	11/08/1961	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)	Admission Date	03/09/2018	Location	2 218 B
Last Care Plan Review Completed:		11/20/2025			

Care Plan Report

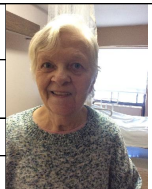
Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodeficiency virus [HIV] disease(B24), Anxiety disorder, unspecified(F41.9), Other secondary syphilis(A51.4), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Primary generalized (osteo)arthrosis(M15.0), Schizophrenia, unspecified(F20.9)

Allergies	Penicillins	D.O.B.	11/08/1961	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Schizoaffective disorder, unspecified(F25.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Human immunodef...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Churchill, Richard (922131008008)	Admission Date	03/09/2018	Location	2 218 B
Last Care Plan Review Completed:		11/20/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of yelling at roommate, not allowing roommate into room, rummaging through roommates belongings to care need nature related to Alzheimer's Dementia, anxiety, bipolar.</p> <p>Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• Harriette will be supported to adjust to her new environment to lower risk of triggering VERBALLY inappropriate and socially inappropriate episodes through to the next review.</p> <p>Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026</p>	<p>• TRIGGERS leading to PHYSICAL (grabbing) as expression of behaviour include (entering into other rooms, taking others belongings, or others taking her eblongs)</p> <p>Revision on: 12/09/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: Separate from other residents if the other residents are triggering her.</p> <p>Escort her from other residents personal spaces.</p> <p>Try to engage her in something else such as an activity, colouring, watching TV, helping with folding items etc</p> <p>Revision on: 12/09/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL yelling, screaming, calling names, etc. as expression of behaviour include loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.</p> <p>Revision on: 01/15/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Harriette is heard yelling, swearing or calling others names; All calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</p> <p>Revision on: 01/15/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Harriette is refusing to bathe, change clothes, take All medications, eat, etc. re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate rummaging through roommates room/belongings as expression of behaviour include confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.</p> <p>Revision on: 01/15/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: If Harriette is noted to be rummaging through her roommates items, slamming doors, removing her remote control telling staff she</p>			
Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential for Expressive Behaviour of yelling at roommate, not allowing roommate into room, rummaging through roommates belongings to care need nature related to Alzheimer's Dementia, anxiety, bipolar. Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)		does not need it, removing her cover of her mattress and bringing it to the dining room as well as bed sheet, moving her furniture, throwing her clothes in the garbage. Try to engage her in an activity. If not able to redirect ensure safety and reapproach in 10-15 minutes. Monitor garbage for her personal items. Revision on: 05/14/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> WANDERING AND PACING: Permit Harriette to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> Paranoia behaviours: when hearing other residents and staff talking thinking she is being talked about and this gets her agitated. Team to provide reassurance. Offer to engage in an activity to try and distract. Delusions: Resident carries has ID with her at all times as she feels she has to show and prove hr identity. She will show it to you for meals and such. Allow resident to show her ID to avoid triggering her. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Practical Nurse RN		
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in sleep patterns related to insomnia at times or difficulty falling a sleep at times. Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To promote adequate sleep for Harriette based on identified sleep pattern through to the next review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	<ul style="list-style-type: none"> REST PATTERN: Harriette does not have a preferred wake time or bedtime. She has insomnia and wakes frequently during the night to use the bathroom. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level related to deltoid shoulder 	<ul style="list-style-type: none"> Promote MDS Pain Score of 0 through to the next review. Revision on: 01/16/2025	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. 	RN Registered Practical		
Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
pain, Gout, impaired mobility, HTN, Alzheimer's, soft mass on the rt shoulder, Bursitis and Tenosynovitis of biceps tendon, rotator cuff tears (partial) , Rt. hand a intermittent numbness. Most Current LTCF Pain Score is 1/4. Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		Nurse Registered Practical Nurse RN	
• Risk for Impaired SKIN INTEGRITY related to incontinence, Alzheimer's Dementia, soft mass on the rt shoulder, dry hands, Right knee swelling. Revision on: 11/27/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.		PCA	
• Alteration in skin integrity related to BRUISE to Face Revision on: 11/26/2025 Revision by: Rana Maghnieh (RPN)		• To promote intact skin integrity through healing of BRUISE Revision on: 11/26/2025 Revision by: Rana Maghnieh (RPN) Target Date: 03/03/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with BRUISE to face for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/26/2025 Revision by: Rana Maghnieh (RPN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 11/26/2025 Revision by: Rana Maghnieh (RPN)			
• Individualized Fall Prevention and Injury Reduction Plan		• To decrease the number of falls for throughout this review period. Target Date: 03/03/2026				
Allergies	Penicillin		D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of compl...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)		Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<div>• Increased risk for FALLS related to history of falls, unsteady gait. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026</div>	<div>• PURPOSEFUL ROUNDING: Conduct purposeful rounding every hour during the day and evening and every 2 hours overnight to assess resident's needs; for pain, positioning, peri-needs or possessions for safety.</div> <div>• CALL BELL: Place call bell within Harriette's reach check that it is in working order and remind/encourage to use it. Revision on: 11/15/2025 Revision by: Tola Omolade (ADOC)</div> <div>• ENVIRONMENT: Ensure Harriette's environment is clean and clear of clutter. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• FOOTWEAR: Ensure Harriette is wearing appropriate footwear at all times. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program 3-5x/week. AROM exercises 5-10 reps/xcise, Strengthening- with minimal weights 5-10 reps/xcise, squats, sit to stands 5-10 reps/xcise, Sitting balance- reaching and perturbations 5-10 reps, participates with group exs classes-3x week Revision on: 08/29/2025 Revision by: Courtney Cipparone (PT - Physiotherapist)</div>		<div>PCA Registered Practical Nurse RN</div> <div>PCA</div> <div>PCA</div> <div>PCA</div> <div>PCA</div>	<div></div> <div>Q2h</div>
<div>• Balance Training Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>• To reduce falls rate from high to low in next 6 months. Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 03/03/2026</div>	<div>• Dynamic balance exercises in standing 1 person assist,1-2set, 10 rps.,2-3/wk as tolerated, per rehab treatment. Strengthening exs for B/L LE using 1-3lbs. wt., 1 set, 10rps., 2-3/wk as tolerated, per rehab treatment. Exercise on peddlers/ bike for 5-10 minutes of continuous activity 2-3/wk as tolerated. Revision on: 06/09/2025 Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>PT - Physiotherapi st PTA</div>	
<div>• Balance. Revision on: 06/03/2025 Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>• Reduce fall risk from medium to low in next 6 months; Revision on: 06/03/2025 Revision by: Shina Wadhwa</div>	<div>• Dynamic standing balance exs as CGA/1 person assist. Include Marching, heel raise, mini squats, hip abd, hip ext. All exs 10 reps, 1-2 sets or as best tolerated, 2-3 x a week; B/L LE strengthening exs, as best tolerated with 1-2lbs,10 reps,2-3 x aweek;</div>			
Allergies	Penicillin		D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses					
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Resident	Collison, Harriette (922131005485)		Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	(Physical Therapist) Target Date: 03/03/2026	Revision on: 06/03/2025 Revision by: Shina Wadhwa (Physical Therapist)			
• Altered VISION related to use to wear glasses for reading, can see without them Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Harriette's vision will remain adequate through to her targeted review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• EYEGLASSES: Harriette has reading glasses but does not wear them. She can see PCA and get about. Team to monitor for changes and any safety concerns. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Missing Family/Friends, disinterest. ISE Score: 3/6 Revision on: 01/12/2024 Revision by: Mitchell Atkinson (Recreation Aide)	• Team members will support Harriette in decreasing social isolation by participating in activities of personal choice for 5-10 times per month by the next review date. Revision on: 03/09/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/03/2026	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; hymn sing, music related programs, reminiscing groups, special events, etc. Revision on: 06/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as socializing with other residents, tidying her room etc Revision on: 06/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities ACT - Accompany in elevator, Walk with, Guide to, Porter, Cue Direction, Reminders, etc. Revision on: 11/09/2022 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • HELPFUL HINTS: Identify Helpful Hints to ease communication while providing care/interactions for Harriette; loves cats, was an art teacher in grade school, has 4 sons, enjoys country music. Revision on: 11/09/2022 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide her with individual visits for conversation, listening to her favourite music on ipad, reminiscing, etc. Revision on: 06/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
• Potential to experience alteration in MOOD as exhibited by low mood, repetitive questions, repetitive	• Harriette will be supported to maintain mood stability as evidenced by DRS score at a	• COMMUNICATION: Involve/collaborate with Harriette/SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 10/27/2022			
Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
verbalizations, anger towards roommate/roommates son related to history of Bipolar Disorder Revision on: 08/08/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		range of 0-2 by the review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	Revision by: Katie Wolters-Savo (RAI Coordinator) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Harriette for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • FAMILY SUPPORT: Harriette enjoys visits from family members and friends. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)				
• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, slurred speech, mumbled speech, etc. related to Revision on: 07/14/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Harriette will be supported to maintain current communication abilities to express self, comprehend information, etc. each day through to the review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• COMMUNICATION: Involve/collaborate with Harriette/SDM for decision making about strategies needed to support effective communication. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • PRIMARY LANGUAGE: Harriette communicates best in English. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • INSTRUCTION GUIDANCE: Harriette needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• SPIRITUAL BELIEFS: Harriette is of the Catholic Faith. Revision on: 11/09/2022 Revision by: Shayna Lee Wonsch		• To provide Harriette spiritual support as interested through to the next review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including spiritual music, prayer circles, bible studies, spiritual ceremonies, etc. Revision on: 11/09/2022 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• Nutrition Risk Level		• Harriette will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator)	• NUTRITION RISK: Harriette is moderate risk level. Revision on: 11/18/2022 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: Harriette will receive regular diet, regular texture Revision on: 10/13/2023 Revision by: Assia Akhdar (Dietetic Intern)		Dietitian (RD) Dietary Manager PCA		
Allergies	Penicillin			D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of compl...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)			Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Coordinator) Target Date: 03/03/2026 • Will weigh within realistic GWR 55-65 kg through to next review date. Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/03/2026 • Harriette will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (25-26 ml/kg using 58.5 kg weight) through to next review date. Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/03/2026	• FLUID CONSISTENCY: Harriette drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/27/2022 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Harriette to drink a minimum of 1200 ml per day. Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD))	Diet PCA PCA	
• COGNITIVE LOSS; alteration in thought processes: memory loss, difficulty concentrating, poor judgement related to Alzheimer's Dementia, Parotid Gland Tumor. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Harriette will be supported to maintain cognitive function through the review date. Current CPS is 2/6. Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• COMMUNICATION: Involve/collaborate with Harriette/SDM in decision making of Cognitive Loss for Alzheimer's Dementia. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • ORIENTATION: Gently reorient to person, place, time as needed when Harriette is feeling lost or in confused state. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • ENVIRONMENT: Provide environmental cue to promote Harriette's ability to locate room and navigating home area name plate on door. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Potential for hypo/hyperglycemia and	• To treat and minimize	• COMMUNICATION: Involve/ collaborate with Harriette/SDM in decision making of		
Allergies	Penicillin	D.O.B.	01/13/1948	Physician Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location 2 209 A
Last Care Plan Review Completed:		12/03/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
other complications related to diagnosis of DIABETES (Type 2) Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		signs/symptoms or complications associated with DIABETES each day through to the next review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	diabetes care management. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • MONITORING: Utilize holistic perspective of continuous monitoring of Harriette for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• Potential to experience alteration in CARDIAC FUNCTION related to Hypertension Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Harriette with HTN for changes to health status and alteration or complications affecting cardiac function. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for HTN as per MD Order and monitor for side effects. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		Registered Practical Nurse RN	
• Potential to experience complications and side effects impacting quality of life related to use of use of anti-psychotic medications. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	• Monitor size, consistency and for any concerns when assistance with toileting is provided. Resident will often toilet on her own. • MONITORING: Utilize holistic perspective of continuous monitoring of Harriette using anti-psychotic medication for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. • PHARMACY MEDICATION REVIEW: Request Pharmacy Medication Review when clinically appropriate		Registered Staff	
Allergies	Penicillin		D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)		Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of anti-psychotic medications. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> BOWEL Continence - Harriette is continent and has self recognition of urge to defecate. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> Harriette to remain continent of bowels through next review date Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	<ul style="list-style-type: none"> BOWEL Continence level is occasionally INCONTINENT. Report change to level as noted. Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> SELF TOILETING: Harriette may toilet herself for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to overactive bladder disorder. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> Harriette will have urinary incontinence managed every shift through to the next review period. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of Harriette for toileting needs, changes to health status and alteration of continence level. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> URINARY Continence level is Occasionally to Frequently Incontinent. Report change to level as noted. Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> INCONTINENCE PRODUCT: Resident wears pull ups medium size daily PUM. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> Altered ability to complete Activities of 	<ul style="list-style-type: none"> Harriette will have ALL ADL 	<ul style="list-style-type: none"> BATHING: Harriette prefers (shower) on Wednesdays and Saturdays Evening 	PCA		
Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>Daily Living (ADLs) related to Alzheimer's Dementia, Parotid Gland Tumor, Type 2 Diabetes, HTN, Gout, Dysphagia, Overactive Bladder Disorder.</p> <p>Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>care tasks met each day through the next review date.</p> <p>Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026</p>	<p>shifts. Harriette participates by (washing her face and upper body with cueing and encouragement). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day.</p> <p>Harriette may refuse her bathing at times. She will wash herself up in her room. Try to reapproach and if not successful offer assistance with partial bath if accepting. May cue for self care in her washroom if she refuses.</p> <p>Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED MOBILITY: Harriette is able to turn and reposition herself independently while in bed without assistance or oversight from the team.</p> <p>Revision on: 04/09/2024 Revision by: Katie Savo</p> <p>• DRESSING: Harriette can dress herself. At times when confused or fatigued 1 team member cues/limited assistance.</p> <p>will often change back out of her regular clothing back into her pajama's and then back into her clothing and then back to Pajamas and then repeat.</p> <p>Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Harriette is independent for eating. Set up may be required when confused.</p> <p>Revision on: 01/02/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Harriette walks without any ambulatory without a gait aid. Monitor for unsteadiness.</p> <p>Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Harriette can perform the tasks independently.</p> <p>Harriette may require cuing to wash her face and brush/store her dentures.</p> <p>Revision on: 12/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide cues assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene.</p>	<p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p>		
Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Alzheimer's Dementia, Parotid Gland Tumor, Type 2 Diabetes, HTN, Gout, Dysphagia, Overactive Bladder Disorder. Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		<p>Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> TOILET USE: Harriette is independent with toileting. She may require 1 team member to provide limited to extensive assistance when incontinent or if decreased strength is present. <p>Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> TRANSFERRING: Harriette requires no staff assistance for transferring <p>Revision on: 10/27/2022 Revision by: Clarisa Amir (RPN)</p> <ul style="list-style-type: none"> ORAL CARE: Harriette has upper and lower dentures. She requires the team to assist with brushing and storing her dentures. <p>Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <ul style="list-style-type: none"> SPECIFIC RESIDENT Request: Harritte may prefer to wear PJs all day long, so POA Tim informed and agreed. <p>Revision on: 01/02/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Harriette's Medical Treatment and End of Life Care Revision on: 10/27/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor Harriette's expressed wishes and beliefs through to the End of Life. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/03/2026	<ul style="list-style-type: none"> CPR: Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)		

Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
Last Care Plan Review Completed:		12/03/2025			

Care Plan Report

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Diagnosis

Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Gout, unspecified, unspecified site(M10.99), Dysphasia and aphasia(R47.0), Other specified disorders of bladder(N32.8), Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Other synovitis and tenosynovitis, shoulder region(M65.81), Other bursitis, not elsewhere classified, shoulder region(M71.51), Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08)

Allergies	Penicillin	D.O.B.	01/13/1948	Physician	Albert Patrick Ng
Diagnosis	Hyperlipidaemia, unspecified(E78.5), Disorders of initiating and maintaining sleep [insomnias](G47.0), Alzheimer's disease, unspecified(G30.9), Type 2 diabetes mellitus without (mention of) compl...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Collison, Harriette (922131005485)	Admission Date	10/27/2022	Location	2 209 A
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Care Plan Report

Focus	Goal	Interventions				Position	Freq/Resolved
<ul style="list-style-type: none">• SPIRITUAL BELIEFS: Rosie is of the Catholic Faith. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	<ul style="list-style-type: none">• To provide Rosie spiritual support as interested through to the next review date. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/07/2026	<ul style="list-style-type: none">• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including Hymn Sing, Catholic Mass, Church Service, etc. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)					
<ul style="list-style-type: none">• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Cognitive Limitation, Physical Dependency, Rest/Sleep Patterns her ISE score is 2/6 Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	<ul style="list-style-type: none">• Team members will support Rosie in decreasing social isolation by participating in activities of personal choice for 10-15 times per month by the next review date. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/07/2026	<ul style="list-style-type: none">• STRUCTURED ACTIVITIES: Invite her to programs of personal interest music, parties, church programs. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none">• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as listening to music, watching TV, etc. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none">• ONE to ONE: Provide her with individual visits for conversation, bedside activity, reading, reminiscing, etc. Revision on: 10/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)					
<ul style="list-style-type: none">• Sleep Patterns; Potential for alteration in sleep patterns related to cognitive loss Revision on: 07/14/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• To promote adequate rest/sleep for Rose Marie (Rosie) based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/21/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	<ul style="list-style-type: none">• PREFERENCE: Rosie wakes during the night may enjoy listening to music, reading, watch TV, walk about, drink water/tea/milk) May require PRN medication Revision on: 11/20/2024 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• REST PATTERN: Preferred bedtime: Around 9:00pm, usual wake time: around 7:00-8:00am. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)				PCA	PCA
<ul style="list-style-type: none">• Potential for Expressive Behaviour of resisting care, verbal expression, eating foreign objects related to Vascular Dementia. Revision on: 07/14/2025	<ul style="list-style-type: none">• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 3.	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Rose Marie (Rosie))/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)				BSO - Internal Social Worker	
Allergies	No Known Allergies		D.O.B.	10/31/1937	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip(Z96.6...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Debenedetti, Rose Marie (922131005593)		Admission Date	10/17/2024	Location	2 221 A	
Last Care Plan Review Completed:		10/07/2025					



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Danielle Loreto (RAI Coordinator)	Revision on: 10/29/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Rose Marie (Rosie) for indications to change in or for escalating expressive behaviour risk. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 10/29/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Rose Marie (Rosie) is declining to (bathe, change clothes, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/29/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • SOCIALLY Inappropriate Behaviour: Ensure environment is clean and clear of any foreign substance like paper, etc. as Rose Marie (Rosie) has history of eating them. <p>Informed Registered staff if Rose Marie (Rosie) has eaten any foreign substance/material or suspected to have eaten a foreign substance/material.</p> <p>.</p> Revision on: 07/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to #9 Right Lateral Calf secondary to Pressure Injury Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse)	<ul style="list-style-type: none"> • To promote optimal healing of WOUND (Stage #) within (specify date of expected healing or end of treatment date or next review date *** and remember to also alter the goal target date to the same). Target Date: 01/07/2026 <ul style="list-style-type: none"> • To minimize risk of WOUND #9 pressure unstageable on Right Lateral Calf infection each day 	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for #9 pressure unstageable on Right Lateral Calf as per MD Order. Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse) <ul style="list-style-type: none"> • HEALTH EDUCATION: Engage with Resident/SDM to enhance his/her comprehension of suggested treatment and possible complications associated with WOUND. Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse) <ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with #9 pressure unstageable on Right Lateral Calf for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 06/04/2025			
Allergies	No Known Allergies	D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)	Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	until fully healed. Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse) Target Date: 01/07/2026	Revision by: Sarah Hafiz (Registered Nurse) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse) • POSITIONING: Has Turning/Repositioning to off load pressure intervention in place; see Skin Impairment Risk Care Plan Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse) • EQUIPMENT: Resident requires Offloading boots/heel posies always on Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse) • NUTRITIONAL SUPPLEMENT for Skin Healing in place; refer to Dietary Care Plan Dietitian (RD) Revision on: 06/04/2025 Revision by: Sarah Hafiz (Registered Nurse)		
• Use of PASD (tilt wheelchair as needed) to assist resident with Activity of Daily Living, comfort and repositioning. With potential restraining effects Use PASD - two 1/4 bed rails for bed mobility. Revision on: 05/14/2025 Revision by: Suzanne Azar (RN)	• Rosie will be effectively supported with use of PASD optimize Activity of Daily Living each day through to the next review date. Revision on: 04/30/2025 Revision by: Teresa Quinto (RPN) Target Date: 01/07/2026	• Consent for PASD discussed and obtained with POA. • HEALTH EDUCATION: Engage with SDM to enhance their knowledge of PASD. Revision on: 04/30/2025 Revision by: Teresa Quinto (RPN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use PASD for repositioning and comfort. Revision on: 04/30/2025 Revision by: Teresa Quinto (RPN) • BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility.resident is able to follow the instructions to hold the bed rails to reposition during care. Monitor every shift. Revision on: 07/08/2025 Revision by: Gurjit Kaur (RN) • TILTED CHAIR (15-20 degrees) in USE as a PASD to support resident with comfort and repositioning. Monitor every shift. Revision on: 05/14/2025 Revision by: Suzanne Azar (RN)	PCA PCA	D/E/N D/E/N

Allergies	No Known Allergies	D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)	Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025			

Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>next review date. Revision on: 10/30/2024 Revision by: Lexi Dakin (Dietitian (RD)) Target Date: 01/07/2026</p> <p>• Will weigh within GWR/IBW/Realistic weight range of 50-57kg/BMI 26-29 through to next review date. Revision on: 10/30/2024 Revision by: Lexi Dakin (Dietitian (RD)) Target Date: 01/07/2026</p> <p>• Rose will be adequately hydrated aeb drinking 100% of total fluid requirement 1345 ml/day (25 ml/kg using 53.8 kg weight) through to next review date. Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/07/2026</p>	<p>• DIET ORDER: Rose will receive regular diet, puree texture Revision on: 05/07/2025 Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• FLUID CONSISTENCY: Rose drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/30/2024 Revision by: Lexi Dakin (Dietitian (RD))</p> <p>• FLUID TARGET: Encourage Rose to drink a minimum of 1345 ml/day Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• ADAPTIVE AIDS: Resident requires sippy cup for fluids Revision on: 08/22/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• MEDPASS SUPPLEMENTS: Resource 2.0 60 ml TID Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• HIGH FIBRE: Prune juice at breakfast M-W-F Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	PCA	
			PCA	
			PCA	
			PCA	
			PCA	D/E
<p>• Potential to experience alteration in MOOD as exhibited by persistent anger with self or others, insomnia/unusual sleep pattern, repetitive physical movements related to Dementia Revision on: 10/29/2024 Revision by: Maryola Perion (RN)</p>	<p>• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 1. Revision on: 10/29/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Rose Marie (Rosie))/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 10/18/2024 Revision by: Maryola Perion (RN)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Rose Marie (Rosie) for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/18/2024</p>		
Allergies	No Known Allergies	D.O.B.	10/31/1937	Physician Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)	Admission Date	10/17/2024	Location 2 221 A
Last Care Plan Review Completed:		10/07/2025		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Rose Marie (Rosie) effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 10/29/2024 Revision by: Maryola Perion (RN) • SLEEP/REST: Promote adequate sleep and rest to stability of Rose Marie (Rosie) mood. Report changes in sleeping habits to Registered Staff as noted. Revision on: 10/18/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)				
• Potential for Altered VISION related to Bilateral Cataract Surgery - Aug. 2024, sees large print. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)		• To treat and minimize complications of cataract surgery through to next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with (Rose Marie (Rosie))/SDM for decision making pertaining to change in visual status as needed. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • READING: Rose Marie (Rosie) uses large print material to aid with reading. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)				
• Potential for Persistent PAIN and alteration in comfort level related to Osteoarthritis. Most Current MDS Pain Score is 0. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)		• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 01/07/2026 • Promote MDS Pain Score of 0 through to the next review. Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with (Rose Marie)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.				
Allergies	No Known Allergies			D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)			Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential for Persistent PAIN and alteration in comfort level related to Osteoarthritis. Most Current MDS Pain Score is 0. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)		Revision on: 10/17/2024 Revision by: Maryola Perion (RN)	RN		
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, etc.) Revision on: 10/23/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Rose Marie (Rosie))/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident using poly-pharmacy, etc. for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. 	Registered Staff		
<ul style="list-style-type: none"> Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Rose Marie (Rosie))/SDM in decision making of musculoskeletal care management. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to health status. Revision on: 10/17/2024			
Allergies	No Known Allergies	D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)	Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension Revision on: 10/17/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with Hypertension through to the next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Rose Marie (Rosie))/SDM in decision making of Cardiac Care Management for Hypertension. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for Hypertension as per MD Order and monitor for side effects. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN		
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to the progression of Vascular Dementia. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> (Resident name) will be supported to maintain cognitive function through the review date. Current CPS is 4. Revision on: 10/29/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Rose Marie)/SDM in decision making of Cognitive Loss for Vascular Dementia. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Rose Marie is feeling lost or in confused state. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)	PCA		
Allergies	No Known Allergies	D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)		Admission Date	10/17/2024	Location 2 221 A
Last Care Plan Review Completed:		10/07/2025			

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Focus		Goal	Interventions		Position	Freq/Resolved
			• CUE TASKS: Break tasks into manageable subtasks, Rosie can comprehend and follow. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential for BOWEL INCONTINENCE related to Vascular Dementia. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• Rose Marie (Rosie) will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.		Registered Staff	
			• BOWEL Continence level is Incontinent. Report change to level as noted. Revision on: 04/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
			• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.		PCA	
			• INCONTINENCE PRODUCT: Rose Marie (Rosie) is using an incontinent product. White Prevail brief. Revision on: 01/27/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Risk for Impaired SKIN INTEGRITY related to Vascular Dementia, Incontinence, use of incontinent product. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 01/07/2026	• EQUIPMENT: Rose requires posey to bilateral feet to offload pressure. Revision on: 06/03/2025 Revision by: Teresa Quinto (RPN)		PCA	
			• POSITIONING: Turn, reposition every 2 hours when in bed/wheelchair to offload pressure. Revision on: 04/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	Q2h
• Altered ability to complete Activities of Daily Living (ADLs) related to Vascular Dementia, Hypertension, Osteoarthritis. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• Rose Marie (Rosie) will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• BATHING: Rose Marie (Rosie) prefers (shower) on (Tuesdays and Fridays Evening shift). Rose Marie (Rosie). One staff (EXTENSIVE to Maximal) assistance for bathing. Nail care to be provided on a shower/bath day. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
			• BED MOBILITY: extensive to maximal assistance-Requires 1 team member to reposition her in bed. Revision on: 10/07/2025		PCA	
Allergies	No Known Allergies		D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)		Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved
	<ul style="list-style-type: none">• Rose Marie (Rosie) will have ALL ADL care needs met each day through the next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• DRESSING: Rose Marie (Rosie) requires 1 team member extensive assistance to dress her upper and lower body. Maximal assistance as needed when resident is fatigued. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• EATING: Rose Marie (Rosie) requires one staff member to help her finish her meals. She eats in the Orchid Lane dining room. Revision on: 04/30/2025 Revision by: Jiss Mathew (RN) <ul style="list-style-type: none">• LOCOMOTION: Rose is wheelchair dependent and requires one staff member to porter her to all locations. Revision on: 07/14/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• PERSONAL HYGIENE: Rose Marie (Rosie) requires one staff total assistance with combing/brushing her hair, washing/drying her face, hands and oral care. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• HAND HYGIENE:1 staff for total assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 04/09/2025 Revision by: Teresa Quinto (RPN) <ul style="list-style-type: none">• TOILET USE: Rose Marie (Rosie) She requires 2 staff Maximal assistance in changing her incontinent product and to provide peri care. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• TRANSFERRING: Rose Marie (Rosie) requires 2 staff with us of a sara lift. Revision on: 04/30/2025 Revision by: Teresa Quinto (RPN) <ul style="list-style-type: none">• ORAL CARE: Rose Marie (Rosie) has her own teeth. She is dependent with one staff to brush her teeth. Revision on: 04/09/2025 Revision by: Teresa Quinto (RPN)	PCA <	

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Focus		Goal	Interventions		Position	Freq/Resolved
Rose Marie (Rosie) Medical Treatment and End of Life Care Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		Marie (Rosie) expressed wishes and beliefs through to the End of Life. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	PoET Individualized Summary for details. Revision on: 01/27/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• Rose Marie (Rosie) will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 10/21/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • URINARY Continence level is Incontinent. Report change to level as noted. PCA Revision on: 07/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Rose Marie (Rosie) is using an incontinent product. PCA White Prevail brief Revision on: 01/27/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Vascular Dementia. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• Rose Marie will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026 • Rose Marie will be supported to make basic needs known each day through to the review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with (Rose Marie)/SDM for decision making about strategies needed to support effective communication. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • PRIMARY LANGUAGE: Rose Marie's primary language is English. She is able to speak/understand English. Secondary language spoken: Italian , French Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Rose Marie needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)			
Allergies	No Known Allergies		D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)		Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025				


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Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Vascular Dementia. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)				

Diagnosis Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip(Z96.60), Disorders of initiating and maintaining sleep [insomnias](G47.0)

Allergies	No Known Allergies	D.O.B.	10/31/1937	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Cataract, unspecified(H26.9), Hypokalaemia(E87.6), Presence of artificial hip (Z96.6...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Debenedetti, Rose Marie (922131005593)	Admission Date	10/17/2024	Location	2 221 A
Last Care Plan Review Completed:		10/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE Score: 6/6 Revision on: 11/01/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>	<p>• Pamela will be supported to maintain participation in activities 25-30 times per month by the next review date. Revision on: 07/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/12/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; one one visits for music listening, hand massage and manicures, arts & crafts, exercise groups, comedy corner, games,happy hour, bingo, reading (large print), reminiscing groups, beauty club, special events, TV/movie programs, etc. Revision on: 07/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, listening to music/radio, watching/listening to TV, knitting/crocheting, visiting with roommate etc. Revision on: 11/01/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• ONE to ONE: Provide her with individual visits for conversation, reminiscing, music, humor, etc. Revision on: 01/09/2023 Revision by: Mitchell Atkinson (Recreation Aide)</p>	Recreation Aide				
<p>• Risk for/Impaired SKIN INTEGRITY related to Unsteady gait, aging process, corn on the sole of the right foot. Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To protect and maintain skin integrity each day through to the next review. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026</p>	<p>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.</p>	PCA				
<p>• Potential for persistent PAIN and alteration in comfort level related to complaints of pain to lower back, c/o headache, pain over the 5th MTP joints on the dorsum area., body ache. corn on the sole of the right foot. Most Current MDS Pain Score is 0/3. Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• Promote MDS Pain Score of 0 through to the next review. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026</p>	<p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	RN Registered Practical Nurse Registered Practical Nurse RN				
Allergies	No Known Allergies	D.O.B.	03/18/1953	Physician	Albert Patrick Ng		
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre			Print Date	12/11/2025		
Resident	Deschamps, Pamela (922131005403)	Admission Date	05/25/2021	Location	2 202 A		
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• Alteration in skin integrity related to RASH:</p> <p>#9 - Rash Rear Right Shoulder Onset December 5th 2023</p> <p>Revision on: 08/04/2025 Revision by: Janina Lucero (RN)</p>	<p>• To promote intact skin integrity through healing of RASH by the next review date.</p> <p>Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with RASH (#9 - Rash Rear Right Shoulder Onset December 5th 2023 for changes to health status and alteration or complications affecting skin integrity.</p> <p>Revision on: 08/04/2025 Revision by: Janina Lucero (RN)</p> <p>• MEDICATION: Administer medication for RASH as per MD Order. Monitor effectiveness and for side effects.</p> <p>Revision on: 09/25/2024 Revision by: Maryola Perion (RN)</p> <p>• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin and Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed.</p> <p>Revision on: 12/05/2023 Revision by: Teresa Quinto (RPN)</p>	<p>Registered Practical Nurse RN</p> <p>Registered Practical Nurse RN</p>			
<p>• Alteration in skin integrity related to itchiness on back and arms</p> <p>Revision on: 03/04/2025 Revision by: Maryola Perion (RN)</p>	<p>• To promote intact skin integrity through healing of itchiness by the target date.</p> <p>Revision on: 03/04/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with itchiness for changes to health status and alteration or complications affecting skin integrity.</p> <p>Revision on: 03/04/2025 Revision by: Maryola Perion (RN)</p> <p>• COMMUNICATION: Involve/collaborate with (Pamela)/SDM in decision making for treatment of skin issues.</p> <p>Revision on: 03/04/2025 Revision by: Maryola Perion (RN)</p> <p>• MEDICATION: Administer medication for itchiness as per MD Order. Monitor effectiveness and for side effects.</p> <p>Revision on: 03/04/2025 Revision by: Maryola Perion (RN)</p>	<p>Registered Practical Nurse RN</p> <p>Registered Practical Nurse RN</p>			
<p>• Potential for altered bone density related to diagnosis of OSTEOPOROSIS.</p> <p>Revision on: 02/12/2025 Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• To treat and minimize complications associated with OSTEOPOROSIS through to the next review date.</p>	<p>• COMMUNICATION: Involve/ collaborate with (Pamela)/SDM in decision making of osteoporosis care management.</p> <p>Revision on: 09/18/2024 Revision by: Maryola Perion (RN)</p>				
Allergies	No Known Allergies		D.O.B.	03/18/1953	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Deschamps, Pamela (922131005403)		Admission Date	05/25/2021	Location	2 202 A
Last Care Plan Review Completed:		11/12/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved			
	Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	<ul style="list-style-type: none"> • MEDICATION: Administer medication for osteoporosis management. Monitor effectiveness and for side effects. • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of osteoporosis for discomfort/ complications or changes to health status. 	Registered Staff				
<ul style="list-style-type: none"> • Potential for altered skin healing, infection or complications related to WOUND #2 - Blister Rear Left Shoulder Onset May 21st 2021 Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> • To minimize risk of WOUND #2 - Blister Rear Left Shoulder infection each day until fully healed. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident. Wound to (#2 - Blister Rear Left Shoulder) for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)					
<ul style="list-style-type: none"> • Increased risk for FALLS related to unsteady gait. Hx of falls mainly in the winter time. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	<ul style="list-style-type: none"> • CALL BELL: Place call bell within Pamela's reach to right side, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> • ENVIRONMENT: Secure environment: reduce clutter to reduce fall risk for Pamela. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> • FOOTWEAR: Ensure Pamela wears appropriate footwear while transferring and ambulating on the unit. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA	D/E/N			
<ul style="list-style-type: none"> • Balance Revision on: 09/21/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	<ul style="list-style-type: none"> • In next 3 months: to improve tinetti scores from 19 to 21 Revision on: 11/04/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	<ul style="list-style-type: none"> • Dynamic standing balance exe. at rail, 1set,10 rps., 2-3/week as tolerated. Revision on: 09/21/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	PT - Physiotherapist				
Allergies	No Known Allergies		D.O.B.	03/18/1953	Physician	Albert Patrick Ng	
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Deschamps, Pamela (922131005403)		Admission Date	05/25/2021	Location	2 202 A	
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Physiotherapist) Target Date: 02/12/2026				
• Potential for CONSTIPATION related to decreased mobility. Revision on: 05/31/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Pamela will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.		Registered Staff	
			• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.		Registered Staff	
			• PHYSICAL ACTIVITY: Promote ACTIVITY/ MOVEMENT to stimulate bowels.		Registered Staff	
			• BOWEL PROTOCOL: In place as per MD order		Registered Staff	
• SPIRITUAL BELIEFS: Pamela is of the Anglican Faith. Revision on: 06/07/2021 Revision by: Shayna Lee Wonsch		• To provide Pamela spiritual support as interested through to the next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• PERSONAL CHOICE: Respect Pamela's right to decline participation in Spiritual Program. Does not partake in faith programs at this time. Revision on: 06/07/2021 Revision by: Shayna Lee Wonsch		ACT	
• Nutrition Risk Level		• Pamela will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026 • Will weigh within realistic weight range of 75-80 kg through to next review date. Revision on: 07/31/2025	• NUTRITION RISK: Pamela is moderate risk level. Revision on: 05/07/2025 Revision by: Niharika Chopra (Food Service Supervisor)		Dietitian (RD)	
			• DIET ORDER: Pamela will receive Regular diet, Regular texture Revision on: 05/31/2021 Revision by: Anna Slack (Registered Dietitian)		Diet Food Services Aide PCA	
			• FLUID CONSISTENCY: Pamela drinks REGULAR/THIN Level 0 Fluids. Revision on: 05/31/2021 Revision by: Anna Slack (Registered Dietitian)		Diet PCA	
			• FLUID TARGET: Encourage Pamela to drink a minimum of 1460 ml/day Revision on: 07/31/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA	
Allergies	No Known Allergies		D.O.B.	03/18/1953	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)		Admission Date	05/25/2021	Location	2 202 A
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/12/2026 • Pamela will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1825 ml/day (25 ml/kg using 73 kg weight) through to next review date. Revision on: 07/31/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/12/2026	• HIGH PROTEIN AM SNACK: Cheese and crackers Mon/Wed/Fri Greek yogurt Tues/Sat Assorted fruit Thurs/Sun Revision on: 12/09/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	D
• Altered VISION related to Glaucoma, Macular Degeneration. Revision on: 05/31/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• To treat and minimize complications of Glucoma through to next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• EYEGLASSES: Pamela wears eyeglasses at times, although not often. Assist to clean eyeglasses as needed and store in night table when sleeping. Pamela has a tendency to misplace her eyeglasses. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • READING: Resident uses larger printed materials. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA	
• COGNITIVE LOSS; alteration in thought processes; memory loss, poor judgement related to Dementia. Revision on: 05/31/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• Pamela will be supported to make independent choice and safe decisions each day through to the review date. Current CPS is 2/6. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• ORIENTATION: Gently reorient to place and time as needed when Pamela is feeling lost or in confused state. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area example: name plate outside of room. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		
• Strength	• Pamela to increase strength of	• Pamela to perform strength exercises using 1-2 lbs. wt., 1set,10 rps., 3/wk as	PT -	
Allergies	No Known Allergies		D.O.B.	03/18/1953
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses		Physician	Albert Patrick Ng
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)	Admission Date	05/25/2021	Location 2 202 A
Last Care Plan Review Completed:		11/12/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 05/31/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		B/L UE≤ from grade 3+/5 to grade 4/5 in 3 months. Revision on: 05/13/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/12/2026	tolerated, per rehab treatment. Strengthening exs at the stepper/bike, 10-15 min 2-3 x a week Revision on: 11/04/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		Physiotherapist PTA	
• Sleep Patterns; Potential for alteration in sleep patterns related to reported periods of insomnia Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To promote adequate rest/sleep for Pamela based on identified sleep patterns/preferences each night through to the next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• PREFERENCE: Pamela does not have a wake up or go to bed time preference. She states it varies daily. Does not get up that early. Around 0800-0830. But may wish to sleep in longer. Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Non Insulin Diabetic. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Pamela for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM		• To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord	• MONITORING: Utilize holistic perspective of continuous monitoring of Pamela with PCA HYPOTHYROIDISM for changes to health status and alteration or complications affecting endocrine function. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order.			
Allergies	No Known Allergies		D.O.B.	03/18/1953	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)		Admission Date	05/25/2021	Location	2 202 A
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Back-up) Target Date: 02/12/2026	Monitor effectiveness and for side effects. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• Potential to experience alteration in CARDIAC FUNCTION related to HTN. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Pamela with HTN for changes to health status and alteration or complications affecting cardiac function. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for HTN as per MD Order and monitor for side effects. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		Registered Practical Nurse RN	
• BOWEL Continence - Pamela is continent and has self recognition of urge to defecate. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Pamela will remain continent of bowels through next review date Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Pamela toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		PCA PCA	
• URINARY Continence - Pamela is continent and has self recognition of urge to void. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Pamela will maintain continence level through next review date Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026	• URINARY Continence Level is: usually CONTINENT Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • SELF TOILETING: Pamela toilets self. Each shift ask if she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		PCA PCA	
Allergies	No Known Allergies		D.O.B.	03/18/1953	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)		Admission Date	05/25/2021	Location	2 202 A
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Unsteady gait, Macro Degeneration, Glaucoma.</p> <p>Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>• Pamela will have ALL ADL care tasks met each day through the next review date.</p> <p>Revision on: 12/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/12/2026</p>	<p>• BATHING: Pamela prefers (shower) on (Wednesdays and Saturdays Evening shift). PCA Pamela participates by (holding a wash cloth and being cued). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day.</p> <p>Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED MOBILITY: Independent. Pamela is capable of turning and repositioning herself independently without assistance or oversight from the team.</p> <p>Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• DRESSING: Set up. Pamela is capable of dressing herself independently without assistance or oversight from the team once set up with her clothing.</p> <p>She may require `1 team to assist her when she is fatigued, confused or decreased strength is present.</p> <p>Revision on: 12/02/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Set up. Pamela is capable of eating independently once she is set up by the team.</p> <p>Revision on: 05/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• LOCOMOTION: Pamela is able to walk independently without assistive devices.</p> <p>If short of breath and unsteady gait is present limited assistance from one team member.</p> <p>Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Independent. Pamela is capable of brushing her teeth, washing her face and completing all hygiene tasks independently once set up with the tools to do so. The team assists with pericare when Pamela requests.</p> <p>She may require `1 team to assist her when she is fatigued, confused or decreased strength is present.</p> <p>Revision on: 12/02/2024</p>	PCA	PCA
Allergies	No Known Allergies		D.O.B.	03/18/1953
Physician	Albert Patrick Ng			
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)	Admission Date	05/25/2021	Location 2 202 A
Last Care Plan Review Completed:		11/12/2025		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Unsteady gait, Macro Degeneration, Glaucoma.</div> <div>Revision on: 05/25/2021</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div>			<div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• HAND HYGIENE: 1 staff to provide reminders to Pamela to complete hand hygiene PCA with soap and water in her bathroom on the unit.</div> <div>Revision on: 09/01/2021</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• TOILET USE: Independent. Pamela is capable of transferring herself onto and off of PCA the toilet independently as well as adjust her clothing once toileting tasks is complete without assistance or oversight from the team. Team assists with pericare when asked.</div> <div>She may require `1 team to assist her when she is fatigued, confused or decreased strength is present.</div> <div>Revision on: 12/02/2024</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRANSFERRING: Pamela is capable of transferring herself from a sit to stand PCA position independently without assistance or oversight from the team.</div> <div>Revision on: 12/13/2023</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• ORAL CARE: Pamela has her own teeth remaining though is missing some and is PCA capable of brushing her own teeth once provided the tools to do so.</div> <div>Revision on: 05/25/2021</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• FOOT CARE: Pamela requires registered team to assist with completing toenail PCA care every Tuesday and Saturday day shift after her baths. Report long toenails or other abnormalities as noted.</div> <div>Revision on: 11/16/2022</div> <div>Revision by: Chelsea Campbell-Wright (IPAC LEAD)</div>				
<div>• Expressed Wishes and Beliefs related to Pamela Medical Treatment and End of Life Care</div> <div>Revision on: 05/25/2021</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div>		<div>• To support and honor Pamela's expressed wishes and beliefs through to the End of Life.</div> <div>Revision on: 12/14/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>Target Date: 02/12/2026</div>	<div>• Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details.</div> <div>Revision on: 08/07/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>				
Allergies	No Known Allergies			D.O.B.	03/18/1953	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)			Admission Date	05/25/2021	Location	2 202 A
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

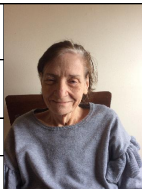
Focus	Goal	Interventions	Position	Freq/Resolved

Diagnosis

Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H35.3), Glaucoma, unspecified(H40.9), Other specified postsurgical states(Z98.8), Hypothyroidism, unspecified (E03.9), Osteoporosis, unspecified(M81.9)

Allergies	No Known Allergies	D.O.B.	03/18/1953	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Degeneration of macula and posterior pole(H...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Deschamps, Pamela (922131005403)	Admission Date	05/25/2021	Location	2 202 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to low motivation.ISE score is 6/6</p> <p>Revision on: 10/23/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>	<p>• Team members will support Anna in decreasing social isolation by participating in activities of personal choice 15-20 times per month by the next review date.</p> <p>Revision on: 10/23/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>Target Date: 02/12/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; friendly/1:1 visits,patio visits, Bingo, comedy corner, fun & fitness, movement to music, music trivia, religious studies group, special events, tea socials, etc.</p> <p>Revision on: 10/28/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as; Watching/listening to TV, listening to music, visiting with residents/team members, etc,</p> <p>Revision on: 12/26/2022</p> <p>Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music, humor, etc.</p> <p>Revision on: 12/26/2022</p> <p>Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Promote the opportunity for Anna to make friendships and sit with friends during activities.</p> <p>Revision on: 12/26/2022</p> <p>Revision by: Mitchell Atkinson (Recreation Aide)</p>	<p>Recreation Aide</p> <p>ACT</p> <p>ACT</p> <p>ACT</p>			
<p>• Potential to experience alteration in MOOD as exhibited by repetitive questions, persistent anger with self or other, repetitive health and non health complaints, unpleasant mood in the morning, sad, pained, worried facial expression, Hx of stating wanting to die due to frustration of not able to visit daughter, awake all night related to Depression, Dementia, Hx of Left wrist fracture.</p> <p>Revision on: 10/22/2025</p> <p>Revision by: Maryola Perion (RN)</p>	<p>• To decrease the episodic frequency of negative Mood symptoms by next review date. DRS score will be maintained to 0.</p> <p>Revision on: 09/17/2024</p> <p>Revision by: Maryola Perion (RN)</p> <p>Target Date: 02/12/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Anna)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed.</p> <p>Revision on: 03/24/2023</p> <p>Revision by: Maryola Perion (RN)</p> <p>• HEALTH EDUCATION: Provide education and support to (Anna)/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed.</p> <p>Revision on: 06/28/2023</p> <p>Revision by: Maryola Perion (RN)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Anna for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</p> <p>Revision on: 12/14/2022</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• RESIDENT STRENGTHS: Build on Anna effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities.</p> <p>Revision on: 12/14/2022</p>	<p>RN</p> <p>Registered Practical Nurse</p>			
Allergies	Penicillin, Sulfa Antibiotics, Fish	D.O.B.	07/30/1945	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Fish, Anna (922131005492)	Admission Date	12/14/2022	Location	2 219 A	
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• SLEEP/REST: Promote adequate sleep and rest to stability of Anna's mood. Report changes in sleeping habits to Registered Staff as noted.</p> <p>Revision on: 10/22/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects.</p> <p>Revision on: 12/14/2022</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• RISK FOR RELATED TO HISTORY OF SUICIDAL IDEATIONS: Report to Registered Staff IMMEDIATELY if Anna expresses thoughts to harm to self.</p> <p>stating she wants the police- and that she will cut her wrists to get the police to come- (no plan-stated she only said that to see if the the team would call the police- December 30th 2024)</p> <p>Revision on: 02/26/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>			
<p>• Potential for Persistent PAIN and alteration in comfort level related to pain (left waist- tendonitis in left wrist), stomach pain, knee pain, Hx of Left wrist fracture, headache, Left wrist tendonitis. Right wrist pain. Most Current RAI Pain Score is 1.</p> <p>Revision on: 09/23/2025</p> <p>Revision by: Maryola Perion (RN)</p>	<p>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review.</p> <p>Revision on: 01/03/2024</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>Target Date: 02/12/2026</p> <p>• Promote RAI Pain Score of 0 through to the next review.</p> <p>Revision on: 09/23/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>Target Date: 02/12/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Anna)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options.</p> <p>Revision on: 12/19/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</p> <p>Revision on: 03/24/2023</p> <p>Revision by: Maryola Perion (RN)</p>	<p>RN Registered Practical Nurse</p> <p>Registered Practical Nurse RN</p>		
<p>• Balance Training</p> <p>Revision on: 07/18/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• Decrease fall risk from medium to low based on Tinetti scores in 3 months;</p>	<p>• 1:1 Dynamic balance training with wall bar/walker, Include marching, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week.</p> <p>B/L LE strengthening with 1-2lbs, 10 reps, assist as needed; 2-3 x a week</p>	<p>PT - Physiotherapist</p>		
Allergies	Penicillin, Sulfa Antibiotics, Fish	D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fish, Anna (922131005492)	Admission Date	12/14/2022	Location	2 219 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision on: 07/18/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/12/2026	Revision on: 07/18/2025 Revision by: Shina Wadhwa (Physical Therapist)	PTA		
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of PACING, resisting care, verbal towards other residents, verbal aggression, related to Symptom Progression of Dementia Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 3. Revision on: 06/14/2024 Revision by: Maryola Perion (RN) Target Date: 02/12/2026	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Anna for indications to change in or for escalating expressive behaviour risk. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • TRIGGERS leading to VERBAL (scolding other residents, yelling- stating she wants the police- and that she will cut her wrists to get the police to come-(no plan-stated she only said that to see if the the team would call the police-December 30th 2024)) as expression of behaviour include (frustration, misunderstanding care intention, etc.) Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> • VERBAL Behaviour: If Anna is heard scolding other residents; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Re-direct her to her room. Report episode to Registered Staff. Revision on: 04/14/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, refusing to wear brace, etc.) as expression of behaviour include confusion, misunderstanding care needs, poor judgement, etc. Revision on: 06/28/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Anna is refusing to (bathe, change clothes, take medications, eat, keep brace on etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 02/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> • PACING: Permit Anna to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 02/26/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Penicillin, Sulfa Antibiotics, Fish	D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fish, Anna (922131005492)	Admission Date	12/14/2022	Location	2 219 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for Expressive Behaviour of PACING, resisting care, verbal towards other residents, verbal aggression,related to Symptom Progression of Dementia Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator)			• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 03/24/2023 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• Altered VISION related to failure to wear glasses Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Anna will have no concerns related to her visual loss through to her next review date. Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/12/2026	• EYEGLASSES: Anna has glasses but chooses not wear them. Monitor for changes in her ability to see and get about the home area. Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• Increased risk for FALLS related to unsteady gait, antipsychotic drug use, history of falls causing fracture, unsteady gait, history of dizziness. Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• COMMUNICATION: Involve/collaborate with (Anna)/SDM in decision making in fall prevention Plan of Care. Revision on: 12/19/2022 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker as needed. Revision on: 09/26/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Anna.			PCA PCA PCA	D/E/N
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022		Location	2 219 A
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			Revision on: 03/24/2023 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear (non-slip) for transfers, ambulation. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPLEMENT: Cholecalciferol supplement and prolia as per MD order to maintain bone density to prevent injuries. Revision on: 03/24/2023 Revision by: Maryola Perion (RN)			PCA	
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, antipsychotic, antidepressant etc.) Revision on: 02/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, antipsychotic, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 12/22/2023 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Dementia and Depression and dry skin, lump on both sides of neck, edema bilateral lower extremities. Revision on: 12/03/2024 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. • HEALTH EDUCATION: Elevate legs above heart level every shift. Encourage Anna as she is not compliant at times. Revision on: 12/22/2023 Revision by: Maryola Perion (RN)			PCA	
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Depression and A-fib, Hx of Left wrist fracture.		• Anna will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care	• BATHING: Anna has no preference, her schedule is on (Wednesday and Sundays on Evening shift). If Anna is accepting, One staff (SUPERVISION and set up) assistance for bathing. Nail care to be provided on shower/bath day.			PCA	
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022	Location	2 219 A	
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 12/03/2024 Revision by: Maryola Perion (RN)		tasks are met each day through to the next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	<p>Anna requires encouragement as she will refuse her bath/shower. Anna will clean and wash herself in her own washroom when refusing to have her shower in the big bathroom. Staff to provide her towel and wash cloth. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED MOBILITY: Anna is able to turn and reposition in bed without any assistance from staff. Supervision and set up as needed. PCA</p> <p>Revision on: 03/24/2023 Revision by: Maryola Perion (RN)</p> <p>• DRESSING: Anna is able to change her clothing independently. She may require cueing and reminders from staff or one staff assistance as needed. PCA</p> <p>Revision on: 06/28/2023 Revision by: Maryola Perion (RN)</p> <p>• EATING: Anna is able to feed herself once set up help done by staff and she is eating on the floor dining room. PCA</p> <p>Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• LOCOMOTION: Anna is independent with supervision due to being in a locked unit. She is using a walker as needed when feeling unsteady or for safety on and off the unit. PCA</p> <p>Revision on: 09/26/2025 Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Anna is able to wash her face, hands, comb her hair and do peri-care after. Staff to set up. Requires cueing and reminders from staff or one staff assistance at times when needed. PCA</p> <p>Revision on: 09/21/2023 Revision by: Maryola Perion (RN)</p> <p>• HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. PCA</p> <p>Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• TOILET USE: Anna is able to transfer on/off the toilet, cleanse herself and adjust clothes independently. May require cueing and reminders to change or reapply her pull up. PCA</p> <p>Revision on: 03/27/2023</p>				
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022	Location	2 219 A	
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Depression and A-fib, Hx of Left wrist fracture.</div> <div>Revision on: 12/03/2024</div> <div>Revision by: Maryola Perion (RN)</div>			<div>Revision by: Maryola Perion (RN)</div> <div>• TRANSFERRING: Anna is able to transfer herself between surfaces without any assistance from staff. Independent in transfers: ambulates independently.</div> <div>Revision on: 12/16/2022</div> <div>Revision by: Lara Ismail (RN)</div> <div>• ORAL CARE: Anna has her own teeth with some missing, no dentures. She is able to brush her teeth, may require supervision/set up help from staff.</div> <div>Revision on: 12/14/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>		PCA	
<div>• Potential to experience FOOT/FEET complications related to left great toe fungus, thickened toenails.</div> <div>Revision on: 06/14/2024</div> <div>Revision by: Maryola Perion (RN)</div>		<div>• To maintain adequate Foot/Feet/Toenail care and minimize episodes of inflammation, infection or complications through to the next review date.</div> <div>Target Date: 02/12/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Anna/SDM) in decision making for footcare treatment plan.</div> <div>Revision on: 06/13/2024</div> <div>Revision by: Maryola Perion (RN)</div> <div>• TREATMENT PLAN: Monitor left great toe fungus.</div> <div>Revision on: 06/13/2024</div> <div>Revision by: Maryola Perion (RN)</div>		Footcare Nurse - Internal	
<div>• Sleep Patterns.</div> <div>Revision on: 12/22/2023</div> <div>Revision by: Maryola Perion (RN)</div>		<div>• To promote adequate rest/sleep for Anna based on identified sleep patterns/preferences each night through to the next review date.</div> <div>Revision on: 01/03/2024</div> <div>Revision by: Katie Wolters-Savo</div>	<div>• REST PATTERN: Preferred bedtime sometimes after 22:00, usual wake time between 8-9 and daytime naps: depends on the day.</div> <div>Revision on: 12/14/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• SLEEPWEAR: Anna prefers to wear her own PJs.</div> <div>Revision on: 12/14/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>		PCA PCA	
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022	Location	2 219 A
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> • Sleep Patterns. Revision on: 12/22/2023 Revision by: Maryola Perion (RN)	(RAI Coordinator) Target Date: 02/12/2026			
<ul style="list-style-type: none"> • Anna is at high risk for ELOPEMENT related to wandering and on locked unit, stating she wanted to leave and will take all her stuff with her. Revision on: 11/28/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To promote Anna safety and minimize risk for episode of elopement each day through next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	<ul style="list-style-type: none"> • ALERT: Anna has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 03/27/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • ELOPEMENT ALERT: Redirect Anna away from elevator or exit doors as needed. PCA Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)		
<ul style="list-style-type: none"> • Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of Sulfa and Penicillin. Revision on: 06/28/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • Anna will be protected from exposure to allergen each day through next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Anna)/SDM in decision making and health teaching about ALLERGY to Sulfa and Penicillin. Revision on: 06/28/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Sulfa and Penicillin for changes to health status and complications mortality. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • ALLERGY ALERT: Anna has ALLERGY to Sulfa and Penicillin. Prevent contact with All and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 06/28/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Anna Allergy to (Sulfa and Penicillin) and minimize risk for exposure to allergen. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)		

Allergies	Penicillin, Sulfa Antibiotics, Fish	D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fish, Anna (922131005492)	Admission Date	12/14/2022	Location	2 219 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">• Potential to experience alteration in CARDIAC FUNCTION related to; Atrial Fibrillation/ heart failure (May 02/23) Revision on: 05/03/2023 Revision by: Lara Ismail (RN)	<ul style="list-style-type: none">• To treat and minimize signs/symptoms or complications associated with A-fib/heart failure through to the next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Anna/SDM in decision making of Cardiac Care Management for Atrial Fibrillation and Heart Failure (May 02/23.) Revision on: 05/03/2023 Revision by: Lara Ismail (RN)• MONITORING: Utilize holistic perspective of continuous monitoring of resident with A-fib/heart failure for changes to health status and alteration or complications affecting cardiac function. Revision on: 06/28/2023 Revision by: Maryola Perion (RN)• MEDICATION: Administer medication for A-fib. as per MD Order and monitor for side effects. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)• BP MONITORING: Monitor BLOOD PRESSURE as ordered. Notify MD of abnormalities as needed. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Practical Nurse RN			
<ul style="list-style-type: none">• Potential for altered hematologic symptoms or complications related to diagnosis of Vit. B12 ANEMIA Revision on: 03/27/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• To treat and/or minimize complications associated with ANEMIA each day through to the next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Anna)/SDM in decision making of hematologic care management for Anemia. Revision on: 03/27/2023 Revision by: Maryola Perion (RN)• MONITORING: Utilize holistic perspective of continuous monitoring of resident with ANEMIA for complications or changes to health status.• LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.• MEDICATION: Administer medication for ANEMIA as per MD Order. Monitor effectiveness and for side effects.	Registered Staff Registered Staff Registered Staff			
<ul style="list-style-type: none">• Expressed Wishes and Beliefs related to Anna Medical Treatment and End of Life Care Revision on: 03/27/2023	<ul style="list-style-type: none">• To support and honor Anna expressed wishes and beliefs through to the End of Life. Revision on: 01/03/2024	<ul style="list-style-type: none">• CPR: Anna wishes express- NOT ATTEMPT CPR/DNR: Transfer to hospital decision will be made as needed- see PoET Individualized Summary for details. Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022	Location	2 219 A
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Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026					
• BOWEL CONTINENCE Revision on: 03/24/2023 Revision by: Maryola Perion (RN)		• Anna will have bowel continence managed every shift through to the next review period. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Continent. Occasional incontinence. Report change to level as noted. Revision on: 05/26/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.			Registered Staff PCA PCA	
• COGNITIVE LOSS; alteration in thought processes (memory loss, poor judgement, etc.) related to Dementia Revision on: 03/24/2023 Revision by: Maryola Perion (RN)		• Anna will be supported to maintain cognitive function through the review date. Current CPS is 3 Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Anna is feeling lost or in confused state. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routine and activities Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication as per MD order. Monitor effectiveness and for side effects. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• Nutrition Risk Level		• Anna will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026 • Will weigh within	• NUTRITION RISK: Anna is moderate risk level. Revision on: 02/17/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Anna will receive regular diet, regular texture Revision on: 12/29/2022 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Anna drinks REGULAR/THIN Level 0 Fluids. Revision on: 12/29/2022 Revision by: Anna Slack (Registered Dietitian)			Dietitian (RD) Diet Food Services Aide PCA Diet PCA	
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022	Location	2 219 A	
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		GWR/IBW/Realistic weight range of 75-85 kg/BMI 28-32 through to next review date. Revision on: 09/10/2024 Revision by: Alexandra Breau (Dietitian (RD)) Target Date: 02/12/2026 • Anna will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2000 ml/day (25 ml/kg using 81.1 kg weight) through to next review date. Revision on: 08/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/12/2026	• FLUID TARGET: Encourage Anna to drink a minimum of 1600 ml/day Revision on: 08/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • FOOD ALLERGY/INTOLERANCE: Anna has an allergy to fish - do not serve. Reaction: rash. Revision on: 08/12/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Dietary aide PCA PCA Restorative Care Aide	
• SPIRITUAL BELIEFS: Anna is of the Catholic Faith. Revision on: 12/26/2022 Revision by: Mitchell Atkinson (Recreation Aide)		• To provide Anna spiritual support as interested through to the next review date. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including; Hymn Sing, Catholic Mass, bible study, spiritual discussion, etc. Revision on: 12/26/2022 Revision by: Mitchell Atkinson (Recreation Aide)			ACT	
• Potential for bruising, bleeding, clotting or other complications related to use of (ANTICOAGULANT) medication. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)		• To monitor for bleeding and minimize complications related to use of anticoagulant through the review date. Revision on: 03/14/2024 Revision by: Maryola Perion (RN) Target Date: 02/12/2026	• COMMUNICATION: Involve/collaborate with (Anna)/SDM in decision making and health teaching of Anti-coagulation medication use. Revision on: 06/28/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using Anticoagulant therapy for changes to health status and complications causing bleeding or clotting issues. Revision on: 12/14/2022				
Allergies	Penicillin, Sulfa Antibiotics, Fish		D.O.B.	07/30/1945	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Fish, Anna (922131005492)		Admission Date	12/14/2022	Location	2 219 A	
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		Revision by: Jenny Liu (RAI Coord Back-up) • BLEEDING ALERT: Notify nurse immediately if Anna is bleeding (noted blood in urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.	PCA Registered Staff	
• URINARY (Functional, Stress) INCONTINENCE related to Dementia Diagnosis Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)	• Anna will have urinary incontinence managed every shift through to the next review period. Revision on: 01/03/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 12/14/2022 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is Usually Continent. Report change to level as noted. Revision on: 12/22/2023 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Anna uses a Large Pull Up on Days, Evening and Night shifts. Revision on: 03/11/2025 Revision by: Maryola Perion (RN)	PCA PCA	

Allergies	Penicillin, Sulfa Antibiotics, Fish	D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fish, Anna (922131005492)	Admission Date	12/14/2022	Location	2 219 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

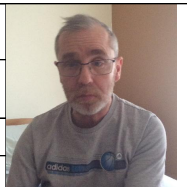
Diagnosis

Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calcific tendinitis, other site(M65.28), Amyloidosis, unspecified(E85.9), Tinea unguium(B35.1), Disorders of initiating and maintaining sleep [insomnias](G47.0), Congestive heart failure(I50.0)

Allergies	Penicillin, Sulfa Antibiotics, Fish	D.O.B.	07/30/1945	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other depressive episodes(F32.8), Atrial fibrillation, unspecified(I48.90), Vitamin B12 deficiency anaemia, unspecified(D51.9), Heart failure, unspecified(I50.9), Calci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fish, Anna (922131005492)	Admission Date	12/14/2022	Location	2 219 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being for Brian related to Disinterest, Cognitive Limitation, Short Attention Span.</p> <p>ISE Score: 0/6 Revision on: 09/25/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>	<p>• To support Brian's Psycho-Social well being through to the next review. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite Brian to programs of personal interest; 1:1 visits, exercise programs, music groups, reading groups, reminiscing, sensory programs, special events, spiritual programs, etc. Revision on: 06/28/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage Brian to engage in self-directed activities such as watching/listening to TV (Star Wars & Star Trek), listening to music, visiting with residents/team members etc. Revision on: 06/28/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• ONE to ONE: Provide Brian with individual visits for conversation, reading, reminiscing, music, humor, etc. Revision on: 04/01/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Promote the opportunity for Brian to make friendships and sit with friends during activities. Revision on: 04/01/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>			
<p>• Potential for Acute PAIN and alteration in comfort level related to Alzheimer's Dementia, ADHD, Anosognosia. Lt shoulder & arm pain. Most Current LTCF Pain Score is 0 Revision on: 07/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026</p> <p>• Promote MDS Pain Score of 0 through to the next review. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Brian)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 11/13/2022 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 05/25/2022 Revision by: Maryola Perion (RN)</p>	<p>RN Registered Practical Nurse</p> <p>Registered Practical Nurse RN</p>		
<p>• Potential to experience complications and</p>	<p>• To monitor effectiveness and</p>	<p>• COMMUNICATION: Involve/collaborate with SDM in decision making and health</p>			
Allergies	No Known Allergies	D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention(F90.0), Ga...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)	Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	for side effects of medication used each day through to the next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	teaching about medicinal regime and appropriate medication use. Revision on: 11/13/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using anti-psychotic medication, poly-pharmacy, etc. for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 11/13/2022 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff				
• URINARY (Mixed) INCONTINENCE related to Alzheimer's Dementia, Anosognosia. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Brian will have urinary incontinence managed every shift through to the next review period. Revision on: 12/10/2024 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continenence level is Incontinent. Report change to level as noted. Revision on: 07/03/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Brian wears White brief on Days and Afternoons and Midnights. Revision on: 09/05/2025 Revision by: Teresa Quinto (RPN)	PCA				
• Altered VISION related to - unable to complete visual testing CPS 5 Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Brian will be supported and assisted daily through to the next review date. Revision on: 10/12/2024 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	• COMMUNICATION: Involve/collaborate with Brian/SDM for decision making pertaining to change in visual status as needed. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up)					
• Increased risk for FALLS related to psychotropic drug use, Alzheimer's Dementia, ADHD, exit seeking, wandering, running, Use of psychotropic medications, history of falls. Revision on: 04/09/2025	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo	• COMMUNICATION: Involve/collaborate with (Brian)/SDM in decision making in fall prevention Plan of Care. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it.	PCA	D/E/N			
Allergies	No Known Allergies		D.O.B.	07/22/1962	Physician	Albert Patrick Ng	
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Gravelle, Brian (922131005453)		Admission Date	02/22/2022	Location	2 224 A	
Last Care Plan Review Completed:		10/01/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
Revision by: Danielle Loreto (RAI Coordinator)		(RAI Coordinator) Target Date: 01/01/2026	<div>Revision on: 11/16/2022 Revision by: Haley Cadarian (Quality Lead) • ENVIRONMENT: Secure environment reduce clutter, quiet environment, etc.) to reduce fall risk for Brian. PCA</div> <div>Brian will run and wander. He walks with his body slanted to one side at a time. He appears to have decreased space awareness and is at risk for falling related to all. Increase monitoring when he is wandering and running. Team to try to go long side of him when running. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED: place bed placed at knee height as he self transfers. PCA</div> <div>Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • FOOTWEAR: Ensure resident wears appropriate (non-slip) footwear for (transfers, ambulation). He will refuse shoes but will wear posey socks. He has been provided with them. Inform charge if missing or need to be replaced. PCA</div> <div>Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • HIP PROTECTORS wears hip protectors at all times to safeguard against injury. Report to Registered Staff if not wearing. PCA</div> <div>Revision on: 08/27/2024 Revision by: Prabhjot Maan (ADOC) • SPECIAL CONSIDERATION to PREVENT FALLS: Uses non skid socks. PCA</div> <div>Revision on: 11/09/2024 Revision by: Maryola Perion (RN)</div>						D/E/N
• Use of PASD (two 1/4 bedrails) to assist resident with Activity of Daily Living (bed mobility). Revision on: 03/14/2025 Revision by: Suzanne Azar (RN)		• Brian will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility) each day through to the next review date. Revision on: 03/14/2025 Revision by: Suzanne Azar (RN) Target Date: 01/01/2026	• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of (Two 1/4 bedrails to be used when in bed to aid in turning and repositioning). Revision on: 04/01/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use Two 1/4 bedrails to be used when in bed to aid in turning and repositioning Revision on: 04/01/2025						
Allergies	No Known Allergies			D.O.B.	07/22/1962	Physician	Albert Patrick Ng		
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre					Print Date	12/11/2025		
Resident	Gravelle, Brian (922131005453)			Admission Date	02/22/2022	Location	2 224 A		
Last Care Plan Review Completed:		10/01/2025							

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">• Use of PASD (two 1/4 bedrails) to assist resident with Activity of Daily Living (bed mobility). Revision on: 03/14/2025 Revision by: Suzanne Azar (RN)		Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with (bed mobility, transfer in/out of bed). Monitor every shift. Revision on: 03/14/2025 Revision by: Suzanne Azar (RN)	PCA	D/E/N		
<ul style="list-style-type: none">• SAFETY: RELATED TO WANDERING AND RUNNING IN THE HALLS TRIGGERING OTHER RESIDENTS.	<ul style="list-style-type: none">• RESIDENT WILL REMAIN SAFE AND SECURE WITH NO INJURIES THROUGH TO HIS NEXT REVIEW DATE. Target Date: 01/01/2026	<ul style="list-style-type: none">• A NEED TO MONITOR: Brian's running and wandering has been a trigger for the residents. Monitor him when he up and running and wandering. Escort and redirect resident if noted to be in other residents rooms Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none">• Brian is at high risk for ELOPEMENT related Alzheimer's Dementia, Exit seeking, ADHD and Anosognosia. Revision on: 10/12/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• To promote Brian safety and minimize risk for episode of elopement each day through next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	<ul style="list-style-type: none">• ALERT: Brian has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Brian may attempt to enter other residents rooms uninvited, please redirect when this is observed Revision on: 11/07/2024 Revision by: Haley Barisic (Quality Improvement Coordinator) <ul style="list-style-type: none">• ELOPEMENT ALERT: Redirect Brian away from elevator or exit doors as needed. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up)	PCA			
<ul style="list-style-type: none">• Potential to experience alteration in MOOD as exhibited by repetitive questions & verbalizations, persistent anger with self or others, repetitive anxious complaints, sad, pained, worried facial expressions, repetitive physical movement (pacing and running in the hallway) related to Alzheimer's Dementia, ADHD,	<ul style="list-style-type: none">• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be maintained to 0. Revision on: 04/17/2024 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Brian/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Brian for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/22/2022				
Allergies	No Known Allergies		D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)		Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
Anosognosia, Paranoia. Revision on: 08/20/2024 Revision by: Maryola Perion (RN)			Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Brian effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) • FAMILY SUPPORT: Brian enjoys visits from sister - Karen. Revision on: 05/04/2023 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up)				
• Risk for Impaired SKIN INTEGRITY related to Incontinence, use of incontinent product, Dementia. Revision on: 01/20/2024 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.		PCA		
• Altered ability to complete Activities of Daily Living (ADLs) related to Alzheimer's Dementia, ADHD, Anosognosia, Paranoia. Revision on: 01/20/2024 Revision by: Maryola Perion (RN)		• Brian will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 01/20/2024 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	• BATHING: Brian prefers (shower/bed bath) on (Thursdays and Sundays Day shifts). Two staff (EXTENSIVE TO TOTAL) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Brian is able to turn and reposition self Independently in bed May require one to two staff maximal assistance during night time or when having behaviors. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Brian requires 1 team member extensive assistance to remove and change his clothing.		PCA		
Allergies	No Known Allergies			D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)			Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>2 Maximal assistance if resident is fatigued or resistive to care. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Brian requires one team member limited assistance at meals. He can with PCA supervision and cues feed himself but level varies depending on cognition in the moment.</p> <p>Resident eats in the Orchard Lane dining room. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: He is able to walk independently but when running or wandering he PCA requires supervision and cues. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Brian requires 1 team extensive assistance for peri care, PCA brief change and other personal hygiene needs, may require maximal when resident is resistive to care or fatigued.</p> <p>One staff to shave him during shower days and as needed. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide Total assistance to use soap/water, apply PCA sanitizer or use sanitizer wipes for hand hygiene. Revision on: 10/25/2023 Revision by: Maryola Perion (RN)</p> <p>• TOILET USE: Brian requires one to two staff maximal assistance to provide peri PCA care and brief change while in bed or in the toilet.</p> <p>May require a 3rd staff to assist and total assistance depending on his behavior. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Brian is Independent with his transfer. PCA He may require two staff assistance at times depending on his behavior.</p>			
Allergies	No Known Allergies	D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)	Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Alzheimer's Dementia, ADHD, Anosognosia, Paranoia. Revision on: 01/20/2024 Revision by: Maryola Perion (RN)		Revision on: 07/11/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ORAL CARE: Brian has some teeth missing and some carious. One staff Total assistance to provide oral hygiene needs. Revision on: 10/25/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> SHAVING - Brian will have beard shaven on his shower/bath days and as needed. Revision on: 05/04/2023 Revision by: Maryola Perion (RN)	PCA	D	
<ul style="list-style-type: none"> Potential for altered hematologic symptoms or complications related to diagnosis of Leukocytosis Revision on: 10/25/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and/or minimize complications associated with Leukocytosis each day through to the next review date. Revision on: 10/25/2023 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Leukocytosis for complications or changes to health status. Revision on: 10/25/2023 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential for CONSTIPATION related to Dementia Revision on: 08/09/2022 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with SDM for decision making regarding constipation management. Revision on: 08/09/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. <ul style="list-style-type: none"> FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care 	Registered Staff		
Allergies	No Known Allergies	D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)	Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	<ul style="list-style-type: none">Brian will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	Plan. <ul style="list-style-type: none">BOWEL PROTOCOL: In place as per MD order	Staff Registered Staff			
<ul style="list-style-type: none">Sleep Patterns. Revision on: 05/25/2022 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">To promote adequate rest/sleep for Brian based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/14/2024 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	<ul style="list-style-type: none">REST PATTERN: Preferred bedtime: No specific time, usual wake time: No specific time Revision on: 04/11/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">SLEEPWEAR: Brian prefers to wear his own clothes. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)	PCA PCA			
<ul style="list-style-type: none">Potential for BOWEL INCONTINENCE related to Alzheimer's Dementia Revision on: 05/25/2022 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">Brian will have bowel incontinence managed every shift through to the next review period. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	<ul style="list-style-type: none">MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. Revision on: 05/25/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">BOWEL Continence level is Incontinent. Report change to level as noted. Revision on: 07/03/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 05/25/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">INCONTINENCE PRODUCT: Brian wears White brief on Days and Afternoons. Yellow brief at Night time. Revision on: 01/13/2025 Revision by: Maryola Perion (RN)	Registered Staff PCA PCA PCA			
<ul style="list-style-type: none">Expressed Wishes and Beliefs related to Brian's Medical Treatment and End of Life	<ul style="list-style-type: none">To support and honor Brian's expressed wishes and beliefs	<ul style="list-style-type: none">CPR: Brian wishes express NO CPR, however TRANSFER to hospital decision will be made at the time				
Allergies	No Known Allergies		D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)		Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Care Revision on: 05/24/2022 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		through to the End of Life. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	Revision on: 11/09/2022 Revision by: Maryola Perion (RN)				
• Potential for Expressive Behaviour of WANDERING, physical abuse, Sexual, socially inappropriate (voiding in inappropriate areas), RESISTANCE to care need, related to ADHD, exit seeking, Dementia in Alzheimer's disease, paranoia. Revision on: 04/18/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 0. Revision on: 10/12/2024 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	• COMMUNICATION: Involve/collaborate with (Brian)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Brian for indications to change in or for escalating expressive behaviour risk. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • TRIGGERS leading to PHYSICAL (Hitting, Slapping, kicking, punching, etc.) as expression of behaviour include (anger, frustration, confusion, Sundowning, hunger, etc.) Revision on: 09/06/2024 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Brian is attempting to strikeout; move back from his reach. Calmly indicate that care will continue when he is calm/ready. Seek Registered Staff assistance. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe, refusal to eat, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process, etc.) Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Brian is refusing to (bathe, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Brian is noted to (urine on the floor,			BSO - Internal BSO - External Social Worker	
Allergies	No Known Allergies		D.O.B.	07/22/1962	Physician	Albert Patrick Ng	
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Gravelle, Brian (922131005453)		Admission Date	02/22/2022	Location	2 224 A	
Last Care Plan Review Completed:		10/01/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, physical abuse, Sexual, socially inappropriate (voiding in inappropriate areas), RESISTANCE to care need, related to ADHD, exit seeking, Dementia in Alzheimer's disease, paranoia.</p> <p>Revision on: 04/18/2022</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p>		<p>rummaging in others belongings, wandering into others rooms) clean area using appropriate PPE, redirect resident. May have to move the other resident when Brian is not able to understand the need to leave someone's space. Report episode to Registered Staff.</p> <p>Revision on: 04/09/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: If Brian is seen coming out of his room and roaming in the hallway wearing only his brief and johnny shirt, assist him to go back to his room and to assist Brian with dressing with two staff assistance. Inform Registered staff of the behavior and document.</p> <p>Revision on: 01/13/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• WANDERING: Permit Brian to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>SEEK ADDITIONAL TEAM ASSISTANCE AS NEEDED FOR REDIRECTION</p> <p>Revision on: 11/07/2024</p> <p>Revision by: Haley Barisic (Quality Improvement Coordinator)</p> <p>• SEXUAL Behaviour: If Brian is noted to (grabbed his penis and walked down the hall with it in his hand) calmly assist him back to the privacy of his room.</p> <p>Revision on: 03/08/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</p> <p>Revision on: 03/08/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• Brian may attempt to enter other residents rooms uninvited, please redirect when this is observed to reduce the risk of altercations occurring between other Residents. Floor team to contact the Charge Nurse as needed for additional support</p> <p>Revision on: 11/07/2024</p> <p>Revision by: Haley Barisic (Quality Improvement Coordinator)</p> <p>• BSO RECOMMENDATIONS: Brian enjoys watching tv in his room or in the lounge on his floor. He also likes to listen to rock music (Journey).</p> <p>Approach from the front, never from behind. Make eye contact, arms to the side, non-confrontational. Approach slowly to give Brian time to process. Use a soft tone of voice. Active listening, allow resident to express emotions, imagine being the</p>	<p>Registered Practical Nurse RN</p>		
Allergies	No Known Allergies	D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)	Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, physical abuse, Sexual, socially inappropriate (voiding in inappropriate areas), RESISTANCE to care need, related to ADHD, exit seeking, Dementia in Alzheimer's disease, paranoia.</p> <p>Revision on: 04/18/2022</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p>			<p>resident, check for understanding. Use stop and go approach. If resident is attempting to strike out, move back from his reach. Reapproach when resident is calm. If possible try to resolve residents concern in the moment as dismissing will escalate the resident. Do not try to stop him when he is pacing or running in the hallway. Move residents out of the way.</p> <p>Revision on: 03/27/2025</p> <p>Revision by: Leslie Meloche (Recreation Aide)</p>				
<p>• Potential for altered genitourinary function or complications related to diagnosis of BENIGN PROSTATIC HYPERTROPHY (BPH).</p> <p>Revision on: 03/08/2022</p> <p>Revision by: Maryola Perion (RN)</p>		<p>• To treat and minimize signs/symptoms or complications associated with BPH through to next review date.</p> <p>Revision on: 08/07/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>Target Date: 01/01/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Brian)/SDM in decision making for BPH care management.</p> <p>Revision on: 03/08/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Benign Prostatic Hypertrophy for changes to health status and alteration or complications affecting urinary function.</p> <p>• MEDICATION: Administer medication as per MD order and monitor for side effects and effectiveness.</p> <p>Revision on: 03/08/2022</p> <p>Registered Staff</p>				
Allergies	No Known Allergies			D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)			Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for altered genitourinary function or complications related to diagnosis of BENIGN PROSTATIC HYPERTROPHY (BPH). Revision on: 03/08/2022 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD). Revision on: 03/08/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To treat and/or minimize complications associated with GERD each day through to the next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Brian)/SDM in decision making for GERD Management. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects. 		Registered Staff	
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Alzheimer's Dementia, ADHD, Anosognosia, minimal difficulty hearing. Revision on: 03/08/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> Brian will be supported to maintain current communication abilities to express self, comprehend information, etc. each day through to the review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026 <ul style="list-style-type: none"> Brian will be able to make basic needs known each day 	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Brian)/SDM for decision making about strategies needed to support effective communication. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PRIMARY LANGUAGE: Brian primary language is English. He is able to speak/understand English. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 01/20/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> INSTRUCTION GUIDANCE: Brian needs (intermittent) cueing or demonstrative 			
Allergies	No Known Allergies		D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)		Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Alzheimer's Dementia, ADHD, Anosognosia, minimal difficulty hearing. Revision on: 03/08/2022 Revision by: Maryola Perion (RN)		through to the review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	instruction in tasks and activities. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Dementia in Alzheimer's disease, ADHD, Anosognosia. Revision on: 03/08/2022 Revision by: Maryola Perion (RN)		• Brian will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 5. Revision on: 01/13/2025 Revision by: Maryola Perion (RN) Target Date: 01/01/2026	• COMMUNICATION: Involve/collaborate with (Brian)/SDM in decision making of Cognitive Loss for Dementia in Alzheimer's disease. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • ORIENTATION: Gently reorient to (person, place, time) as needed when Brian is feeling lost or in confused state. Revision on: 02/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 03/08/2022 Revision by: Maryola Perion (RN) • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area (name plate, photo, etc.) outside of room. Revision on: 01/20/2024 Revision by: Maryola Perion (RN)			PCA	
• SPIRITUAL BELIEFS: Brian is Non-Religious. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide)		• To provide Brian spiritual support as interested through to the next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026	• PERSONAL CHOICE: Respect Brian's right to decline participation in Spiritual Program. Attempt to actively engage him if he chooses to attend. Revision on: 08/17/2022 Revision by: Shayna Lee Wonsch			ACT	
Allergies	No Known Allergies			D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)			Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• SPIRITUAL BELIEFS: Brian is Non-Religious. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide)							
• Nutrition Risk Level		• Brian will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026 • Will weigh within Realistic weight range of 50-55 kg/BMI 20-22 through to next review date. Revision on: 08/07/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/01/2026 • Brian will be adequately hydrated aeb drinking at least 75% of total fluid requirement, 1370 mL, @ 25ml/kg, 54.8kg through to next review date. Revision on: 01/03/2025 Revision by: Rachelle Ly (Dietitian (RD)) Target Date: 01/01/2026 • Will meet estimated nutritional	• NUTRITION RISK: Brian is moderate risk level. Revision on: 01/15/2024 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: Brian will receive regular diet, pureed texture Revision on: 08/09/2022 Revision by: Courtney Drouillard (Dietitian) • FLUID CONSISTENCY: Brian drinks REGULAR/THIN Level 0 Fluids. Revision on: 02/24/2022 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Brian to drink a minimum of 1028 ml per day. Revision on: 01/03/2025 Revision by: Rachelle Ly (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • HIGH FIBRE: Offer fruit rite spread at breakfast M-W-F Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian)			Dietitian (RD) Diet Food Services Aide PCA Diet PCA PCA Dietary aide PCA PCA	
Allergies	No Known Allergies		D.O.B.	07/22/1962		Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)		Admission Date	02/22/2022		Location	2 224 A
Last Care Plan Review Completed:		10/01/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	requirements of 1632-1370 kcal @ 25 kcal/kg, 54-65g protein @ 1.0g/kg through to next review date. Revision on: 01/03/2025 Revision by: Rachelle Ly (Dietitian (RD)) Target Date: 01/01/2026			

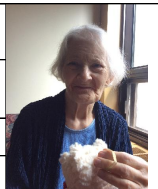
Diagnosis

Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention(F90.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Paranoid personality disorder(F60.0), Hyperplasia of prostate(N40), Other specified disorders of white blood cells(D72.8)

Allergies	No Known Allergies	D.O.B.	07/22/1962	Physician	Albert Patrick Ng
Diagnosis	Dementia in Alzheimer's disease, unspecified(F00.9), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Disturbance of activity and attention (F90.0), Ga...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gravelle, Brian (922131005453)	Admission Date	02/22/2022	Location	2 224 A
Last Care Plan Review Completed:		10/01/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to disinterest.</p> <p>ISE Score: 6/6 Revision on: 10/23/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>	<p>• To support Marion's Psycho-Social well being through to the next review.</p> <p>Marion will be encouraged to participate in 15-20 x group and or 1:1 activities per month, through the next review date. Revision on: 10/23/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/31/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; happy hour, music events, Montessori programs, manicure and hand massage, special events, etc. Revision on: 04/30/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as watching/listening to TV, listening to music/radio, visiting with residents/team members, etc. Revision on: 04/30/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music, humor, etc. Revision on: 09/18/2023 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Promote the opportunity for Marion to make friendships and sit with friends during activities. Revision on: 09/18/2023 Revision by: Mitchell Atkinson (Recreation Aide)</p>			
<p>• Potential for Persistent PAIN and alteration in comfort level related to osteoarthritis and history of fractures, bruising on Right Foot, 5th digit. Most Current LTCF Pain Score is 0. Revision on: 09/05/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 01/31/2026</p> <p>• Promote LTCF Pain Score of 0 through to the next review. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/31/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Marion)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 05/23/2024 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>Monitor pain bruising on Right Foot, 5th digit. X-Ray pending Revision on: 09/05/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 11/22/2023 Revision by: Maryola Perion (RN)</p>	<p>RN Registered Practical Nurse</p> <p>Registered Practical Nurse RN</p>		
• Sleep Patterns; Potential for alteration in	• To promote adequate	• REST PATTERN: Preferred bedtime at midnight, usual wake time around 11am	PCA		
Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025			



Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
sleep related to cognitive loss Revision on: 07/29/2025 Revision by: Danielle Loreto (RAI Coordinator)		rest/sleep for Marion based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/27/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/31/2026	and daytime naps: daily. Staff to let Marion sleep in the morning. Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, antidepressant and antipsychotic medication use.) Revision on: 07/29/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.		Registered Staff	
• Nutrition Risk Level Revision on: 02/06/2025 Revision by: Holly Laasanen		• Marion will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/22/2023 Revision by: Anna Slack (Registered Dietitian) Target Date: 01/31/2026 • Will weigh within realistic GWR 50-55 kg through to next review date. Revision on: 02/06/2025 Revision by: Holly Laasanen	• NUTRITION RISK: Marion is moderate risk level. Revision on: 05/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Marion will receive Regular diet, Pureed texture Revision on: 08/20/2024 Revision by: Anika Dhalla (Dietitian (RD)) • FLUID CONSISTENCY: Marion drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/22/2023 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Marion to drink 1125-1500 ml fluid daily. Revision on: 02/06/2025 Revision by: Holly Laasanen • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of		Dietitian (RD) PCA PCA PCA Dietary aide	
Allergies	No Known Allergies		D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)		Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved	
<ul style="list-style-type: none">• Nutrition Risk Level Revision on: 02/06/2025 Revision by: Holly Laasanen		Target Date: 01/31/2026	meals and snacks daily.			PCA	BLD	
		<ul style="list-style-type: none">• Marion will be adequately hydrated aeb drinking at least 75% of total fluid requirement 1500 mL daily @ 30 ml/kg (using 50.6 kg weight) through to next review date. Revision on: 02/06/2025 Revision by: Holly Laasanen Target Date: 01/31/2026				<ul style="list-style-type: none">• DINING INSTRUCTIONS: Provide double portion of pureed fruit at meals Revision on: 04/18/2024 Revision by: Anna Slack (Registered Dietitian)		Registered Practical Nurse
		<ul style="list-style-type: none">• HIGH CALORIE/PROTEIN IN MEALS: Provide mashed potatoes with margarine and gravy at lunch and supper Revision on: 02/06/2025 Revision by: Holly Laasanen				<ul style="list-style-type: none">• LABELLED SNACK: 1. ice cream @ Lunch Revision on: 08/21/2024 Revision by: Ronnie Fung (FSM - Food Services Manager)		PCA
<ul style="list-style-type: none">• Potential for Expressive Behaviour Wandering, VERBAL (calling staff bitch), SOCIALLY Inappropriate (slamming and punching her door, spitting medication, was caught eating her stool, and had it rolled up in multiple ball form, and placed on dresser in her room, Physically abusive (reach out and punch staff), refused meal, change clothes, throwing staff on the floor, related to Symptom Progression of Dementia and depression. Revision on: 01/03/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 3. Revision on: 05/23/2024 Revision by: Maryola Perion (RN) Target Date: 01/31/2026	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marion for indications to change in or for escalating expressive behaviour risk. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)					
			<ul style="list-style-type: none">• TRIGGERS leading to PHYSICAL (Hitting, Punching, Slapping, etc.) as expression of behaviour includes anger, frustration, confusion, invasion of personal space, Sundowning, etc.) Revision on: 09/01/2023 Revision by: Maryola Perion (RN)					
			<ul style="list-style-type: none">• PHYSICAL Behaviour: If Marion is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)					
			<ul style="list-style-type: none">• TRIGGERS leading to VERBAL (yelling, swearing, screaming, calling names, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 02/22/2024 Revision by: Maryola Perion (RN)					
			<ul style="list-style-type: none">• VERBAL Behaviour: If Marion is heard yelling, screaming, swearing or calling others names; calmly remind her to lower her voice and that chosen words are not					
Allergies	No Known Allergies			D.O.B.	10/16/1936	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Hinton, Marion (922131005521)			Admission Date	08/17/2023	Location	2 210 A	
Last Care Plan Review Completed:		10/31/2025						

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			<p>appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 02/22/2024 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to eat, etc.) as expression of behaviour include confusion, misunderstanding care needs, poor judgement, etc. <p>Revision on: 11/24/2023 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Marion is declining to change clothes, eat, etc. re-approach in 10-15 minutes. Report episode to Registered Staff. <p>Revision on: 11/24/2023 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to SOCIALLY Inappropriate (rummages, spitting medication, trying to pull the TV off the wall, taking cords out from the plugs, stool rolled up in multiple ball form and placed on dresser in her room, etc.) as expression of behaviour include (confusion, decreased insight, poor judgement, etc.) <p>Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> • SOCIALLY Inappropriate Behaviour: If Marion is noted to (rummages and entering into others spaces) gently redirect her and check her room daily and remove any items that do not belong to her as needed. <p>Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> • SOCIALLY Inappropriate Behaviour: If marion is noted to (spitting medication on floor, stool rolled up in multiple ball form, and placed on dresser in her room, etc.) clean area using appropriate PPE. Report episode to Registered Staff. <p>Revision on: 04/12/2024 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • WANDERING: Permit Marion to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Need multiple redirection from going into others rooms <p>Revision on: 12/19/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> • MEDICATION: Administer medication for therapeutic treatment of as per MD Order. Monitor effectiveness and for side effects. 			
Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre	Print Date	12/11/2025			
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A	
Last Care Plan Review Completed:		10/31/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Potential for Expressive Behaviour Wandering, VERBAL (calling staff bitch), SOCIALLY Inappropriate (slamming and punching her door, spitting medication, was caught eating her stool, and had it rolled up in multiple ball form, and placed on dresser in her room, Physically abusive (reach out and punch staff), refused meal, change clothes, throwing staff on the floor, related to Symptom Progression of Dementia and depression.</p> <p>Revision on: 01/03/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• BSO RECOMMENDATIONS:</p> <p>Wandering: Wandering into other residents' rooms, taking their belongings, moving them</p> <p>Triggers: Confusion, sundowning</p> <p>Physical: Hitting, spitting, throwing things</p> <p>Triggers: Frustration, confusion, anger, misunderstanding care intention, progression of dementia</p> <p>Verbal: yelling, calling names</p> <p>Triggers: Loss of control, limitation of self expression</p> <p>Resistant to Care: refusing to change clothing, spitting out medication</p> <p>Triggers: Misunderstanding care intention, anger, frustration</p> <p>Recommendations: Permit the resident to roam in common areas, redirecting away from elevators and other residents rooms. Use stop and go approach. Reapproach when the resident is calm/ready. Report episode to registered staff. The resident likes to hold her stuffed animal/baby. Verbal: Ask the resident to lower her voice and attempt to resolve her concerns. Resistant to Care: Reapproach in 10-15 minutes. Report to registered staff.</p> <p>Socially Inappropriate: Rummaging. Gently redirect to an activity of interest such as watching TV, funny animal videos, listening to music, holding her stuffed animals/baby. Check her room daily and remove any items that do not belong to her as needed. Marion likes to attend main floor programs and socialize with other residents.</p> <p>Revision on: 12/10/2025 Revision by: Leslie Meloche (Recreation Aide)</p>	Nurse RN	
<p>• Increased risk for FALLS related to Severe dementia, Macular degeneration, OA, Depression and hx of fall and placing self on the ground.</p> <p>Revision on: 12/19/2024 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.</p> <p>Target Date: 01/31/2026</p>	<p>• COMMUNICATION: Involve/collaborate with SDM in decision making in fall prevention Plan of Care.</p> <p>Revision on: 11/14/2025 Revision by: Hetal Patel (RN)</p> <p>• CALL BELL: Place call bell within Marion's reach, check that it is in working order and remind/encourage to use it.</p> <p>Revision on: 11/23/2025</p>	PCA	Q1H
Allergies	No Known Allergies		D.O.B.	10/16/1936
Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location 2 210 A
Last Care Plan Review Completed:		10/31/2025		

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			Revision by: Tola Omolade (ADOC)					
			• ENVIRONMENT: Secure environment (reduce clutter, quiet environment, etc.) to reduce fall risk for Marion.				PCA	
			Revision on: 11/14/2025 Revision by: Hetal Patel (RN)					
			• FOOTWEAR: Ensure resident wears appropriate footwear (non-slip) for transfers and ambulation.				PCA	
			Revision on: 11/14/2025 Revision by: Hetal Patel (RN)					
			• GARMENTS: Marion wears hip protectors at all times to safeguard against injury.				PCA	
			Revision on: 11/14/2025 Revision by: Hetal Patel (RN)					
			• ALARMS: Marion has clip alarm. Check placement and working order. Staff respond when alarm is heard.				PCA	D/E/N
			Revision on: 11/14/2025 Revision by: Hetal Patel (RN)					
			• SUPPLEMENT: Vitamin D supplement and Denosumab ML (Millilitre) 60mg/ml as per MD order to maintain bone density to prevent injuries.					
			Revision on: 05/13/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• PURPOSEFUL ROUNDING: Conduct purposeful rounding to assess residents needs; for pain, positioning, peri-needs or possessions for safety, lower self on ground, getting up and wandering				PCA	
			Revision on: 11/14/2025 Revision by: Hetal Patel (RN)				Registered Practical Nurse RN	
• Risk for Impaired SKIN INTEGRITY related to occasionally incontinent of bladder, use of an incontinent product, Thin fragile Skin. Revision on: 08/02/2024 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 01/31/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.				PCA	
• Potential to experience alteration in fluid		• To promote fluid consumption	• COMMUNICATION: Involve/collaborate with SDM in decision making for plan of					
Allergies	No Known Allergies			D.O.B.	10/16/1936	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Hinton, Marion (922131005521)			Admission Date	08/17/2023	Location	2 210 A	
Last Care Plan Review Completed:		10/31/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
volume or episode of DEHYDRATION related to use of diuretic, poor oral and fluid intake. Revision on: 02/21/2024 Revision by: Maryola Perion (RN)	and minimize risk for dehydration each day through to the next review date. Revision on: 02/26/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/31/2026	Hydration/Fluid consumption and risks of dehydration. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. • PROMOTE FLUIDS: Promote Marion to consume fluids; amount as per Nutrition Care Plan. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	Registered Staff	
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 11/24/2023 Revision by: Maryola Perion (RN)	• Marion will receive support to use toilet, commode, bedpan and promote optimal bowel continence each day through to the next review. Revision on: 11/24/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026 • Marion will have bowel incontinence managed every shift through to the next review period. Revision on: 11/24/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. Revision on: 11/24/2023 Revision by: Maryola Perion (RN) • BOWEL Continence level is Incontinent. Report change to level as noted. Revision on: 07/29/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 11/24/2023 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Marion uses a white Prevail product Revision on: 05/13/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff PCA PCA PCA	
• URINARY Functional INCONTINENCE related to Dementia, Diuretic medication. Revision on: 11/24/2023 Revision by: Maryola Perion (RN)	• Marion will have urinary incontinence managed every shift through to the next review period. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is Incontinent. Report change to level as noted. Revision on: 11/21/2024 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Marion uses a white Prevail product	PCA PCA	
Allergies	No Known Allergies		D.O.B.	10/16/1936
Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)		Admission Date	08/17/2023
			Location	2 210 A
Last Care Plan Review Completed:		10/31/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • URINARY Functional INCONTINENCE related to Dementia, Diuretic medication. Revision on: 11/24/2023 Revision by: Maryola Perion (RN) 		Revision on: 05/13/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> • Potential to experience alteration in MOOD as exhibited by repetitive questions, persistent anger with self or others, crying, unpleasant mood in the morning, sad, pained, worried facial expression related to Depression, Dementia. Revision on: 11/24/2023 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be maintained to 0. Revision on: 05/23/2024 Revision by: Maryola Perion (RN) Target Date: 01/31/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marion for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Marion effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) 			
<ul style="list-style-type: none"> • SPIRITUAL BELIEFS: Marion is of the Protestant Faith. Revision on: 09/18/2023 Revision by: Mitchell Atkinson (Recreation Aide) 	<ul style="list-style-type: none"> • To provide Marion spiritual support as interested through to the next review date. Revision on: 09/18/2023 Revision by: Mitchell Atkinson (Recreation Aide) Target Date: 01/31/2026 	<ul style="list-style-type: none"> • PERSONAL CHOICE: Respect Marion's right to decline participation in Spiritual Program. Please attempt to engage her if she chooses to attend spiritual programs. Revision on: 09/18/2023 Revision by: Mitchell Atkinson (Recreation Aide) 			
<ul style="list-style-type: none"> • Potential for CONSTIPATION related to Dementia 	<ul style="list-style-type: none"> • Marion will have regular soft formed bowel movements every 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Marion/SDM) for decision making regarding constipation management. 			
Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision on: 09/16/2023 Revision by: Maryola Perion (RN)	1-2 days through to the next review. Revision on: 09/16/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026 • To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 09/16/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026	Revision on: 09/16/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order	Registered Staff Registered Staff Registered Staff			
• Altered VISION related to Macular degeneration and able to see large print only. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	• Marion will function safely in her new environment. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026 • To treat and minimize complications of macular degeneration through to next review date. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026	• COMMUNICATION: Involve/collaborate with SDM for decision making pertaining to change in visual status as needed. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • READING: Marion uses large print material to aid with reading. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)	PCA			
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to severe Dementia Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	• Marion will be supported to make basic needs known each day through to the review date. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026	• COMMUNICATION: Involve/collaborate with SDM for decision making about strategies needed to support effective communication. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • PRIMARY LANGUAGE: Marion's primary language is English. She is able to a speak/understand English.				
Allergies	No Known Allergies		D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)		Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		Revision on: 05/23/2024 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • INSTRUCTION GUIDANCE: Marion needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• COGNITIVE LOSS; alteration in thought processes (memory loss, altered judgement, etc.) related to progression of Dementia Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	• Marion will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making of Cognitive Loss for Dementia. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • ORIENTATION: Gently reorient to (person, place, time) as needed when Marion is feeling lost or in confused state. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routine and activities Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area (name plate) outside of room. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	PCA		
• Altered ability to complete Activities of Daily Living (ADLs) related to severe dementia, macular degeneration, depression OA and Hypothyroidism. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	• Marion will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 11/22/2023 Revision by: Maryola Perion (RN) Target Date: 01/31/2026 • Marion will be supported to	• BATHING: Marion prefers (shower/tub bath) on (Wednesdays and Sundays on Day shifts). Marion participates by (holding a wash cloth and being cued). Two staff (Extensive 1 team member) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 08/20/2025 Revision by: Teresa Quinto (RPN) • BED MOBILITY: Marion is independent with her bed mobility.	PCA		
Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A
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Care Plan Report

Focus	Goal	Interventions		Position	Freq/Resolved
	maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026	If fatigued, she may require 1 team member extensive assistance. Revision on: 07/29/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">DRESSING: Marion requires extensive assistance from 1 team members with dressing her upper and lower body. 2 IF RESISTIVE TO CARE OR FATIGUED. Revision on: 12/04/2025 Revision by: Alyssa Egan (ADOC) <ul style="list-style-type: none">EATING: Marion is independent with cues and set up. Marion requires intermittent one staff member to assistance. Varies on her cognition and expressions. Marion eats in the home area dining room - Floor 2. Revision on: 12/04/2025 Revision by: Alyssa Egan (ADOC) <ul style="list-style-type: none">LOCOMOTION: Resident walks unaided. At times she may require 1 team member to guide her or walk hand and hand with her. Revision on: 12/04/2025 Revision by: Alyssa Egan (ADOC) <ul style="list-style-type: none">PERSONAL HYGIENE: Marion is able to wash/dry her hands, face with cueing and reminders from staff. Intermittent 1 team member extensive assistance when fatigued. She requires one staff to provide peri care. Revision on: 12/04/2025 Revision by: Alyssa Egan (ADOC) <ul style="list-style-type: none">HAND HYGIENE: 1 staff to provide total assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 08/13/2024 Revision by: Katie Savo (RAI Coordinator) <ul style="list-style-type: none">TOILET USE: Marion requires 1 team members to transfer her on/off the toilet. She requires two staff assistance with applying her incontinent product, providing peri care and adjusting her clothes. Revision on: 05/13/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">TRANSFERRING: 1 team members with transfers. Revision on: 02/07/2025		PCA	
Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:	10/31/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to severe dementia, macular degeneration, depression OA and Hypothyroidism. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)			Revision by: Teresa Quinto (RPN) <ul style="list-style-type: none"> ORAL CARE: Marion has no teeth or dentures. She requires supervision assistance PCA for oral care. Team to complete when she cannot follow direction. Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Marion Medical Treatment and End of Life Care Revision on: 09/01/2023 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To support and honor Marion expressed wishes and beliefs through to the End of Life. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026	<ul style="list-style-type: none"> DNR: Marion wishes DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> FUNERAL Arrangements: Families First 1065 Lauzon Rd Windsor, ON N8S 3M8 519-969-5841. Revision on: 05/20/2024 Revision by: Maryola Perion (RN)		Social Worker ST	
<ul style="list-style-type: none"> Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS 		<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with OA through to the next review date. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with SDM in decision making of musculoskeletal care management. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for management of OA as per MD order. Monitor effectiveness and for side effects. Revision on: 08/17/2023			
Allergies	No Known Allergies		D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)		Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Back-up) Target Date: 01/31/2026	Revision by: Jenny Liu (RAI Coord Back-up) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OA for discomfort/ complications or changes to health status. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • PAIN MANAGEMENT for OA prescribed and in place; refer to Pain Care Plan. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up)		
• Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM	• To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/31/2026	• COMMUNICATION: Involve/ collaborate with SDM in decision making of thyroid care management. Revision on: 09/01/2023 Revision by: Maryola Perion (RN) • HEALTH TEACHING: Engage with Marion/SDM to enhance her comprehension of (specify: treatment, possible complications, disease trajectory, etc.) associated with HYPOTHYROIDISM. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with HYPOTHYROIDISM for changes to health status and alteration or complications affecting endocrine function. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 08/17/2023 Revision by: Jenny Liu (RAI Coord Back-up) • LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 09/01/2023 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse PCA	

Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025			

Care Plan Report


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Diagnosis

Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis (M15.0), Hypothyroidism, unspecified(E03.9), Unspecified fracture of neck of femur, closed(S72.090)

Allergies	No Known Allergies	D.O.B.	10/16/1936	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Degeneration of macula and posterior pole(H35.3), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified (E03.9), Uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Hinton, Marion (922131005521)	Admission Date	08/17/2023	Location	2 210 A
Last Care Plan Review Completed:		10/31/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• Potential for PAIN and alteration in comfort level related to dx with osteoarthritis. Most Current MDS Pain Score is 1.</p> <p>Revision on: 12/04/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review.</p> <p>Revision on: 03/27/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 03/04/2026</p>	<p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• PHYSIO TREATMENT: refer to Physio care plan for exercise plan</p> <p>Revision on: 12/04/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• REST: accommodate resident rest and relaxation preference (Specify i.e. breaks between activities, remaining in bed, etc.).</p> <p>• MEDICATION: Administer analgesic medication as needed as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</p> <p>Revision on: 12/04/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>			RN Registered Practical Nurse	
<p>• Strengthening Exs</p> <p>Revision on: 12/02/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>		<p>• Increased overall strength for B/L UE and LE from 3/5 to 3+/5 over next 3 months.</p> <p>Revision on: 12/02/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p> <p>Target Date: 03/04/2026</p>	<p>• Strengthening exs for B/L UE and LE within pain limits with 1 lbs, 10 reps, 2-3 x week</p> <p>Revision on: 12/02/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>			PT - Physiotherapist PTA	
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related resident doesn't like to attend main floor programs</p> <p>Her ISE score is 6/6</p> <p>Revision on: 09/03/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>		<p>• Team members will support Pauline in reducing risk of social isolation by participating in activities of personal choice for 15-20 times per month by the next review date.</p> <p>Revision on: 09/03/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>Target Date: 03/04/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; such as spiritual activities, music activities, sing along, beauty club, happy hour, fun and games, etc.</p> <p>Revision on: 11/30/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as walking, conversing with peers, baby doll therapy.</p> <p>Revision on: 06/03/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• ONE to ONE: Provide her with individual visits for conversation and reminiscing, also hand massage and manicures and music listening</p> <p>Revision on: 06/03/2025</p>			Recreation Aide	
Allergies	metFORMIN, Penicillin		D.O.B.	04/10/1941	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified(I48....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Jones, Pauline (922131005606)		Admission Date	12/27/2024	Location	2 201 B	
Last Care Plan Review Completed:		12/04/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SOCIAL INTERACTION: Promote opportunity for Pauline to make friendships and sit with friends during activities Revision on: 01/07/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	Recreation Aide			
• Potential for Expressive Behaviour of wandering, resistive to care, socially inappropriate, delusions and hallucinations. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote safety for Pauline and/or others during each episode of Behaviour through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 • To decrease episodic frequency of Behaviour by next review date. ABS score will be less than 1. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Pauline for indications to change in or for escalating expressive behaviour risk. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to RESISTANCE to Care Needs of refusing medication, refusing to change clothing as expression of behaviour include (confusion, misunderstanding care needs) Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESISTANCE to Care Need: If Pauline is declining to (take morning medications, changing clothing) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • SOCIALLY Inappropriate Behaviour: If is noted entering into other residents rooms, redirect her to her own room. Show her her name plate. If noted in other residents beds team to try to encourage her to get up. Due to cognitive loss resident may refuse and require multiple reapproaches from the team. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • WANDERING/PACING: Permit Pauline to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • HALLUCINATION: hears someone outside or a knock on the door, will check outside and wave hello. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • DELUSION: believes that people are at the door,; make lots of food, becomes upset	Registered Nurse RN Registered Practical			
Allergies	metFORMIN, Penicillin		D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Jones, Pauline (922131005606)		Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of wandering, resistive to care, socially inappropriate, delusions and hallucinations. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>when believes that people are in the room; people on TV can see and hear her. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)</div>	<div>Nurse RN</div>			
<div>• SPIRITUAL BELIEFS: Pauling is of the Protestant Faith. Revision on: 06/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</div>	<div>• To provide Pauline with spiritual support as interested through to the next review date. Revision on: 06/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/04/2026</div>	<div>• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including Hymn Sing, Catholic Mass, Church Service, etc. Revision on: 06/03/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</div>				
<div>• Altered VISION related to aging and has glasses but does not wear them Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>	<div>• Pauline to use eyeglasses for vision correction daily through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026</div>	<div>• COMMUNICATION: Involve/collaborate with Pauline/SDM for decision making pertaining to change in visual status as needed. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • EYEGLASSES: Pauline has eyeglasses but declines to use them. She is able to navigate and see without them. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator) • READING: Pauline uses large print material to aid with reading. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)</div>	<div>PCA PCA</div>			
<div>• Gait Training Revision on: 03/12/2025 Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• To increase walking distance from 30ft to 60ft in next 3 months.</div>	<div>• 1:1 Gait training with cue for B/L proper heel toe pattern and foot clearance, Distance as best tolerated, 2-3 x a week; 1:1 Sit to stand with walker, cue for proper use of walker to complete sit to stand, 3-5</div>	<div>PT - Physiotherapi st</div>			
Allergies	metFORMIN, Penicillin		D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)		Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 06/11/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 03/04/2026	reps, 2-3 x a week; Revision on: 06/11/2025 Revision by: Shina Wadhwa (Physical Therapist)			PTA	
• URINARY Functional INCONTINENCE related to Dementia Diagnosis Revision on: 01/07/2025 Revision by: Jenny Liu (RAI Coord Back-up)		• Pauline will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 • Pauline will have urinary incontinence managed every shift through to the next review period. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 01/07/2025 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is (OCCASIONALLY Incontinent). Report change to level as noted. Revision on: 01/07/2025 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Resident uses incontinent products, Pull-up Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA <	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		(Dietitian (RD)) Target Date: 03/04/2026 • Pauline will be adequately hydrated aeb drinking at least 75% of total fluid requirement @25 ml/kg, 64.7kg through to next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 • Will meet estimated nutritional requirements of 1618 kcal @ 25 kcal/kg, 65g protein @ 1.0g/kg through to next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026					
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to (use of diuretic, etc.) Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. • PROMOTE FLUIDS: Promote Pauline to consume fluids; amount as per Nutrition Care Plan. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)			Registered Staff	
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment and often up during the night per POA. Revision on: 12/27/2024		• To promote adequate rest/sleep for Pauline based on identified sleep patterns/preferences each night	• REST PATTERN: Preferred bedtime 10PM, Allow resident to wake on her own. When she is awake she can be provided with care and meal.			PCA	
Allergies	metFORMIN, Penicillin		D.O.B.	04/10/1941	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Jones, Pauline (922131005606)		Admission Date	12/27/2024	Location	2 201 B	
Last Care Plan Review Completed:		12/04/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Jenny Liu (RAI Coord Back-up)	through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by agitated related to Dementia Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) 	<ul style="list-style-type: none"> To decrease episodic frequency of agitation by next review date. DRS score will be less than (0). Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Pauline for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) RESIDENT STRENGTHS: Build on Pauline effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) 			
<ul style="list-style-type: none"> Risk for Impaired SKIN INTEGRITY related to impaired mobility, cognitive decline and Dementia. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) 	<ul style="list-style-type: none"> To protect and maintain skin integrity each day through to the next review. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 	<ul style="list-style-type: none"> SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. 	PCA		
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (memory loss, altered judgement, etc.) related to progression of Dementia Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) 	<ul style="list-style-type: none"> (Resident name) will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Pauline feeling lost or in confused state. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) CUE TASKS: Break tasks into manageable subtasks, Pauline can comprehend and follow when needed. Revision on: 12/04/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA		
<ul style="list-style-type: none"> Pauline is at high risk for ELOPEMENT 	<ul style="list-style-type: none"> To promote Pauline safety and 	<ul style="list-style-type: none"> ALERT: Pauline has potential to attempt elopement. If heard making requests to 			
Allergies	metFORMIN, Penicillin	D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)	Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
related to wandering, delusional and Dementia. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		minimize risk for episode of elopement each day through next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • ELOPEMENT ALERT: Redirect Pauline away from elevator or exit doors as needed. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		PCA	
• Increased risk for FALLS related to Dementia, impaired mobility, cognitive decline, hypertension and Lumbar osteoarthritis. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • ENVIRONMENT: Secure environment reduce clutter, to reduce fall risk for Pauline. Revision on: 01/07/2025 Revision by: Jenny Liu (RAI Coord Back-up) • FOOTWEAR: Ensure resident wears appropriate footwear at all times. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.		PCA PCA PCA Registered Staff	D/E/N
• Altered COMMUNICATION as exhibited by limitations to comprehension related to Dementia. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• Pauline will continue to freely express self and adequately comprehend information each day through to the next review period. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026 • Pauline will be supported to make basic needs known each day through to the review date. Revision on: 03/27/2025	• PRIMARY LANGUAGE: Pauline primary language is English. She is able to speak/understand English. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • INSTRUCTION GUIDANCE: Pauline needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	metFORMIN, Penicillin		D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)		Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to comprehension related to Dementia. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026				
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Hyperlipidemia, hypertension, type II diabetes, A-fib, Valvular heart disease, Lumbar osteoarthritis, CKD, GIST and Dyslipidemia. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Pauline will have ALL ADL care needs met each day through the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> BATHING: Pauline prefers (shower/tub bath) on (Tuesdays and Fridays on Evening shifts). Pauline participates by (holding a wash cloth and being cued). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> BED MOBILITY: Pauline is able to turn and reposition in bed without any assistive device or staff. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> DRESSING: Pauline like to say that her clothes are ok, doesn't need to be changed even though they do need to be changed. Team to encourage and reapproach when needed. <p>One team member to provide extensive assistance to assist her lower extremities, and she is able to dress her upper body but may require intermittent limited assistance.</p> Revision on: 12/04/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> EATING: Set up help only, team to cut up her food. Pauline is able to feed herself onec set up by the team. She eats on the floor dining room. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> LOCOMOTION: Pauline is independent with ambulation on the home area without any assistive device. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
Allergies	metFORMIN, Penicillin	D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48.....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)	Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Hyperlipidemia, hypertension, type II diabetes, A-fib, Valvular heart disease, Lumbar osteoarthritis, CKD, GIST and Dyslipidemia. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)			<ul style="list-style-type: none"> PERSONAL HYGIENE: Pauline is able to wash her face, hand, comb her hair and do pericare with cues and supervision, intermitted assistance require. However One team member to provide peri-care when needed Revision on: 12/04/2025 Revision by: Danielle Loreto (RAI Coordinator) HAND HYGIENE: 1 staff to provide REMINDER assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) TOILET USE: Pauline is able to go on/off the toile PCA <p>She requires one team member to apply her pull up after and assist with peri-care if needed. Revision on: 06/12/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> TRANSFERRING: Pauline is able to transfer herself between surfaces without any assistive device or staff. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) ORAL CARE: Pauline is able to complete her own oral care with reminders. She has both upper and lower dentures. Team to monitor to see if she is removing and cleansing. Revision on: 12/04/2025 Revision by: Danielle Loreto (RAI Coordinator) FOOT CARE: Registered staff to complete toenail care on her shower days. Report long toe nails or other abnormalities as noted. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) 			PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Pauline Medical Treatment and End of Life Care Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> To support and honor Pauline expressed wishes and beliefs through to the End of Life. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> CPR: DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	metFORMIN, Penicillin			D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)			Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Pauline Medical Treatment and End of Life Care Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)						
<ul style="list-style-type: none"> Potential for altered bone density related to diagnosis of OSTEOPOROSIS. 		<ul style="list-style-type: none"> To treat and minimize complications associated with OSTEOPOROSIS through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> HEALTH EDUCATION: Engage with Pauline/SDM to enhance her comprehension of (treatment, possible complications, etc.) associated with osteoporosis. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)		Registered Staff	
<ul style="list-style-type: none"> Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. <ul style="list-style-type: none"> MEDICATION: Administer medication (ORAL ANTIHYPERGLYCEMIC medication) for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		Registered Staff	
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to; Atrial Fibrillation , Hyperlipidaemia , Hypertension 		<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with Atrial Fibrillation , Hyperlipidaemia , Hypertension through to the next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Atrial Fibrillation , Hyperlipidemia , Hypertension) for changes to health status and alteration or complications affecting cardiac function. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator)		Registered Practical Nurse RN	
Allergies	metFORMIN, Penicillin		D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)		Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to; Atrial Fibrillation , Hyperlipidaemia , Hypertension 	Target Date: 03/04/2026			
<ul style="list-style-type: none"> Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of (metformin and penicillin). Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Pauline will be protected from exposure to allergen each day through next review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status and complications. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> ALLERGY ALERT: Pauline has ALLERGY to metformin and penicillin. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> MD/PHARMACY ALERT: Notify the MD and Pharmacy of Pauline Allergy and minimize risk for exposure to allergen. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)		
<ul style="list-style-type: none"> Potential for bruising, bleeding, clotting or other complications related to use of (ANTICOAGULANT) medication. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> To monitor for bleeding and minimize complications related to use of (apixaban) through the review date. Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident using Anticoagulant therapy for changes to health status and complications causing bleeding or clotting issues. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> BLEEDING ALERT: Notify nurse immediately if Pauline is bleeding (noted blood in PCA urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted. 	Registered Staff	

Allergies	metFORMIN, Penicillin	D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)	Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> • BOWEL Continence - Pauline is continent and has self recognition of urge to defecate. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> • Pauline to remain continent of bowels through next review date Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/04/2026	<ul style="list-style-type: none"> • BOWEL Continence level is USUALLY CONTINENT. Report change to level as noted. Revision on: 03/14/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> • SELF TOILETING:Pauline toilets self for bowel movements. Each shift ask if he/she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 12/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	


Diagnosis

Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified(I48.90), Primary generalized (osteo)arthrosis(M15.0), Chronic kidney disease, unspecified(N18.9), Mild cognitive disorder (F06.7), Need for assistance due to reduced mobility(Z74.0), Mitral valve disease, unspecified(I05.9), Kaposi's sarcoma of gastrointestinal sites(C46.70)

Allergies	metFORMIN, Penicillin	D.O.B.	04/10/1941	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hyperlipidaemia, unspecified(E78.5), Benign hypertension(I10.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Atrial fibrillation, unspecified (I48.....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Jones, Pauline (922131005606)	Admission Date	12/27/2024	Location	2 201 B
Last Care Plan Review Completed:		12/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level (may be left wrist a times) Most Current LTCF Pain Score is 0 Revision on: 11/12/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Target Date: 02/13/2026 	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) 	RN Registered Practical Nurse	
<ul style="list-style-type: none"> Nutrition Risk Level LOW Revision on: 11/04/2025 Revision by: Anisha Walli (Dietitian (RD)) 	<ul style="list-style-type: none"> John will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026 Will weigh within realistic GWR 85-95 kg through to next review date. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/13/2026 John will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2170 ml/day (25 ml/kg using 86.9kg) through to next review date. Revision on: 11/04/2025 Revision by: Anisha Walli (Dietitian (RD)) Target Date: 02/13/2026 	<ul style="list-style-type: none"> NUTRITION RISK: John is low risk level. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) DIET ORDER: John will receive regular diet, regular texture Revision on: 08/05/2025 Revision by: Maryola Perion (RN) FLUID CONSISTENCY: John drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/05/2025 Revision by: Maryola Perion (RN) FLUID TARGET: Encourage John to drink a minimum of 1750 ml/day Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) 	Dietitian (RD) PCA PCA PCA	

Allergies	Erythromycin, Penicillin	D.O.B.	04/13/1952	Physician	Albert Patrick Ng	
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Knoll, John (922131005650)	Admission Date	08/05/2025	Location	2 206 A	
Last Care Plan Review Completed:		11/13/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 09/24/2025 Revision by: Danielle Loreto (RAI Coordinator)	• John will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 09/24/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order	Registered Staff Registered Staff			
• STRONG PARTICIPATION in Activities John's ISE 6/6 Revision on: 09/20/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	• John will be supported to maintain participation in activities 20-25 times per month by the next review date. Revision on: 09/20/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/13/2026	• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; bingo, exercise programs, concerts, happy hour, movies, parties, outings. Revision on: 09/20/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as reading paper, watching TV in own room, walking, conversing with peers, etc. Revision on: 09/20/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ASSISTANCE: Provide assistance/encouragement to get him to scheduled activities - Accompany in elevator, Walk with, Guide to, Porter, Cue Direction, Reminders, etc. Revision on: 09/20/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation, reminiscing, etc. Revision on: 09/20/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• Risk for Impaired SKIN INTEGRITY related to Fragile skin, swelling to Left outer hand Revision on: 08/30/2025 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Target Date: 02/13/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.	PCA			
• John is at high risk for ELOPEMENT	• To promote JOhn safety and	• ALERT: John has potential to attempt elopement. If heard making requests to leave				
Allergies	Erythromycin, Penicillin		D.O.B.	04/13/1952	Physician	Albert Patrick Ng
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Knoll, John (922131005650)		Admission Date	08/05/2025	Location	2 206 A
Last Care Plan Review Completed:		11/13/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
related to Wanting to leave Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator)		minimize risk for episode of elopement each day through next review date. Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • DIVERSION ACTIVITY: Resident responds well to (playing music, doing puzzles, reading, conversing, watching TV, etc.) to divert attention when exit seeking. Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • ELOPEMENT ALERT: Redirect John away from elevator or exit doors as needed. Revision on: 08/24/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• SPIRITUAL BELIEFS: John is of the Catholic Faith. Revision on: 08/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		• To provide John spiritual support as interested through to the next review date. Revision on: 08/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/13/2026	• SPIRITUAL PROGRAMS: Encourage him to attend spiritual programs of his choice including Hymn Sing, Catholic Mass, Church Service, etc. Revision on: 08/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• Potential for Expressive Behaviour of (SOCIALLY , Inappropriate, WANDERING, Resistive to care) nature related to Dementia Revision on: 08/14/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety for John and/or others during each episode of (wandering, urinating in sinks and garbage) through to the next review date. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk. Revision on: 09/24/2025 Revision by: Tola Omolade (ADOC) • PHYSICAL Behaviour: If John Knoll is attempting to strikeout; move back from his/her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance. Revision on: 09/24/2025 Revision by: Tola Omolade (ADOC) • RESISTANCE to Care Need: If John is declining to (Specify: bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • SOCIALLY Inappropriate Behaviour: Urinating in the sink and garbage			PCA Registered Practical Nurse PCA	
Allergies	Erythromycin, Penicillin		D.O.B.	04/13/1952	Physician	Albert Patrick Ng	
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Knoll, John (922131005650)		Admission Date	08/05/2025	Location	2 206 A	
Last Care Plan Review Completed:		11/13/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (SOCIALY , Inappropriate, WANDERING, Resistive to care) nature related to Dementia</p> <p>Revision on: 08/14/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>When resident was in hospital he was using the sink and garbage to urinate. Since his admission resident has been noted to flush his briefs causing flooding in his room.</p> <p>INTERVENTION</p> <p>Team to assess and offer when resident is wandering to escort him to the washroom.</p> <p>Assess for non-verbal expressions that resident may need to use the toilet.</p> <p>Reminder resident where his washroom is located. Assist him to locate it.</p> <p>Monitor for flushing of hi brief. Can turn the toilet off when needed.</p> <p>Revision on: 08/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit John to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 08/05/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction)</p> <p>Physical: Hitting, striking out</p> <p>Triggers: Confusion</p> <p>Recommendations: Move away from John's reach. Use stop and go approach. If John is striking out at residents, move residents away from John or escort John to a quieter place to relax. John likes to attend main floor programs and go outside for fresh air.</p> <p>Revision on: 12/10/2025</p> <p>Revision by: Leslie Meloche (Recreation Aide)</p>			
<p>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Dementia, Asperger's</p> <p>Revision on: 08/14/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• John will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date.</p> <p>Revision on: 08/05/2025</p>	<p>• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.).</p> <p>Revision on: 11/13/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• INSTRUCTION GUIDANCE: John needs (intermittent) cueing or demonstrative instruction in tasks and activities.</p>			
Allergies	Erythromycin, Penicillin	D.O.B.	04/13/1952	Physician	Albert Patrick Ng
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Knoll, John (922131005650)	Admission Date	08/05/2025	Location	2 206 A
Last Care Plan Review Completed:		11/13/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Altered VISION related to use of glasses Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"> John supported to use eyeglasses as needed for vision correction daily through to the next review date. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	<ul style="list-style-type: none"> EYEGLASSES: John wears eyeglasses as needed. Assist to clean eyeglasses as needed and store (night table drawer) when sleeping. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"> John will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Will maintain current CPS score Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	<ul style="list-style-type: none"> CUE TASKS: Break tasks into manageable subtasks, John can comprehend and follow. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Increased risk for FALLS related to Dementia. Limitation of cognitive function/altered judgement Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"> To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 02/13/2026	<ul style="list-style-type: none"> CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	D/E/N
			<ul style="list-style-type: none"> SPECIAL CONSIDERATION to PREVENT FALLS: Resident has syncope Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> ALARM: Requires Bed/Chair alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/02/2025		PCA	D/E/N
Allergies	Erythromycin, Penicillin		D.O.B.	04/13/1952	Physician	Albert Patrick Ng
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Knoll, John (922131005650)		Admission Date	08/05/2025	Location	2 206 A
Last Care Plan Review Completed:		11/13/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Increased risk for FALLS related to Dementia. Limitation of cognitive function/altered judgement Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)		Revision by: Teresa Quinto (RPN)			
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Limited Mobility Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)	<ul style="list-style-type: none"> John will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	<ul style="list-style-type: none"> BATHING: John prefers (shower) on (Monday and Thursdays on Day shift). Resident participates by completing his shower, needs reminders, cues and set up to throughout. Require 1 team member extensive assistance to complete the tasks. PCA Nail care to be provided on shower day. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> BED MOBILITY: John is independent with his ability to move in bed. PCA Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> DRESSING: John requires reminders and set up for dressing to participate. He can dress his upper and lower body with 1 team member extensive assistance. PCA Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> EATING: John is independent with eating. Has his meals in the 2nd floor dining room. PCA Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> LOCOMOTION: is independent with his ambulation no gait aid. PCA Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> PERSONAL HYGIENE: John requires reminders with set up to participate with his personal hygiene such as brushing his teeth, washing hands, face, applying PCA			
Allergies	Erythromycin, Penicillin	D.O.B.	04/13/1952	Physician	Albert Patrick Ng
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Knoll, John (922131005650)	Admission Date	08/05/2025	Location	2 206 A
Last Care Plan Review Completed:	11/13/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Limited Mobility Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)			deodorant, brushing hair- 1 team member extensive assistance to aid in completion. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: 1 staff to provide (REMINDERS) assistance to (use soap/water, PCA apply sanitizer, rub hands together, dry hands) for hand hygiene. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOILET USE: John is able to toilet himself at times. He needs prompts and direction to find his washroom. PCA Care level varies depending on his cognition in the moment may require 1 team member extensive assistance. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFERRING: John is independent with transferring. PCA Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • ORAL CARE: Independent with oral care. Needs reminders and intermittent set up. PCA Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • SHAVING - John requires a team member to shave him. PCA Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)					D
• Expressed Wishes and Beliefs related to John Medical Treatment and End of Life Care Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)		• To support and honor John expressed wishes and beliefs through to the End of Life. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	• CPR: Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)					
• Strength Training Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increase strength in B/L LE from 4/5 to 4+/5 in next 3 months; Revision on: 11/07/2025	• Strengthening exs with peddlers or weights of 2-3lbs, B/L UE and LE, 15 mins/10reps,1-2 sets;2-3 x a week; Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)				PT - Physiotherapist PTA	
Allergies	Erythromycin, Penicillin			D.O.B.	04/13/1952	Physician	Albert Patrick Ng	
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Knoll, John (922131005650)			Admission Date	08/05/2025	Location	2 206 A	
Last Care Plan Review Completed:		11/13/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 02/13/2026				
• Balance Training Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increase Tinetti scores from 21 to 23 in next 3 months; Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/13/2026	• Dynamic standing balance exs at the wall bar, 10 reps, 2-3 x a week; Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA		
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for John based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	• REST PATTERN: Preferred bedtime 2030, usual wake time likes to get up early, gets up on his own. Will nap on his own. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• BOWEL Continence - John is continent and has self recognition of urge to defecate. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	• John to remain continent of bowels through next review date Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. PCA • SELF TOILETING: John toilets self for bowel movements. Each shift ask if he had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	• John will have urinary incontinence managed every shift through to the next review period. Revision on: 08/05/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • URINARY Continence level is (OCCASIONALLY Incontinent). Report change to PCA	PCA		
Allergies	Erythromycin, Penicillin	D.O.B.	04/13/1952	Physician	Albert Patrick Ng
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Knoll, John (922131005650)	Admission Date	08/05/2025	Location	2 206 A
Last Care Plan Review Completed:		11/13/2025			

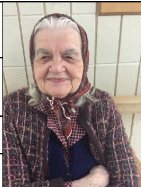
Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026 • John will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/13/2026	level as noted. Revision on: 08/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		

Allergies	Erythromycin, Penicillin	D.O.B.	04/13/1952	Physician	Albert Patrick Ng
Diagnosis	Syncope and collapse(R55), Unspecified dementia(F03), Asperger's syndrome(F84.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Knoll, John (922131005650)	Admission Date	08/05/2025	Location	2 206 A
Last Care Plan Review Completed:		11/13/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Alteration in skin integrity with risk for infection or complications related to Blister on left medial thigh (onset: Oct. 24, 2025). Revision on: 11/20/2025 Revision by: Janina Lucero (RN)		• To promote optimal healing of blister within the next review date. Revision on: 11/20/2025 Revision by: Janina Lucero (RN) Target Date: 03/09/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with blister to left medial thigh for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/20/2025 Revision by: Janina Lucero (RN) • TREATMENT PLAN: Administer treatment for blister to left medial thigh as per MD Order. Revision on: 11/20/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 11/20/2025 Revision by: Janina Lucero (RN)				
• Potential for Persistent PAIN and alteration in comfort level related to Leg/knee pain, History of Left arm fracture, back pain. Diagnosis of osteoarthritis. Most Current LTCF Pain Score is 0. Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)		• To promote resident comfort and effectively manage PERSISTENT pain to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026 • Promote MDS Pain Score of 0 through to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with SDM about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 03/23/2021 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 05/29/2020 Revision by: Maryola Perion (RN)			RN Registered Practical Nurse Registered Practical Nurse RN	
• Sit to stand Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)		• To increase standing endurance from 20 sec to 45 sec in next 3 months Revision on: 09/19/2025 Revision by: Shina Wadhwa	• 2 person assist sit to stand with use of R/W or at the bar, slowly increase standing endurance , 2-3/wk as tolerated. Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
Allergies	No Known Allergies		D.O.B.	04/04/1929	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed (S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Malenkovic, Vida (922131005321)		Admission Date	12/14/2019	Location	2 219 C	
Last Care Plan Review Completed:		09/19/2025					



Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> • Sit to stand Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)		(Physical Therapist) Target Date: 03/09/2026					
<ul style="list-style-type: none"> • ROM Exs Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"> • To increase ROM at B/L Knee joints from -15 to -10 degrees in next 3 months Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 03/09/2026	<ul style="list-style-type: none"> • Stretching exe. of b/l Calf , 1set,5rps.,hold 5-10 sec.,2-3/wk as tolerated. A-AAROM exs for B/L LE, within pain limits, 5-10 reps, 2-3 x a week; Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
<ul style="list-style-type: none"> • At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to may have Disinterest, Cognitive Limitation, Language Barrier (English, Serbian). ISE Score: 5/6 Revision on: 09/10/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		<ul style="list-style-type: none"> • To support Vida's Psycho-Social well being through to the next review. Vida will be encouraged to participate in 10-15 per month in group or 1:1 and self directed activities. Revision on: 06/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/09/2026	<ul style="list-style-type: none"> • ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities ACT - Accompany in off home area, Walk with, Guide to, Porter, Cue Direction, Reminders, etc. Revision on: 07/07/2020 Revision by: Shayna Lee Wonsch (Activation Manager)			ACT	
			<ul style="list-style-type: none"> • ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, manicures & hand massages, videos (animals, Serbia, cooking), etc. Revision on: 12/07/2021 Revision by: Shayna Lee Wonsch				
			<ul style="list-style-type: none"> • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as listening to music, family/friend phone calls, visiting with residents/team members, watching/listening to TV, adult colouring, cleaning/tidying room, etc. Revision on: 06/23/2021 Revision by: Shayna Lee Wonsch			ACT	
			<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1:1 visits, discussion - current events, games - puzzles & pondering, music programs, sensory - aromatherapy & YouTube videos (cooking/travelling), spiritual celebrations, special events, etc. Revision on: 04/08/2025 Revision by: Kameron Stewart (Recreation Aide)				
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of WANDERING, Hoarding items, History of 		<ul style="list-style-type: none"> • To decrease the episodic frequency of Expressive 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Vida/SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as 			BSO - Internal BSO -	
Allergies	No Known Allergies			D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)			Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
barricade door from team entering room items in room, tables and chairs, resistive to care, resisting care, snack, meals, physical (swatting), spitting/spitting medication, Verbal (yelling and screaming while giving care) related to Dementia. Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator)	Behaviour by the next review date. ABS score will be less than 3. Revision on: 04/09/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	needed. Revision on: 05/16/2021 Revision by: Leslie Meloche (Activities/Rec Therapy) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk. Revision on: 05/16/2021 Revision by: Leslie Meloche (Activities/Rec Therapy) • TRIGGERS leading to VERBAL (yelling, screaming, etc.) as expression of behaviour include (frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 07/07/2024 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Vida is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 07/07/2024 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, etc.) Revision on: 08/06/2021 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Vida is refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc, re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 05/12/2023 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY Inappropriate (blocking her bedroom door, spitting on the floor or to staff) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 04/04/2025 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: Dressers and bedroom furniture. Team to	External Social Worker		
Allergies	No Known Allergies	D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)	Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Potential for Expressive Behaviour of WANDERING, Hoarding items, History of barricade door from team entering room items in room, tables and chairs, resistive to care, resisting care, snack, meals, physical (swatting), spitting/spitting medication, Verbal (yelling and screaming while giving care) related to Dementia. Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>monitor for this. If noted to be moving items, team to intervene and offer an activity on the home area to distract her.</p> <p>Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: If Vida is noted to be spitting on the floor or to staff, spitting medication, etc. clean area using appropriate PPE. Report episode to Registered Staff. Revision on: 04/04/2025 Revision by: Maryola Perion (RN)</p> <p>• WANDERING: Permit Vida to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 05/16/2021 Revision by: Leslie Meloche (Activities/Rec Therapy)</p>	PCA	
<p>• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living bed mobility and transfer. Revision on: 03/17/2025 Revision by: Suzanne Azar (RN)</p>	<p>• Vida will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility and transfer) each day through to the next review date. Revision on: 03/17/2025 Revision by: Suzanne Azar (RN) Target Date: 03/09/2026</p>	<p>• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of two 1/4 bed rails. Revision on: 03/17/2025 Revision by: Suzanne Azar (RN)</p> <p>• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use two 1/4 bed rails as to support appropriate bed mobility and transfer. Revision on: 03/17/2025 Revision by: Suzanne Azar (RN)</p> <p>• BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 03/17/2025</p>	PCA	D/E/N
Allergies	No Known Allergies		D.O.B.	04/04/1929
Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)	Admission Date	12/14/2019	Location 2 219 C
Last Care Plan Review Completed:		09/19/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> • Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living bed mobility and transfer. Revision on: 03/17/2025 Revision by: Suzanne Azar (RN)		Revision by: Suzanne Azar (RN)				
<ul style="list-style-type: none"> • Potential to experience alteration in MOOD as exhibited by persistent anger with self or others, repetitive physical movement, sad, pained, worried facial expression, unpleasant mood in the morning, awake at night related to Cognitive decline, Dementia, pain. Revision on: 07/26/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 1. Revision on: 04/09/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Vida/SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • HEALTH EDUCATION: Provide education and support to Vida/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Vida for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • RESIDENT STRENGTHS: Build on Vida's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 06/17/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • FAMILY SUPPORT: Vida enjoys visits from Son. Revision on: 06/17/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • SLEEP/REST: Promote adequate sleep and rest to stability of Vida's mood. Report changes in sleeping habits to Registered Staff as noted. Revision on: 07/26/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • SPECIAL CONSIDERATION to support MOOD: Serbian as primary language, seek PCA 	RN Registered Practical Nurse			
Allergies	No Known Allergies		D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Malenkovic, Vida (922131005321)	Admission Date	12/14/2019	Location	2 219 C	
Last Care Plan Review Completed:		09/19/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved				
<ul style="list-style-type: none">• Potential to experience alteration in MOOD as exhibited by persistent anger with self or others, repetitive physical movement, sad, pained, worried facial expression, unpleasant mood in the morning, awake at night related to Cognitive decline, Dementia, pain. Revision on: 07/26/2024 Revision by: Maryola Perion (RN)			an interpreter as needed. Revision on: 06/17/2021 Revision by: Maryola Perion (RN)								
<ul style="list-style-type: none">• Increased risk for FALLS related to Dementia, history of falls, unsteady gait and balance, non compliant with the use of wheelchair. Revision on: 01/26/2024 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Vida/SDM in decision making in fall prevention Plan of Care. Revision on: 06/17/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Haley Cadarian (Quality Lead) <ul style="list-style-type: none">• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 08/31/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• BED: place bed in lowest position to lower risk for injury. Vida has her bed placed against the wall in her room per her personal preference. Revision on: 07/19/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none">• FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 12/02/2020					PCA	D/E/N	PCA	PCA
Allergies	No Known Allergies		D.O.B.	04/04/1929		Physician	Albert Patrick Ng				
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses										
Facility	Berkshire Care Centre					Print Date	12/11/2025				
Resident	Malenkovic, Vida (922131005321)		Admission Date	12/14/2019		Location	2 219 C				
Last Care Plan Review Completed:		09/19/2025									

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none">Increased risk for FALLS related to Dementia, history of falls, unsteady gait and balance, non compliant with the use of wheelchair. Revision on: 01/26/2024 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN) <ul style="list-style-type: none">SPECIAL CONSIDERATION to PREVENT FALLS: If Vidah is sleeping in her wheelchair, please assist her into her bed Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">ALARMS: Requires Bed/Chair alarm. Check placement and working order. Staff to respond promptly to resident when alarm sounding. Revision on: 04/09/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.		PCA PCA Registered Staff	D/E/N	
<ul style="list-style-type: none">Potential to experience FOOT/FEET complications related to toenail issues and long toenails. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN)		<ul style="list-style-type: none">To maintain adequate Foot/Feet/Toenail care and minimize episodes of inflammation, infection or complications through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none">COMMUNICATION: Involve/collaborate with Vida/Son in decision making for footcare treatment plan. Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">TREATMENT PLAN: Foot care nurse to complete toenail care every 6-8 weeks. Report long toe nails or other abnormalities as noted. Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator)		Footcare Nurse - Internal		
<ul style="list-style-type: none">Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Back Pain, Osteoporosis, Impaired Mobility and balance. Revision on: 11/22/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">Vida will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI	<ul style="list-style-type: none">BATHING: Vida prefers (shower/tub bath) on (Wednesday and Sunday on Evening shift). Vida participates by (providing a washcloth and cues to wash her upper part of the body and face). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. Care level varies and may require 2 team maximal assistance when resident presents with expressed behaviours.		PCA		
Allergies	No Known Allergies			D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)			Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Coordinator) Target Date: 03/09/2026 • Vida will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care tasks are met each day through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	Revision on: 10/06/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Vida is able to move, turn and reposition with extensive assistance from the team. PCA Care level varies and may require 2 team maximal assistance when resident presents with expressed behaviours. Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Vida requires 1 team member extensive assistance for dressing of her upper and lower body. PCA May require 2 team members when confused or resistive to care. If resistive 1 team member to aid in distraction while physically assisting. Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Vida is able to eat Independently with set up and oversight, cueing and encouragement from staff members. Eats in the Orchid Lane PCA Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Wheelchair as primary mode of locomotion and requires one staff to propel her on longer distances on the unit, able to propel her wheelchair on short distances. PCA She will try to get up and will walk in the corridor by holding on the rails to her room or walk using her wheelchair as a walker. Team will continue to encourage her to utilize her wheelchair. One to two staff to assist when trying to walk and assist back to her chair. Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL HYGIENE: Vida requires 1 team member extensive assistance with her personal hygiene. She can participate in brushing her hair, teeth, washing her		
Allergies	No Known Allergies	D.O.B.	04/04/1929	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre			Print Date 12/11/2025
Resident	Malenkovic, Vida (922131005321)	Admission Date	12/14/2019	Location 2 219 C
Last Care Plan Review Completed:		09/19/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Back Pain, Osteoporosis, Impaired Mobility and balance.</p> <p>Revision on: 11/22/2022</p> <p>Revision by: Maryola Perion (RN)</p>		<p>face.</p> <p>Care level varies and may require 2 team maximal assistance when resident presents with expressed behaviours.</p> <p>Revision on: 09/19/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide limited assistance to apply sanitizer or use wipes for hand hygiene.</p> <p>Revision on: 06/25/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: Vida requires Extensive assistance from one staff to transfer back to bed to be checked and changed for continence care.</p> <p>Care level varies and may require 2 team maximal assistance when resident presents with expressed behaviours.</p> <p>Monitor as she will try to toilet herself independently.</p> <p>Vida may require two staff maximal assistance at times if confused or resistive to care.</p> <p>Revision on: 09/19/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Vida requires two team member extensive assist to transfer from a sit to stand position.</p> <p>Revision on: 08/27/2025</p> <p>Revision by: Teresa Quinto (RPN)</p> <p>• ORAL CARE: Vida requires the team to assist with her oral hygiene. Has lower denture, some teeth missing, history of some carious teeth.</p> <p>Revision on: 09/19/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FOOT CARE: Foot care nurse to complete toenail care every 6-8 weeks. Report</p>	<p>PCA</p> <p>PCA</p> <p>PCA</p>		
Allergies	No Known Allergies	D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)	Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025			

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Back Pain, Osteoporosis, Impaired Mobility and balance. Revision on: 11/22/2022 Revision by: Maryola Perion (RN)			long toe nails or other abnormalities as noted. Revision on: 07/29/2021 Revision by: Maryola Perion (RN)					
<ul style="list-style-type: none"> Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 11/13/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Vida/SDM) for decision making regarding constipation management. Revision on: 11/13/2022 Revision by: Maryola Perion (RN)				Registered Staff	
		<ul style="list-style-type: none"> Vida will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. 				Registered Staff	
			<ul style="list-style-type: none"> FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. 				Registered Staff	
			<ul style="list-style-type: none"> BOWEL PROTOCOL: In place as per MD order 				Registered Staff	
Allergies	No Known Allergies		D.O.B.	04/04/1929		Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Malenkovic, Vida (922131005321)		Admission Date	12/14/2019		Location	2 219 C	
Last Care Plan Review Completed:		09/19/2025						

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 11/13/2022 Revision by: Maryola Perion (RN)		Target Date: 03/09/2026					
• Potential for BOWEL INCONTINENCE related to Impaired mobility, Dementia. Revision on: 03/14/2022 Revision by: Maryola Perion (RN)		• Vida will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Total Incontinence. Report change to level as noted. Revision on: 01/19/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 03/14/2022 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Vida uses a Blue brief on Days, Evening shifts. Orange brief on Night shifts. Revision on: 03/11/2025 Revision by: Maryola Perion (RN)			Registered Staff PCA PCA PCA	
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS		• To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/ collaborate with Vida/SDM in decision making of musculoskeletal care management. Revision on: 09/10/2021 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects. Revision on: 09/10/2021 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to				
Allergies	No Known Allergies			D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)			Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS 			health status. Revision on: 09/10/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 09/10/2021 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to Dementia Revision on: 06/17/2021 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> Vida will have urinary incontinence managed every shift through to the next review period. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with Vida/SDM for decision making about incontinence management. Revision on: 06/17/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 06/17/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> URINARY Continence level is Total Incontinence. Report change to level as noted. Revision on: 01/26/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> INCONTINENCE PRODUCT: Vida uses a Blue brief on Days, Evening shifts. Revision on: 03/11/2025 Revision by: Maryola Perion (RN)			PCA	PCA
<ul style="list-style-type: none"> Potential for altered bone density related to diagnosis of OSTEOPOROSIS. 		<ul style="list-style-type: none"> To treat and minimize complications associated with OSTEOPOROSIS through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with SDM in decision making of osteoporosis care management. Revision on: 03/23/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for osteoporosis management. Monitor effectiveness and for side effects. <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of osteoporosis for discomfort/ complications or changes to health 			Registered Staff	Registered Staff
Allergies	No Known Allergies			D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)			Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
• Potential for altered bone density related to diagnosis of OSTEOPOROSIS.			status.				
• Expressed Wishes and Beliefs related to Vida Medical Treatment and End of Life Care Revision on: 12/22/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To support and honor Vida expressed wishes and beliefs through to the End of Life. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• CPR: Vida wishes express DO NOT ATTEMPT CPR: Do not transfer to hospital, plan includes death at home - see PoET Individualized Summary Revision on: 06/25/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential to experience complications and side effects impacting quality of life related to use of (multipharmacy, etc.) Revision on: 12/02/2020 Revision by: Maryola Perion (RN)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with Vida/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using poly-pharmacy, etc. for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.				Registered Staff
• Altered VISION related to able to see large print, but not regular print. Revision on: 12/02/2020 Revision by: Maryola Perion (RN)		• Vida will be able to function safely in her environment through next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• READING: Vida uses large print material to aid with reading. Revision on: 12/02/2020 Revision by: Maryola Perion (RN)				PCA
Allergies	No Known Allergies		D.O.B.	04/04/1929	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Malenkovic, Vida (922131005321)		Admission Date	12/14/2019	Location	2 219 C	
Last Care Plan Review Completed:		09/19/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Altered VISION related to able to see large print, but not regular print. Revision on: 12/02/2020 Revision by: Maryola Perion (RN)						
• Altered COMMUNICATION as exhibited by limitations to (Self expression, comprehension, etc) related to difficulty of hearing, Dementia, Language Barrier (serbian) Revision on: 12/02/2020 Revision by: Maryola Perion (RN)		• Vida will continue to freely express self and adequately comprehend information each day through to the next review period. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026 • Vida will be able to make basic needs known each day through to the review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with Vida/SDM for decision making about strategies needed to support effective communication. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) • HEALTH TEACHING: Engage with Vida/SDM to enhance their knowledge of (change in health status, etc.) affecting communication ability. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) • PRIMARY LANGUAGE: Vida's primary language is Serbian. She is able to speak/understand English. Revision on: 12/02/2020 Revision by: Maryola Perion (RN) • INTERPRETER Required: May require interpreter when needed. Staff that speaks Serbian. Revision on: 09/10/2021 Revision by: Maryola Perion (RN)			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Dementia Revision on: 12/02/2020 Revision by: Maryola Perion (RN)		• Vida will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3/6. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with Vida/SDM in decision making of Cognitive Loss for Dementia. Revision on: 01/01/2020 Revision by: Qiufeng Liu (Registered Practical Nurse) • ORIENTATION: Gently reorient to person, place, time as needed when Vida is feeling lost or in confused state. Revision on: 12/02/2020 Revision by: Maryola Perion (RN)		Registered Staff	
• Strength		• To improve strength of B/L	• Strength exe. with use of 1-3lbs. wt. for B/L UE 1set, 10rps.,2-3/wk as tolerated.		PT -	
Allergies	No Known Allergies		D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Malenkovic, Vida (922131005321)		Admission Date	12/14/2019	Location	2 219 C
Last Care Plan Review Completed:		09/19/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 09/16/2020 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		UE≤ from 3+5 to 4/5 in 3 months. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)		Physiotherapist PTA	
• Sleep Patterns Revision on: 01/01/2020 Revision by: Qiufeng Liu (Registered Practical Nurse)		• To promote adequate rest/sleep for Vida based on identified sleep patterns/preferences each night through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• REST PATTERN: Preferred bedtime: Between 20:00-21:00 and usual wake time: Around 6:00-7:00 Revision on: 03/17/2021 Revision by: Maryola Perion (RN) • SLEEPWEAR: Vida prefers to wear her own night gown. Revision on: 01/05/2020 Revision by: Qiufeng Liu (Registered Practical Nurse)		PCA PCA	
• SPIRITUAL BELIEFS: Vida is of the Evangelist Faith. Revision on: 12/21/2019 Revision by: Hannelore Steinke-Nelson (Activation aide)		• To provide Vida spiritual support as interested through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including spiritual celebrations, spiritual music, etc. Revision on: 07/07/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		ACT	
• Nutrition Risk Level (diet details)		• Vida will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026 • Will weigh within realistic GWR 60-70 kg through to next review	• NUTRITION RISK: Vida is Moderate risk level. Revision on: 12/09/2025 Revision by: Shereen Khan (Dietitian (RD)) • DIET ORDER: Vida will receive regular diet, regular texture. Revision on: 12/04/2020 Revision by: Anna Slack • FLUID CONSISTENCY: Vida drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/19/2021 Revision by: Olivia Kuhlmann (Dietetic Intern) • FLUID TARGET: Encourage Vida to drink a minimum of 1304 ml/day		Dietitian (RD) Diet Food Services Aide PCA Diet PCA PCA	
Allergies	No Known Allergies		D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses					
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Resident	Malenkovic, Vida (922131005321)		Admission Date	12/14/2019	Location	2 219 C
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details)	<p>date. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/09/2026</p> <p>• Vida will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1630 ml/day (25 ml/kg using 65.2 kg weight) through to next review date. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/09/2026</p>	<p>Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.</p> <p>• HIGH FIBRE: Offer 200 ml prune juice at breakfast daily Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• LABELLED SNACK: receives yogurt (85 ml fluid) and banana at AM nourishment pass Revision on: 07/08/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Dietary aide PCA</p> <p>PCA</p> <p>PCA</p>	<p></p> <p>D/E</p> <p>D/E</p>

Allergies	No Known Allergies	D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses				
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Resident	Malenkovic, Vida (922131005321)	Admission Date	12/14/2019	Location	2 219 C
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Care Plan Report

Diagnosis

Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic wound infection, not elsewhere classified(T79.3)

Allergies	No Known Allergies	D.O.B.	04/04/1929	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Osteoporosis, unspecified(M81.9), Low back pain(M54.5), Primary generalized (osteo)arthrosis(M15.0), Fracture of foot, unspecified, closed(S92.900), Post-traumatic woun...See last page for a complete listing of the Resident's diagnoses				
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of (anti-anxiety, use of anti-depressant medications) Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 11/13/2024 Revision by: Danielle Loreto (RAI Coordinator)		Registered Staff	
<ul style="list-style-type: none"> Potential for (acute on chronic) PAIN and alteration in comfort level related to (left knee), recent wrist fracture. Most Current LTCF Pain Score is (0) Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. 		RN Registered Practical Nurse	
		<ul style="list-style-type: none"> Promote MDS Pain Score of 0 through to the next review. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> REST: accommodate resident rest and relaxation preference (breaks between activities, resting in bed or a chair). Revision on: 12/06/2024 Revision by: Danielle Loreto (RAI Coordinator)		Registered Practical Nurse	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation due to Dementia. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> (JOYCE) will have ALL ADL care needs met each day through the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> BATHING: Joyce prefers (shower/tub bath) on (Wednesdays and Sundays on Day shifts). Joyce participates by (assisting with washing the upper body). One staff (EXTENSIVE) assistance for bathing. 2nd team member if resistive to care. 1 team member to try to distract and engage while the other performs care. 		PCA	
			Prefers Female Caregiver.			
			Revision on: 10/22/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)		Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025				



Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			<p>• BED MOBILITY: (Joyce) is able to (shift weight and move from side to side) Joyce is independent with bed mobility. Revision on: 07/29/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DRESSING: (Joyce) is able to physically assist (1) staff to provide (EXTENSIVE) assistance for dressing.</p> <p>Care level varies related to personal expressions during care and resident may need a 2nd team to provide redirection/support.</p> <p>Prefers female caregiver. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: (Joyce) is able to eat independently. Requires assistance with set up. May need redirection to stay at the table during meals. Requires cueing and assistance X 1 at times</p> <p>She eats slowly and does not like to have her meals rushed. Revision on: 08/29/2025 Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• LOCOMOTION: (Joyce) is able to (independently). A times she may be unsteady and requires 1 team member to walk with her with and guide her.</p> <p>Supervision off the home care area (Floor 2) Revision on: 10/22/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: (Joyce) is able to (physically assist when handed cloths, grooming items but due to cognition and expressions may not be able to assist at times).</p>			PCA	
Allergies	Macrobid			D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)			Admission Date	11/04/2024	Location	2 208 A
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation due to Dementia. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)			(1) staff to provide (extensive) assistance for hygiene. Care level varies related to personal expressions during care and resident may need a 2nd team to provide redirection/support. Prefers female caregiver. Revision on: 10/22/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> HAND HYGIENE: 1 staff to provide (set up to limited) assistance to (to use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 10/22/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> TOILET USE: (Joyce) is able to (physically assist). (1) staff to provide (limited) assistance for toileting, to perform peri-care and adjust clothing. Prefers female caregiver. Care level varies related to personal expressions during care and resident may need a 2nd team to provide redirection/support. She will also toilet herself. Revision on: 10/22/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> TRANSFERRING: (Joyce) requires 1 team member assistance with transferring. Joyce will transfer on her own. Team to monitor for safety. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)		Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation due to Dementia. Revision on: 10/31/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> ORAL CARE: (Joyce) has (upper dentures and some natural teeth) and is able to (assist with oral care). 1 staff to provide (CUES and set up) assistance for oral care. <p>May have to provide oral care if resident is confused and not able to follow direction.</p> <p>Revision on: 10/22/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	PCA		
<ul style="list-style-type: none"> ROM Exs Revision on: 07/28/2025 Revision by: Shina Wadhwa (Physical Therapist)	<ul style="list-style-type: none"> To increase ROM due to fracture in Left wrist and forearm from current restricted/painful position to WFL in next 6 months Revision on: 07/28/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/04/2026	<ul style="list-style-type: none"> A-AAROM exs for Left shoulder and left fingers and thumb, 10 reps, 2-3 x a week; Left wrist, A-AAROM gentle exs, 10 reps, as best tolerated, 4-5 x a week; Strengthening exs for Rt UE with 1lb; 10 reps; 2-3 x a week; Revision on: 08/27/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA		
<ul style="list-style-type: none"> At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to adjusting to life in new environment. <p>ISE score: 6/6 Revision on: 07/23/2025</p>	<ul style="list-style-type: none"> Team members will support Joyce in decreasing social isolation by participating in activities of personal choice for 15-20x per month by the next review date. Revision on: 04/29/2025	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite Joyce to programs of personal interest;music programs, manicures and hand massage, montessori fluff and fold, happy hour,and special events on the main floor, art therapy, Revision on: 07/22/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading magazines, watching TV in own room, walking, conversing with 			
Allergies	Macrobid	D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses				
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/04/2026	peers, etc. Revision on: 04/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide her with individual visits for (conversation, reading, reminiscing, etc. Revision on: 04/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 07/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Joyce will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 07/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • BOWEL PROTOCOL: In place as per MD order	Registered Staff Registered Staff			
• SPIRITUAL BELIEFS: Joyce is of the Catholic Faith. Revision on: 04/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	• To provide Joyce spiritual support as interested through to the next review date. Revision on: 04/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/04/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including Hymn Sing, Catholic Mass, Church Service, etc. Revision on: 04/29/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• Expressed Wishes and Beliefs related to (Joyce) Medical Treatment and End of Life Care Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	• CPR: (Joyce) Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 02/06/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty	• (Joyce) will be supported to make independent choice and	• ORIENTATION: Gently reorient to (person, place, time) as needed when (Joyce) is feeling lost or in confused state.				
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
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concentrating, altered judgement, impaired decision making) related to progression of Dementia Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	safe decisions each day through to the review date. Current CPS is (3) Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, (Joyce) can comprehend and follow one steps at a time as needed when not able to follow direction. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)			
• Increased risk for FALLS related to (unsteady gait, walks unsupported). Limitation of cognitive function/altered judgement (Dementia) Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	• PURPOSEFUL ROUNDING: Conduct purposeful rounding to assess residents needs; for pain, positioning, peri-needs or possessions for safety (self transferring and ambulating without walker). • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/08/2025 Revision by: Tola Omolade (ADOC) • ENVIRONMENT: Secure environment (reduce clutter) to reduce fall risk for (Joyce) Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator) • FOOTWEAR: Ensure Joyce wears appropriate footwear at all times. Revision on: 11/15/2025 Revision by: Tola Omolade (ADOC) • SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program. participates with group exs classes-3x week, LE strengthening with weights 5-10 reps 1-2 lbs, 1 assist for guidance- Sit to stands, squats 10 reps, 1:1 ambulation with hand in hand, 100+ feet, increasing distance each time Revision on: 08/21/2025 Revision by: Courtney Cipparone (PT - Physiotherapist)	PCA PCA PCA PCA	 D/E/N D/E/N	
• (Joyce) is at high risk for ELOPEMENT related to Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To promote (Joyce) safety and minimize risk for episode of elopement each day through next review date.	• DIVERSION ACTIVITY: Resident responds well to (activities such as; playing music, conversing, singing, watching TV) to divert attention when exit seeking. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Macrobid	D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses				
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	• ELOPEMENT ALERT: Redirect (Joyce) away from elevator or exit doors as needed. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL with care, SOCIALLY Inappropriate, wandering into others rooms) nature related to Cognitive loss. Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To promote safety for (Joyce) and/or others during each episode of (yelling, cursing, wandering, exit seeking) through to the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026 • To decrease episodic frequency of (Syelling, cursing, wandering, exit seeking) by next review date. ABS score will be less than (ABS 2). Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (Joyce) for indications to change in or for escalating expressive behaviour risk. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to PHYSICAL (personal care support, being assisted with personal care.) Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) • PHYSICAL Behaviour: If (Joyce) is attempting to strikeout; move back from his/her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance. At risk for receiving physical expressions as resident will wander and enter into others spaces. Revision on: 07/29/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL (personal care being rendered, other residents in her personal space) Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) • VERBAL Behaviour: If (Joyce) is heard yelling, swearing or calling others names (most often with care; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) • RESISTANCE to Care Need: If (Joyce) is declining to (change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Resistive to showering. May try to call daughter to see if the daughter can try to talk			
Allergies	Macrobid	D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses				
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Resident	Meyrick, Joyce (922131005596)	Admission Date	11/04/2024	Location	2 208 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL with care, SOCIALLY Inappropriate, wandering into others rooms) nature related to Cognitive loss.</p> <p>Revision on: 02/06/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>		<p>Joyce into taking her shower.</p> <p>Revision on: 11/18/2024</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: (hoarding items such as napkins, trying to flush pull ups, wandering into others rooms, smearing feces) Check residents rooms and when appropriate remove access items.</p> <p>Residents toilet has been shut off to avoid flooding due to trying to flush her briefs.</p> <p>Revision on: 01/07/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit (Joyce) to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 11/04/2024</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</p> <p>Revision on: 11/14/2024</p> <p>Revision by: Maryola Perion (RN)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction)</p> <p>Wandering- roaming the halls, into other residents rooms, exit seeking</p> <p>Verbal- yelling, swearing, calling others names</p> <p>Socially Inappropriate-Trying to flush pull ups, towels and paper towels in the toilet, flooding the room</p> <p>Resistance to Care: Refusing to change clothes, care, showering, medications, meals</p> <p>Triggers: Confusion, misunderstanding care needs, cognitively impaired, hearing loss in left ear, frustration, being told what to do</p> <p>Recommendations: Allow the resident to safely roam in the common area, redirect away from exits, elevators and other residents rooms as needed.</p> <p>Monitor when wandering as she may be at risk for physical Expressions due to the resident going into other residents personal space. Check the residents room for towels and remove them as she may try to flush them in her toilet. Due to hearing impairment in the left ear, ensure you speak to her in her right ear. If Joyce is declining to change clothes, take medications, eat etc., re approach in 10-15 minutes</p>	<p>Registered Practical Nurse RN</p>		
Allergies	Macrobid	D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)	Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL with care, SOCIALLY Inappropriate, wandering into others rooms) nature related to Cognitive loss. Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>and report to registered staff. Resistive to showering, may try to call the daughter to see if the daughter can try to talk Joyce into taking her shower. The resident gets angry and can become physical when she is told what to do. Physical: If the resident is striking out, move away from her reach and calmly indicate that care will continue when she is calm/ready. Use stop and go approach. The resident likes to listen to music-Christmas, Jazz, Oldies, Elvis Presley, funny cat videos, visits with her family and staff and holding her babydoll. The resident also likes to attend programs such as Music & Relaxation, Manicures & Massages, Music appreciation and Fun & Fitness. Revision on: 12/10/2025 Revision by: Leslie Meloche (Recreation Aide)</div>				
<div>• Altered COMMUNICATION as exhibited by limitations to (Does not hear well in areas that are noisy) related to chooses to not wear her hearing aids. Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• (Joyce) will continue to freely express self and adequately comprehend information each day through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026</div>	<div>• PRIMARY LANGUAGE: (Joyce) primary language is (English). she is (able to speak but cannot write in English). Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases.). Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Joyce needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 02/06/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>				
<div>• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Incontinence, Thin fragile Skin, edema in bilateral lower</div>	<div>• To protect and maintain skin integrity each day through to the next review.</div>	<div>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.</div>	PCA			
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)		Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
legs. Revision on: 02/06/2025 Revision by: Shina Wadhwa (Physical Therapist)		Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026				
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by (repetitive questions, concerns, sad facial expressions and restlessness) related to Cognitive loss. Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) 		<ul style="list-style-type: none"> To decrease episodic frequency of (repetitive questions, concerns, sad facial expressions and restlessness by next review date. DRS score will be less than (DRS 2). Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026 	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (Joyce) for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) RESIDENT STRENGTHS: Build on (Joyce) effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) DISTRACTION ACTIVITIES: (Joyce) can be calmed doing activities of interest including (listening to music, doing puzzles, watching movies, etc.) Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator) 			
<ul style="list-style-type: none"> Nutrition Risk Level 		<ul style="list-style-type: none"> Joyce will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026 Will weigh within GWR/IBW/Realistic weight range of 55-62kg kg/BMI 24-27 through to next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026 	<ul style="list-style-type: none"> NUTRITION RISK: Joyce is low risk level. Revision on: 11/13/2024 Revision by: Lexi Dakin (Dietitian (RD)) DIET ORDER: Joyce will receive regular diet, minced texture Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) FLUID CONSISTENCY: Joyce drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/13/2024 Revision by: Lexi Dakin (Dietitian (RD)) FLUID TARGET: Encourage Joyce to drink a minimum of 1125 ml per day. Revision on: 11/13/2024 Revision by: Lexi Dakin (Dietitian (RD)) DINING INSTRUCTIONS: Allow resident extra time to eat in dining room Joyce is able to tolerate minced texture without dentures in Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) 		Dietitian (RD)	
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)		Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025				

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Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		<p>• Joyce will be adequately hydrated aeb drinking at least 75% of total fluid requirement @25-30 ml/kg, 60kg through to next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026</p> <p>• Will meet estimated nutritional requirements of 1500-1800 kcal @ 25-30kcal/kg, 60-72g protein @ 1-1.2g/kg through to next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026</p>				
<p>• Potential for altered hematologic symptoms or complications related to diagnosis of Vit B12 ANEMIA Revision on: 11/10/2024 Revision by: Maryola Perion (RN)</p>		<p>• To treat and/or minimize complications associated with Vit B12 ANEMIA each day through to the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Joyce)/SDM in decision making of hematologic care management for Anemia. Revision on: 11/10/2024 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Vit B12 ANEMIA for complications or changes to health status.</p> <p>Residents left wrist is non-weight bearing. Monitor resident for not using her left arm. Revision on: 07/30/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.</p> <p>• MEDICATION: Administer medication for Vit B12 ANEMIA as per MD Order. Monitor effectiveness and for side effects.</p>		Registered Staff	
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)		Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for altered hematologic symptoms or complications related to diagnosis of Vit B12 ANEMIA Revision on: 11/10/2024 Revision by: Maryola Perion (RN)			Revision on: 11/10/2024 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Ambulation/Gait Training Revision on: 11/08/2024 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"> To improve foot clearance to reduce fall risk from high to low in next 3 months Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> 1:1 assist, hand in hand assisted from Rt side, Gait training, cue for foot clearance and heel toe pattern, slowly increase distance, 2-3 x a week; Revision on: 07/28/2025 Revision by: Shina Wadhwa (Physical Therapist)		PT - Physiotherapist PTA	
<ul style="list-style-type: none"> Balance Exs Revision on: 11/08/2024 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"> To improve heel toe pattern in next 3 months Revision on: 10/21/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/04/2026	<ul style="list-style-type: none"> Balance exercises in standing +1A from Rt side to (Lt as tolerated), (1 set, 10 reps), 2-3/week as tolerated Revision on: 10/21/2025 Revision by: Rana Maghnieh (RPN)		PT - Physiotherapist PTA	
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in sleep patterns related to (Dementia). Revision on: 11/06/2024 Revision by: Mitchell Atkinson (Recreation Aide)		<ul style="list-style-type: none"> To promote adequate rest/sleep for (Joyce) based on identified sleep patterns/preferences each night through to the next review date. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime (no stated preference), usual wake time (0600- liked to get up early) Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> MONITOR: Monitor Joyce's sleeping patterns.Document when awake or asleep x 5 days. Revision on: 11/15/2025 Revision by: Suzanne Azar (RN)		PCA	Q1H
Allergies	Macrobid		D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)		Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in sleep patterns related to (Dementia). Revision on: 11/06/2024 Revision by: Mitchell Atkinson (Recreation Aide)				
<ul style="list-style-type: none"> Potential for BOWEL INCONTINENCE related to (Cognitive lost) Revision on: 11/06/2024 Revision by: Mitchell Atkinson (Recreation Aide)	<ul style="list-style-type: none"> (Resident name) will have bowel incontinence managed every shift through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> BOWEL Continence level is (FREQUENTLY Incontinent). Report change to level as noted. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. 	PCA	
		<ul style="list-style-type: none"> INCONTINENCE PRODUCT: Resident uses white incontinent product daily. Revision on: 11/15/2024 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> (Joyce) will have urinary incontinence managed every shift through to the next review period. Revision on: 02/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/04/2026	<ul style="list-style-type: none"> URINARY Continence level is (FREQUENTLY Incontinent). Report change to level as noted. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> INCONTINENCE PRODUCT: Resident uses white incontinent product daily. Revision on: 11/12/2024 Revision by: Idylle Labrado (RPN)	PCA	

Allergies	Macrobid	D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)	Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025			

Care Plan Report


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Diagnosis

Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.800)

Allergies	Macrobid	D.O.B.	06/04/1941	Physician	Albert Patrick Ng
Diagnosis	Primary generalized (osteo)arthrosis(M15.0), Unspecified dementia(F03), Vitamin B12 deficiency anaemia, unspecified(D51.9), Fracture of other and unspecified parts of wrist and hand, closed(S62.8...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Meyrick, Joyce (922131005596)	Admission Date	11/04/2024	Location	2 208 A
Last Care Plan Review Completed:		11/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<p>• STRONG PARTICIPATION in Activities.</p> <p>Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p>	<p>• Maria will be supported to maintain participation in activities 10-20 times per month by the next review date.</p> <p>Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1: 1 visits, arts & crafts, discussion group, exercise programs, Montessori programs, music programs, reading programs, reminiscing groups, sensory cart,& YouTube videos.</p> <p>Revision on: 08/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as listening to music (Mariachi bands), visiting with residents & team members, adult colouring, reading independently, folding towels. Also provide her with baby dolls & electronic pets.</p> <p>Revision on: 08/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities ACT - Accompany off home area, Walk with, Guide to, Cue Direction, Reminders, etc.</p> <p>Revision on: 05/27/2020 Revision by: Shayna Lee Wonsch (Activation Manager)</p> <p>• ONE to ONE: Provide her with individual visits for iPad videos,talking about churches, looking at pictures of Mexico. Engage Maria in different discussions. Also provide her with baby dolls & electronic pets.</p> <p>Revision on: 08/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• SENSORY STIMULATION: Provide her with Sensory Stimulation for (Hand Massage, Tactile Books, Snoezelen Activity, Reading Aloud, Sensory Pictures.)</p> <p>Revision on: 11/03/2025 Revision by: Nick Carroll (Recreation Aide)</p>					
<p>• Potential for (Persistent) PAIN and alteration in comfort level related to Osteoarthritis, left leg/knee pain/sore rt fall. Most Current RAI Pain Score is 0.</p> <p>Revision on: 08/07/2025 Revision by: Maryola Perion (RN)</p>	<p>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review.</p> <p>Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026</p> <p>• Promote RAI Pain Score of 0</p>	<p>• COMMUNICATION: Involve/collaborate with Maria/SDM about pain management, goals of treatment, plan of care, prognosis and treatment options.</p> <p>Revision on: 02/21/2021 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• NON VERBAL CUES of PAIN for Maria includes - (facial grimacing, tight fists,</p>	<p>RN Registered Practical Nurse PCA</p>				
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19 (U07.5)						
Facility	Berkshire Care Centre			Print Date	12/11/2025		
Resident	Micuda, Maria (922131005225)		Admission Date	05/16/2019	Location	2 207 A	
Last Care Plan Review Completed:		11/03/2025					

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Focus		Goal	Interventions			Position	Freq/Resolved
		through to the next review. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed for pain. Revision on: 07/04/2023 Revision by: Sonpreet Kaur Gurm (RPN)			Registered Practical Nurse RN	
• Potential for Expressive Behaviour of wandering, verbal/physical, socially inappropriate, resistance to care need/baths, wandering to other residents room and will take their belongings, hoarding. putting soiled bed sheets/pad (soaked with urine) underneath her bed, scratching, hides hip protector in her drawers/closet/underneath her mattress, hitting/scratching and slapping/punching/ biting psws related to: Dementia, MDD Revision on: 05/19/2025 Revision by: Maryola Perion (RN)		• To promote safety for Maria and/or others during each episode of expressive behaviors through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026 • To decrease the episodic frequency of Expressive behavior by the next review date. ABS score will be less than 2. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Maria for indications to change in or for escalating expressive behaviour risk. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • TRIGGERS leading to PHYSICAL (punching staff, scratching, etc.) as expression of behaviour include (cause: anger, confusion, etc) Revision on: 11/21/2023 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Maria is attempting to strikeout, scratch; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 11/21/2023 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (yelling, screaming) as expression of behaviour include (Specify cause: frustration, limitation in self expression, misunderstanding care intention) Revision on: 09/16/2019 Revision by: Maryola Perion (Registered Nurse) • VERBAL Behaviour: If Maria is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt			Registered Staff BSO - Internal BSO - External Social Worker	
Allergies	No Known Allergies			D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)			Admission Date	05/16/2019	Location	2 207 A
Last Care Plan Review Completed:		11/03/2025					

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Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>to resolve her concern. Report episode to Registered Staff. Revision on: 05/15/2021 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe/shower, change clothes, take medications, eat, etc.) as expression of behaviour include (misunderstanding care needs, poor judgment) Revision on: 11/03/2025 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Maria is refusing to (refusal to bathe/shower, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 11/03/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY Inappropriate (hoarding left over food, utensils, etc. in her room/drawer, underneath her bed, threw a glass of fluids to floor/staff, wandering to other residents room and will take their belongings, putting soiled bed sheets/pad(soaked with urine) underneath her bed) as expression of behaviour include decreased insight, poor judgment. Revision on: 04/23/2024 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Maria is noted to (hoarding left over food, utensils, etc. in her room/drawer, underneath her bed, threw a glass of fluids to floor/staff, putting soiled bed sheets/pad(soaked with urine) underneath her bed) gently redirect her to focus on task at hand or escort to quieter area. Revision on: 04/23/2024 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: Registered staff/staff is encouraged to not wander into room/take other residents belongings. Revision on: 06/07/2022 Revision by: Maryola Perion (RN) • WANDERING: Permit Maria to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 09/16/2019 Revision by: Maryola Perion (Registered Nurse) 			
• Use of PASD (two 1/4 bed rails) to assist	• Maria will be effectively	• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of			
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location	2 207 A
Last Care Plan Review Completed:		11/03/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
resident with Activity of Daily Living (bed mobility and transfer). Revision on: 03/18/2025 Revision by: Suzanne Azar (RN)		supported with use of two 1/4 bed rails to optimize Activity of Daily Living (transfer and bed mobility) each day through to the next review date. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN) Target Date: 02/03/2026	possible benefits and challenges associated with Use of two 1/4 bed rails. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use two 1/4 bed rails as to support appropriate bed mobility and transfer. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN) • BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN)			PCA	D/E/N
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, etc.) Revision on: 09/11/2024 Revision by: Maryola Perion (RN)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 09/11/2024 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
• Potential for BOWEL INCONTINENCE related to Dementia. Revision on: 09/11/2024 Revision by: Maryola Perion (RN)		• Maria will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Occasionally Incontinent. Report changes to level as noted. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 09/11/2024 Revision by: Maryola Perion (RN)			Registered Staff PCA PCA	
Allergies	No Known Allergies			D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)			Admission Date	05/16/2019	Location	2 207 A
Last Care Plan Review Completed:		11/03/2025					

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Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for BOWEL INCONTINENCE related to Dementia. Revision on: 09/11/2024 Revision by: Maryola Perion (RN)</p>		<p>• INCONTINENCE PRODUCT: Maria uses a Blue Brief on Days, Evening, Night shifts. Revision on: 03/11/2025 Revision by: Maryola Perion (RN)</p>	PCA		
<p>• Potential for CONSTIPATION related to daily use of medication with binding effect. Revision on: 05/17/2024 Revision by: Katie Savo</p>	<p>• Maria will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Maria/SDM) for decision making regarding constipation management. Revision on: 12/07/2024 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of Maria for constipation management and changes to health status and symptoms/ complications of constipation. Revision on: 05/17/2024 Revision by: Katie Savo</p> <p>• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.</p> <p>• PHYSICAL ACTIVITY: Promote ACTIVITY/ MOVEMENT to stimulate bowels.</p> <p>• NUTRITION increased fibre intervention in place. See Nutrition Care Plan.</p> <p>• BOWEL PROTOCOL: In place as per MD order</p>	<p>Registered Staff</p> <p>Registered Staff</p> <p>Diet Registered Staff</p> <p>Registered Staff</p>		
<p>• Increased risk for FALLS related to: Dementia, Wandering, Repetitive physical movement, Hx of falls, Dementia, places self on floor.. Revision on: 03/27/2024</p>	<p>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 12/20/2024</p>	<p>• COMMUNICATION: Involve/collaborate with SDM in decision making in fall prevention Plan of Care. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator)</p> <p>• CALL BELL: Place call bell within reach of Maria, check that it is in working order</p>	<p>Registered Staff</p> <p>PCA</p>	<p></p> <p>Q1H</p>	
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location	2 207 A
Last Care Plan Review Completed:		11/03/2025			

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Focus		Goal	Interventions				Position	Freq/Resolved
Revision by: Ramil Santillan (Quality Improvement Coordinator)		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	and remind/encourage to use it. Maria may not remember how to use it when needed. Revision on: 11/15/2025 Revision by: Tola Omolade (ADOC) • ENVIRONMENT: Secure environment (reduce clutter) to reduce fall risk for Maria. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • BED: Maria's bed is placed against the wall in her room as per her personal preference. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 08/07/2025 Revision by: Maryola Perion (RN)				PCA	
• Risk for/Impaired SKIN INTEGRITY related to Dementia, incontinence with bladder, wearing incontinent product. Revision on: 12/29/2023 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.				PCA	
• Urinary (mixed) incontinence Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Maria will maintain current level of bladder function through the review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/03/2023 Revision by: Maryola Perion (RN) • URINARY Continence level is Total Incontinence. Report changes to level as noted. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Maria uses a Blue Brief on Days, Evening, Night shifts.				PCA	
Allergies	No Known Allergies			D.O.B.	07/14/1948		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)							
Facility	Berkshire Care Centre						Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)			Admission Date	05/16/2019		Location	2 207 A
Last Care Plan Review Completed:		11/03/2025						

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		Revision on: 03/11/2025 Revision by: Maryola Perion (RN) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed.	PCA	
• Potential to experience FOOT/FEET complications related to toenail issues. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN)	• To maintain adequate Foot/Feet/Toenail care and minimize episodes of inflammation, infection or complications through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with Maria/SDM in decision making for footcare treatment plan. Revision on: 12/07/2024 Revision by: Maryola Perion (RN) • TREATMENT PLAN: Maria requires footcare/treatment every 6-8 weeks. Revision on: 12/07/2024 Revision by: Maryola Perion (RN)	Footcare Nurse - Internal	
• Potential to experience alteration in MOOD as exhibited by (repetitive questions, persistent anger with self or others, repetitive physical movement) related to Dementia, MDD Revision on: 08/07/2021 Revision by: Maryola Perion (RN)	• To decrease the episodic frequency of Negative Mood Symptoms by the next review date. DRS score will be maintained to 0. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • HEALTH EDUCATION: Provide education and support to Maria/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Maria for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Maria's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse	
• Strength	• In 3 months to improve the	• Strength exe. with use of 1-3lbs. wt for B/L UE and LE, 1set, 10rps, 2-3/wk as	PT -	
Allergies	No Known Allergies		D.O.B.	07/14/1948
Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location 2 207 A
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Focus	Goal	Interventions	Position	Freq/Resolved	
Revision on: 03/11/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	strength of the B/L UE≤ from 3+5 to 4/5 Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	tolerated. Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	Physiotherapist PTA		
• Balance. Revision on: 03/11/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• In 3 months To improve the dynamic standing balance to reduce fall risk from 16 to 19 per Tinetti scores Revision on: 05/12/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/03/2026	• Dynamic balance exe. at the rails +1A,1set,10rps.,2-3/wk as tolerated. Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	PT - Physiotherapist PTA		
• Potential for muscular dysfunction, contractures and bone deformity related to Osteoarthritis. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Osteoarthritis through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• COMMUNICATION: Involve/ collaborate with SDM in decision making of musculoskeletal care management. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of Osteoarthritis as per MD order. Monitor effectiveness and for side effects. Revision on: 12/29/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for Osteoarthritis prescribed and in place; refer to Pain Care Plan. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)			
• Altered COMMUNICATION as exhibited by limitations to (self expression,	• Maria will be supported to maintain current communication	• COMMUNICATION: Involve/collaborate with Maria/SDM for decision making about strategies needed to support effective communication.			
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location	2 207 A
Last Care Plan Review Completed:		11/03/2025			

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Focus	Goal	Interventions	Position	Freq/Resolved
comprehension, etc.) related to Dementia, Language Barrier Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • PRIMARY LANGUAGE: Maria's primary language is Spanish. She is able to speak/understand English. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • INTERPRETER Required: Maria speaks Spanish. Interpreter as needed and ask assistance of staff that speaks/understands Spanish. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Maria needs (constant) cueing or demonstrative instruction in tasks and activities. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	ACT	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	• Maria will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making of Cognitive Loss for Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • ORIENTATION: Gently reorient to (person, place, time) as needed when Maria is feeling lost or in confused state. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)		
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	• Maria will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator)	• BATHING: Maria prefers (shower/tub bath) on (Wednesdays and Sundays on Evening shift). Maria participates by (providing a washcloth and cues). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Maria is able to turn and reposition herself independently in bed. Maria may require one to two staff Extensive assistance at night time.	PCA PCA	
Allergies	No Known Allergies		D.O.B.	07/14/1948
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)		Physician	Albert Patrick Ng
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location 2 207 A
Last Care Plan Review Completed:		11/03/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Coordinator) Target Date: 02/03/2026	Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • DRESSING: Maria requires One to two staff MAXIMAL assistance for dressing UPPER & LOWER body. Maria may be resistant to changing her clothing. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • EATING: Maria is Independent with set up. Eats in the unit dining room - 5th floor. She may require cueing and encouragement from staff. Revision on: 09/11/2024 Revision by: Maryola Perion (RN) • LOCOMOTION: Maria is Independent with her ambulation and requires Supervision from staff due to being in a locked unit. Maria may require one staff weight bearing assist when she is unsteady or weak. Revision on: 02/18/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Maria requires one to two team members extensive assistance with providing peri care. Staff to set up her wash/face cloth in her washroom and cue and guide her in washing her face and brushing her teeth. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • HAND HYGIENE: 1 staff to provide REMINDER assistance to apply sanitizer or use wipes for hand hygiene. Revision on: 01/23/2022 Revision by: Maryola Perion (RN) • TOILET USE: Maria requires one to two team members extensive assistance to assist with changing and reapplying a new incontinence product and providing pericare. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • TRANSFERRING: Maria is able to transfer independently from a sitting to standing position. She may require one to two staff Extensive assistance at times when getting up in the morning. Revision on: 08/07/2025 Revision by: Maryola Perion (RN)	PCA	
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)			
Facility	Berkshire Care Centre			Print Date 12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location 2 207 A
Last Care Plan Review Completed:		11/03/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> ORAL CARE: Maria is Independent with set up with her oral hygiene. Some teeth are missing. Staff will continue to remind Maria to do her oral hygiene in the morning and evening before going to bed. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) FOOT CARE: PSW to complete toenail care on bath/shower days. Report long toe nails or other abnormalities as noted. Revision on: 12/07/2024 Revision by: Maryola Perion (RN) 	PCA		
<ul style="list-style-type: none"> Maria is at high risk for elopement related to: Exit seeking, Wandering, Dementia. Revision on: 01/06/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> To promote Maria's safety and minimize risk for episode of elopement each day through next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026 	<ul style="list-style-type: none"> ALERT: Maria has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) ELOPEMENT ALERT: Redirect Maria away from elevator or exit doors as needed Revision on: 02/21/2021 Revision by: Maryola Perion (RN) 	PCA		
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Maria Medical Treatment and End of Life Care Revision on: 01/06/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor Maria's expressed wishes and beliefs through to the End of Life. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026 	<ul style="list-style-type: none"> CPR: Maria wishes to have CPR and TRANSFER to hospital. Revision on: 12/30/2020 Revision by: Clarisa Amir (RPN) FUNERAL Arrangements: Life Transitions Burial and Cremation Service Inc. Chatham , ON Revision on: 11/03/2025 Revision by: Maryola Perion (RN) 	Social Worker ST		
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location	2 207 A
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• SPIRITUAL BELIEFS: Maria is of the catholic Faith. Revision on: 11/20/2019 Revision by: Hannelore Steinke-Nelson (Activation aide)		• To provide Maria spiritual support as interested through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice ACT including church services (Parkwood, Catholic), spiritual music, prayer circles, spiritual celebrations, etc. Revision on: 05/27/2020 Revision by: Shayna Lee Wonsch (Activation Manager) • SELF-DIRECTED SPIRITUAL Activities: Maria engages in prayer using her rosary. Revision on: 10/22/2025 Revision by: Nick Carroll (Recreation Aide)				
• Sleep Patterns. Revision on: 05/31/2019 Revision by: Maryola Perion (Registered Nurse)		• To promote adequate rest/sleep for Maria based on identified sleep patterns/preferences each night through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	• REST PATTERN: Preferred bedtime: 20:00-21:00, usual wake time: 6:00-7:00 Revision on: 06/02/2019 Revision by: Maryola Perion (Registered Nurse) • SLEEPWEAR: Maria prefers to wear her own clothes. Revision on: 06/02/2019 Revision by: Maryola Perion (Registered Nurse)			PCA PCA	
• Nutrition Risk Level (diet details)		• Maria will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026 • Will weigh within Realistic weight range 65-75 kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 02/03/2026	• NUTRITION RISK: Maria is moderate risk level. Revision on: 03/28/2023 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: Maria will receive regular diet, minced texture. Revision on: 02/28/2024 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Maria drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/27/2021 Revision by: Olivia Kuhlmann (Dietetic Intern) • FLUID TARGET: Encourage Maria to drink a minimum 1290ml per day Revision on: 02/10/2025 Revision by: Brittany Hyde • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.			Dietitian (RD) Dietary Manager PCA Diet PCA PCA Dietary aide PCA	
Allergies	No Known Allergies			D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Micuda, Maria (922131005225)			Admission Date	05/16/2019	Location	2 207 A
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• Nutrition Risk Level (diet details)	<p>• Maria will be adequately hydrated aeb drinking at least 1290ml per day based on 75% of total fluid requirement of 1720-2064ml @ 25-30 ml/kg, 68.8kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 02/03/2026</p> <p>• Will meet estimated nutritional requirements of 1720-2064 kcal @ 25-30 kcal/kg, 69-83g protein @ 1-1.2g/kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 02/03/2026</p>	<p>• MEDPASS SUPPLEMENTS: 60mL Resource 2.0 with medpass BID Revision on: 10/22/2025 Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• HIGH FIBRE: Offer 200ml prune juice at breakfast Revision on: 06/10/2024 Revision by: Laura Seibel (Dietitian (RD))</p> <p>• LABELLED SNACK: Maria receives ice cream at AM nourishment pass on Monday, Wednesday and Fridays and popsicles on Tuesday, Thursday, Saturday, Sunday Revision on: 05/09/2025 Revision by: Ronnie Fung (FSM - Food Services Manager)</p>	PCA	D/E

Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Expressive Behaviour</p> <p>Revision on: 12/11/2025</p> <p>Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• Jane will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 03/02/2026</p>	<p>• BATHING: Jane prefers (shower/tub bath) on (Thursdays and Sundays Evening shifts). Jane participates by (help throughout the entire bath by giving her a cloth with soap on it and providing cueing). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day.</p> <p>Revision on: 07/04/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED MOBILITY: Jane is independent with her movement once in bed.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DRESSING: Jane requires 1 team member to provide her with limited assistance to dress. She can step in her pants. She can dress her upper body. She is capable of doing most on her own. Level varies due to her cognition.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Jane is independent with eating. She eats on the second floor in the dining room.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Jane is independent with ambulation with no gait aid required.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Jane requires cueing and prompting for her personal hygiene. Care level varies due to her cognition and she may require 1 team member limited assistance.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide (REMINDER) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands) for hand hygiene.</p> <p>Revision on: 03/21/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: Jane is able to toilet herself independently. When incontinent or confused she will require 1 team member to assist with limited assistance.</p> <p>Monitor resident as when she self toilets she will get up midstream and stand up and put her pants on while she is still voiding causing her to have a wet brief.</p>	PCA	PCA	
Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified(G30.9), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Morel, Jane (922131005622)	Admission Date	03/21/2025	Location	2 209 B
Last Care Plan Review Completed:		09/19/2025			



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<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Expressive Behaviour</div> <div>Revision on: 12/11/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>Revision on: 09/08/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRANSFERRING: Jane is able to transfer independently.</div> <div>Revision on: 03/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• ORAL CARE: Jane has her own teeth with some missing. She requires cueing and set up for her oral care.</div> <div>Revision on: 03/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>	PCA		
<div>• Expressed Wishes and Beliefs related to Jane Medical Treatment and End of Life Care</div> <div>Revision on: 12/11/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• To support and honor (Jane) expressed wishes and beliefs through to the End of Life.</div> <div>Revision on: 03/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 03/02/2026</div>	<div>• CPR: Jane's wishes to have Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details.</div> <div>Revision on: 03/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>			
<div>• Potential for PAIN and alteration in comfort level related to unsteady mobility. Most Current LTCF score is 0</div> <div>Revision on: 12/11/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• Promote MDS Pain Score of 0 through to the next review.</div> <div>Target Date: 03/02/2026</div>	<div>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</div>	RN Registered Practical Nurse		
<div>• Increased risk for FALLS related to cognitive loss, wandering</div>	<div>• To promote safety, minimize risk for falls and/or fall related</div>	<div>• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it.</div>	PCA	D/E/N	
Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
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Resident	Morel, Jane (922131005622)	Admission Date	03/21/2025	Location	2 209 B
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Revision on: 12/11/2025 Revision by: Shina Wadhwa (Physical Therapist)	injury each day through to the next review period. Target Date: 03/02/2026	Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear for ambulation and transferring. Will need reminders and assistance to don and doff footwear Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Alzheimer's Disease Revision on: 12/11/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Jane will be supported to maintain cognitive function through the review date. Current CPS is Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when (Jane) is feeling lost or in confused state. Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Jane can comprehend and follow. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Risk for Impaired SKIN INTEGRITY related to Frailty, incontinence Revision on: 12/11/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To protect and maintain skin integrity each day through to the next review. Target Date: 03/02/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.	PCA	
• Jane is at high risk for ELOPEMENT related to exit seeking at the elevator with ehr purse Revision on: 12/11/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To promote Jane safety and minimize risk for episode of elopement each day through next review date. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• ALERT: Jane has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • DIVERSION ACTIVITY: Resident responds well to (playing music, doing puzzles, conversing, watching TV, movies) to divert attention when exit seeking. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • ELOPEMENT ALERT: Redirect Jane away from elevator or exit doors as needed. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	

Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Morel, Jane (922131005622)	Admission Date	03/21/2025	Location	2 209 B
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<p>• Potential for Expressive Behaviour of (WANDERING, PHYSICAL, RESISTANCE to care need) nature related to Alzheimer's, Schizoaffective disorder, Tourette Syndrome, history of hallucinations and delusions</p> <p>Revision on: 12/11/2025 Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• To promote safety for Jane and/or others during each episode of (physical, resistiveness, wandering) through to the next review date.</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026</p> <p>• To decrease episodic frequency of (wandering, resistiveness, physical) by next review date. ABS score will be less than (3).</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026</p>	<p>• TRIGGERS leading to PHYSICAL (Hitting, waving arms at others, attempts to strike out, kick) as expression of behaviour include (confusion, invasion of personal space, Sundowning)</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Jane is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance.</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement.)</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Jane is declining to (Specify: bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit Jane to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>			
<p>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Alzheimer's</p> <p>Revision on: 12/11/2025 Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• Jane will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date.</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026</p>	<p>• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.).</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• INSTRUCTION GUIDANCE: Jane needs (intermittent) cueing or demonstrative instruction in tasks and activities.</p> <p>Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>			
<p>• At Risk for SOCIAL ISOLATION and/or</p>	<p>• Team members will support</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs on her floor of personal</p>			
Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Morel, Jane (922131005622)	Admission Date	03/21/2025	Location	2 209 B
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alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation, Cognitive Limitation, exit seeks while on the main floor Her ISE score is 3/6 Revision on: 12/04/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		Jane in decreasing social isolation by participating in activities of personal choice for 5-10 times per month by the next review date. Revision on: 12/04/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/02/2026	interest; music, movies, physical games, Revision on: 09/09/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading magazines, watching TV in Lounge, walking, conversing with peers, etc. Revision on: 09/09/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - Accompany in elevator, Walk with, Guide to, Porter, Cue Direction, Reminders, monitor her well when bringing her down for main floor programs due to may exit seek. Revision on: 12/04/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide her with individual visits for conversation, reminiscing, etc. Revision on: 04/15/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
• Sleep Patterns; Potential for alteration in sleep patterns related to cognitive loss Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Jane's based on identified sleep patterns/preferences each night through to the next review date. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• REST PATTERN: Preferred bedtime is around 1800-1700 as she reports and likes to get about 0500. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for CONSTIPATION related to (daily use of medication with binding effect). Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Jane will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 03/31/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 03/02/2026	• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. Revision on: 03/31/2025 Revision by: Brittany Hyde (Registered Dietitian) • NUTRITION increased fibre intervention in place. See Nutrition Care Plan.		Diet Registered Staff	
Allergies	Penicillin		D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Morel, Jane (922131005622)		Admission Date	03/21/2025	Location	2 209 B
Last Care Plan Review Completed:		09/19/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	<ul style="list-style-type: none"> To minimize the potential for episodes/ complications of constipation through to the next review date Revision on: 03/31/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 03/02/2026				
<ul style="list-style-type: none"> BOWEL Continence - Jane is continent and has self recognition of urge to defecate. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> Jane to remain continent of bowels through next review date Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	<ul style="list-style-type: none"> BOWEL Continence level is CONTINENT. Report change to level as noted. SELF TOILETING: Jane toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to Alzheimer's Revision on: 04/13/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Jane will have urinary incontinence managed every shift through to the next review period. Revision on: 04/13/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level URINARY Continence level is (Incontinent). Report change to level as noted. SCHEDULED TOILETING: Toilet Jane every 2 hours and PRN. INCONTINENCE PRODUCT: Resident uses brief up on all shifts Revision on: 04/13/2025 Revision by: Maryola Perion (RN)	Registered Staff PCA PCA PCA		
<ul style="list-style-type: none"> SPIRITUAL BELIEFS: Jane is of the Catholic Faith. Revision on: 03/23/2025 Revision by: Hannelore (Hannah) Steinke-	<ul style="list-style-type: none"> To provide Jane spiritual support as interested through to the next review date. Revision on: 04/15/2025	<ul style="list-style-type: none"> SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including (specify; Hymn Sing, Catholic Mass, Church Service, etc.). Revision on: 03/23/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Morel, Jane (922131005622)	Admission Date	03/21/2025	Location	2 209 B
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Nelson (Recreation Aide)	Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/02/2026				
• Nutrition Risk Level	• Jane will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026 • Will weigh within realistic weight range of 60-70 kg through to next review date. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/02/2026 • Jane will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2025 ml/day (30 ml/kg using 67.5 kg weight) through to next review date. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/02/2026	• NUTRITION RISK: Jane is low risk level. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))	Dietitian (RD)		
		• DIET ORDER: Jane will receive Regular diet, Regular texture Revision on: 03/31/2025 Revision by: Brittany Hyde (Registered Dietitian)	PCA		
		• FLUID CONSISTENCY: Jane drinks REGULAR/THIN Level 0 Fluids. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		• FLUID TARGET: Encourage Jane to drink a minimum of 1620 ml/day Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA		
		• HIGH FIBRE: Offer 200 ml prune juice at breakfast M-W-F Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	D/E	
• Potential to experience alteration in MOOD as exhibited by (restlessness) related to Alzheimer's Disease,	• To support Jane with their identified coping strategies for mood/emotional stability each	• RESIDENT STRENGTHS: Build on Jane effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
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Focus	Goal	Interventions	Position	Freq/Resolved
Schizoaffective disorder, Tourette Syndrome. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	day through to the review date. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• DISTRACTION ACTIVITIES: Jane can be calmed doing activities of interest including (listening to music, colouring, watching TV) Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM	• To treat and/or minimize signs/symptoms of (HYPOTHYROIDISM) through to the next review date. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (HYPOTHYROIDISM) for changes to health status and alteration or complications affecting endocrine function. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications) Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. • PHARMACY MEDICATION REVIEW: Request Pharmacy Medication Review when clinically appropriate Revision on: 03/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff	

Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
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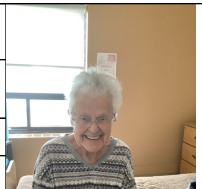
Diagnosis

Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified(G30.9), Schizophrenia, unspecified(F20.9), Hyperlipidaemia, unspecified(E78.5), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3)

Allergies	Penicillin	D.O.B.	07/29/1954	Physician	Albert Patrick Ng
Diagnosis	Combined vocal and multiple motor tic disorder [de la Tourette](F95.2), Hypothyroidism, unspecified(E03.9), Delayed milestone(R62.0), Dehydration(E86.0), Alzheimer's disease, unspecified (G30.9), ...See last page for a complete listing of the Resident's diagnoses				
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Care Plan Report

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<ul style="list-style-type: none"> Alteration in skin integrity related to skin tear noted to left outer arm Revision on: 11/28/2025 Revision by: Rana Maghnieh (RPN)	<ul style="list-style-type: none"> To promote intact skin integrity through healing of Skin Tear to left outer Arm Revision on: 11/28/2025 Revision by: Rana Maghnieh (RPN) Target Date: 02/07/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Skin Tear for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/28/2025 Revision by: Rana Maghnieh (RPN) <ul style="list-style-type: none"> WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 11/28/2025 Revision by: Rana Maghnieh (RPN)				
<ul style="list-style-type: none"> Alteration in skin integrity related to BRUISE to (specify size, color and body location of Bruise). 						
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy, use of anti-psychotic/antidepressant medications. Revision on: 11/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Shirley)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of Shirley using anti-psychotic medication for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) <ul style="list-style-type: none"> MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. 	Registered Staff			
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level related to tumors to back, neck and bilateral hips, discomfort to hips, Multiple Myeloma, Osteoarthritis, Back and neck pain crying, facial grimacing. Most Current LTCF Score is 0. 	<ul style="list-style-type: none"> To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord)	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Shirley)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain 	RN Registered			
Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Nantais, Shirley (922131005565)		Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025				



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 08/14/2025 Revision by: Danielle Loreto (RAI Coordinator)	Back-up) Target Date: 02/07/2026 • Promote MDS Pain Score of 0 through to the next review. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 09/06/2024 Revision by: Maryola Perion (RN)	Practical Nurse Registered Practical Nurse RN	
• SPIRITUAL BELIEFS: Shirley is of the Non-Religious Faith. Revision on: 08/06/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	• To provide Shirley spiritual support as interested through to the next review date. Revision on: 08/06/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/07/2026	• PERSONAL CHOICE: Respect Shirley's right to decline participation in Spiritual Program. Revision on: 08/06/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		
• STRONG PARTICIPATION in Activities ISE score: 6/6 Revision on: 08/06/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	• Shirley will be supported to maintain participation in activities, 10-15 times per month by the next review date. Revision on: 11/02/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 02/07/2026	• STRUCTURED ACTIVITIES: Invite Shirley to programs of personal interest; music programs ex. happy hour, fun and fitness, crafts, beauty club, special events. Revision on: 06/11/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage Shirley to engage in self-directed activities such as watching t.v, conversing with other residents and staff. Revision on: 06/26/2024 Revision by: Laura Morris (Restorative Care Aide) • ONE to ONE: Provide Shirley with individual visits for conversation and reminiscing manicures and hand massage, and to keep her socializing with others Revision on: 06/11/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		
• Increased risk for FALLS related to history of falls, History of attempting to get out of bed unassisted, forgetful of using walker and self transferring Revision on: 12/04/2024	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord	• Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls. Revision on: 11/08/2025 Revision by: Tola Omolade (ADOC) • COMMUNICATION: Involve/collaborate with (Shirley)/SDM in decision making in	RN Registered Practical Nurse PCA	
Allergies	No Known Allergies		D.O.B.	07/29/1940
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses		Physician	Albert Patrick Ng
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)	Admission Date	05/29/2024	Location 2 201 A
Last Care Plan Review Completed:		11/07/2025		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		Back-up) Target Date: 02/07/2026	fall prevention Plan of Care. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within Shirley's reach, check that it is in working order and remind/encourage to use it. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker - Shirley tends to forget or refuse using it. Team to continue to encourage her to use her walker Revision on: 09/06/2024 Revision by: Maryola Perion (RN) • ENVIRONMENT: Ensure environment is clean and clear of clutter to reduce risks for falls. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)			PCA	D/E/N
• Potential for altered bone density related to diagnosis of OSTEOPOROSIS. Revision on: 11/29/2024 Revision by: Shina Wadhwa (Physical Therapist)		• To treat and minimize complications associated with OSTEOPOROSIS through to the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• COMMUNICATION: Involve/ collaborate with (Shirley)/SDM in decision making of osteoporosis care management. Revision on: 09/25/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for osteoporosis management. Monitor effectiveness and for side effects. • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of osteoporosis for discomfort/ complications or changes to health status.			Registered Staff	
• Potential for bruising, bleeding, clotting or other complications related to use of ANTICOAGULANT medication. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• To monitor for bleeding and minimize complications related to use of anticoagulant through the review date. Revision on: 12/20/2024	• COMMUNICATION: Involve/collaborate with (Shirley)/SDM in decision making and health teaching of Anti-coagulation medication use. Revision on: 09/06/2024 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies			D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)			Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
		Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident using Anticoagulant therapy for changes to health status and complications causing bleeding or clotting issues. Revision on: 09/06/2024 Revision by: Maryola Perion (RN)• BLEEDING ALERT: Notify nurse immediately if Shirley is bleeding (noted blood in urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 09/06/2024 Revision by: Maryola Perion (RN)• MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.		PCA Registered Staff		
<ul style="list-style-type: none">• Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate (peeing on the floor), RESISTANCE to care need, Hallucinations nature related to Vascular Dementia. Revision on: 10/09/2024 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 1. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026• Shirley will be supported to adjust to her new environment to lower risk of triggering former WANDERING, PHYSICAL inappropriate, VERBALLY inappropriate, etc. behaviour episodes through to the next review. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Shirley)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Shirley for indications to change in or for escalating expressive behaviour risk. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)• TRIGGERS leading to PHYSICAL (Punching) as expression of behaviour include frustration, fearfulness, confusion Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator)• PHYSICAL Behaviour: If Shirley is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)• TRIGGERS leading to RESISTANCE to Care Needs of bathing, medication and getting out of bed as expression of behaviour include confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)		BSO - Internal Social Worker		
Allergies	No Known Allergies			D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)			Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate (peeing on the floor), RESISTANCE to care need, Hallucinations nature related to Vascular Dementia.</p> <p>Revision on: 10/09/2024 Revision by: Maryola Perion (RN)</p>		<p>• RESISTANCE to Care Need: If Shirley is declining to bathe, change clothes, take medications, eat, etc., re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 06/08/2024 Revision by: Maryola Perion (RN)</p> <p>• SOCIALLY Inappropriate Behaviour: If Shirley is noted to (peeing on the floor, removing her brief) clean area using appropriate PPE. Report episode to Registered Staff.</p> <p>Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit Shirley to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Redirect Shirley away from other residents when wandering. Encourage activities to reduce wandering. Wanders related to pain from sitting too long or believing its a different time of day.</p> <p>Often will wander into room 224. Monitor and redirect resident.</p> <p>Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HALLUCINATION: history of seeing animals that are not there.</p> <p>Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instructions) Physical: Hitting, striking out Triggers: Pain, confusion Recommendations: Use stop and go approach.Re approach when the resident is calm/ready. Report to registered staff. Recommend placing the resident to bed with TV on (ensure Western movies or music are on, she will not watch anything else) after each meal to allow for rest period. The best time to rest would be 30 min after pain medication has been administered. Care team If the resident is awake during the night shift, monitor for pain. Watch for pacing, unable to sleep, holding her right hip, neck, covering her ears or having expressions during care. Keep bed at 30 degree angle for comfort as it helps with</p>	PCA			
Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Nantais, Shirley (922131005565)		Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate (peeing on the floor), RESISTANCE to care need, Hallucinations nature related to Vascular Dementia. Revision on: 10/09/2024 Revision by: Maryola Perion (RN)		residents pain. The resident doesn't like to be told no so using statements like "that is not available at this time" or "we unable to go there at the moment" would be more effective when redirecting her instead of saying "no". The resident will fidget with blankets and bedding. Folding towels has been effective when redirecting her when she was at home. The resident will say no to important questions like "do you have to use the washroom?" Try not to ask but lead with "Hi Shirley, lets go to the washroom" and start walking toward the washroom. Revision on: 12/09/2024 Revision by: Leslie Meloche (Recreation Aide)		
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to self expression, comprehension related to Aphasia, minimal difficulty hearing, Stroke, Dementia. Revision on: 09/06/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Shirley will be supported to make basic needs known each day through to the review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Shirley's primary language is English. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) <ul style="list-style-type: none"> SUPPORTIVE TECHNIQUES: Team to adjust environment to lower sound when needed to aid in hearing. May have to adjust tone. Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> INSTRUCTION GUIDANCE: Shirley needs constant cueing or demonstrative instruction in tasks and activities. Revision on: 09/06/2024 Revision by: Maryola Perion (RN)		

Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)	Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 09/06/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/ collaborate with (Shirley)/SDM in decision making of musculoskeletal care management. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to health status. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none">• Risk for Impaired SKIN INTEGRITY related to incontinence, refusals to get out of bed, Multiple Myeloma, use of an incontinent product. Revision on: 08/02/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• To protect and maintain skin integrity each day through to the next review. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	<ul style="list-style-type: none">• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. <ul style="list-style-type: none">• HEALTH EDUCATION: Engage resident/SDM in health education regarding prevention of skin impairment and management. Revision on: 08/02/2024 Revision by: Maryola Perion (RN)	PCA			
<ul style="list-style-type: none">• Altered ability to complete Activities of Daily Living (ADLs) related to Vascular Dementia, Hypertension, GERD, B12 Deficiency, History of CVA, Tumors to back, neck and bilateral hips. Revision on: 06/25/2024 Revision by: Laura Seibel (Dietitian (RD))	<ul style="list-style-type: none">• Shirley will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none">• BATHING: Shirley prefers (shower/tub bath) on Tuesday and Fridays on Day shift). Shirley participates by (holding a wash cloth and being cued). One staff (EXTENSIVE) assistance for bathing.Nail care to be provided on shower/bath day. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• BED MOBILITY: Shirley is able to turn and reposition herself in bed.	PCA PCA			
Allergies	No Known Allergies		D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)		Admission Date	05/29/2024	Location	2 201 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 02/07/2026 • Shirley will have ALL ADL care needs met each day through the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	She may require one staff extensive assistance at times when confused or fatigued. Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Shirley requires limited to extensive assistance from one team member to dress from head to toe. Depends on strength in the moment and ability to follow direction. Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Shirley is Independent with intermittent supervision and cueing from staff. One staff member set her up. She eats in the Orchard Lane dining area. Revision on: 08/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Shirley requires the use of a walker when ambulating and is independent. She requires reminders and encouragement to use her walker as she is non compliant in using it and she does forget to use the walker. Off the home area she requires supervision. Revision on: 11/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL HYGIENE: Shirley requires one team member extensive assist with washing her face, brushing hair and providing pericare. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: 1 staff to provide LIMITED assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • TOILET USE: Shirley requires one team member extensive assist to transfer onto and off of the toilet and assist with providing pericare and adjusting clothing. Revision on: 08/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFERRING: Shirley requires guided assist from one team member to transfer from a sit to stand position. She often self transfers. Monitor for her ability to do so safely.	PCA	
Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre			Print Date 12/11/2025
Resident	Nantais, Shirley (922131005565)	Admission Date	05/29/2024	Location 2 201 A
Last Care Plan Review Completed:		11/07/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Vascular Dementia, Hypertension, GERD, B12 Deficiency, History of CVA, Tumors to back, neck and bilateral hips. Revision on: 06/25/2024 Revision by: Laura Seibel (Dietitian (RD))		Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> ORAL CARE: Shirley has full upper and lower dentures. Shirley requires one team member to brush and store her dentures in medication room. Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"> Nutrition Risk Level 	<ul style="list-style-type: none"> Shirley will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026 <ul style="list-style-type: none"> Will weigh within GWR of 50-60 kg through to next review date. Revision on: 06/12/2025 Revision by: Holly Laasanen (Dietitian (RD))	<ul style="list-style-type: none"> NUTRITION RISK: Shirley is moderate risk level. Revision on: 12/03/2024 Revision by: Lexi Dakin (Dietitian (RD)) <ul style="list-style-type: none"> DIET ORDER: Shirley will receive Regular diet, Regular texture (cut food into small pieces) Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> FLUID CONSISTENCY: Shirley drinks REGULAR/THIN Level 0 Fluids. Revision on: 06/11/2024 Revision by: Anika Dhalla (Dietitian (RD)) <ul style="list-style-type: none"> FLUID TARGET: Encourage Shirley to drink a minimum of 1200 ml per day. Revision on: 06/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> DINING INSTRUCTIONS: Cut food into small pieces 	Dietitian (RD) PCA PCA PCA Registered Practical Nurse			
Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Nantais, Shirley (922131005565)		Admission Date	05/29/2024	Location	2 201 A
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		Target Date: 02/07/2026 • Shirley will be adequately hydrated aeb drinking at least 80% of TFR: 1500 ml/day (28 ml/kg using 53.7 kg weight) through to next review date. Revision on: 06/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/07/2026	Provide crustless bread/toast Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) • ADAPTIVE AIDS: Lipped plate for meals. Revision on: 05/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FOOD INTOLERANCE: coconut Revision on: 06/11/2024 Revision by: Anika Dhalla (Dietitian (RD)) • HIGH CALORIE/PROTEIN IN MEALS: 125 ml chocolate milk TID @ meals Revision on: 06/12/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA PCA Restorative Care Aide PCA	BLD
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension Hyperlipidaemia. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Hypertension, Hyperlipidaemia through to the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• COMMUNICATION: Involve/collaborate with (Shirley)/SDM in decision making of Cardiac Care Management for Hypertension, Hyperlipidaemia. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of Shirley with Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • MEDICATION: Administer medication for Hypertension, Hyperlipidemia as per MD Order and monitor for side effects. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)		Registered Practical Nurse RN	
• Potential to experience alteration in MOOD as exhibited by low mood, Persistent anger with self or others, sad, pained, worried facial expressions, crying, repetitive physical movement related to Vascular Dementia, new admission. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 3. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• COMMUNICATION: Involve/collaborate with (Shirley)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Shirley for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)			
Allergies	No Known Allergies		D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)		Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<ul style="list-style-type: none"> • RESIDENT STRENGTHS: Build on Shirley's effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) 			
<ul style="list-style-type: none"> • COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, altered judgement related to Vascular Dementia (Short and long-term memory loss), Hx of stroke. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • Shirley will be supported to maintain cognitive function through the review date. Current CPS is 4. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Shirley)/SDM in decision making of Cognitive Loss for Vascular Dementia. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • ORIENTATION: Gently reorient to place and time as needed when Shirley is feeling lost or in confused state. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area (name plate) outside of room. Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator) 			
<ul style="list-style-type: none"> • Sleep Patterns; Potential for alteration in sleep patterns related to history of insomnia, new environment. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) 	<ul style="list-style-type: none"> • To promote adequate rest/sleep for Shirley based on identified sleep patterns/preferences each night through to the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026 	<ul style="list-style-type: none"> • REST PATTERN: Shirley wakes at approximately 8:00am and resides around 8:00pm. She may nap during the day. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) 	PCA		
<ul style="list-style-type: none"> • Potential for altered hematologic symptoms or complications related to diagnosis of Chronic B12 Deficiency. Revision on: 05/29/2024 	<ul style="list-style-type: none"> • To treat and/or minimize complications associated with Chronic B12 Deficiency each day through to the next review 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of Shirley with ANEMIA for complications or changes to health status. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) 			
Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)	Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Katie Savo (RAI Coordinator)	date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.	Registered Staff	
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD). Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• COMMUNICATION: Involve/collaborate with (Shirley)/SDM in decision making for GERD Management. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • POSITIONING: Encourage resident to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals. • MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.	PCA Registered Staff Registered Staff	
• Potential for BOWEL INCONTINENCE related to Vascular Dementia, history of CVA. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)	• Shirley will have bowel incontinence managed every shift through to the next review period. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is FREQUENTLY Incontinent. Report change to level as noted. Revision on: 11/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor Shirley for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • INCONTINENCE PRODUCT: Shirley wears a incontinent product. white brief Revision on: 12/04/2024 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff PCA PCA PCA	
• URINARY (Mixed) INCONTINENCE	• Shirley will have urinary	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for		
Allergies	No Known Allergies		D.O.B.	07/29/1940
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses		Physician	Albert Patrick Ng
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)	Admission Date	05/29/2024	Location 2 201 A
Last Care Plan Review Completed:		11/07/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
related to Vascular Dementia, history of CVA. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)	incontinence managed every shift through to the next review period. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	toileting needs, changes to health status and alteration of continence level. Revision on: 06/08/2024 Revision by: Maryola Perion (RN) • URINARY Continence level is Incontinent. Report change to level as noted. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Shirley wears a incontinent product. Resident wears a white size incontinent product Revision on: 11/12/2024 Revision by: Idylle Labrado (RPN)	PCA PCA			
• Shirley is at high risk for ELOPEMENT related to history of exit seeing. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)	• To promote Shirley's safety and minimize risk for episode of elopement each day through next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• ALERT: Shirley has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Resides on a secured home area. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • ELOPEMENT ALERT: Redirect Shirley away from elevator or exit doors as needed. Revision on: 06/08/2024 Revision by: Maryola Perion (RN)	PCA			
• Altered VISION related to macular degeneration, right eye worsening. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)	• To treat and minimize complications of macular degeneration through to next review date. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 02/07/2026	• COMMUNICATION: Involve/collaborate with SDM for decision making pertaining to change in visual status as needed. Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator) • EYEGLASSES: Shirley wears eyeglasses. Assist to clean eyeglasses as needed and store in the med cart when sleeping and put it back on in the morning. She will get up and move around without them on and may refuse to allow team to don them. Revision on: 05/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• Expressed Wishes and Beliefs related to Shirley's Medical Treatment and End of Life Care Revision on: 05/29/2024 Revision by: Katie Savo (RAI Coordinator)	• To support and honor Shirley's expressed wishes and beliefs through to the End of Life. Revision on: 12/20/2024 Revision by: Jenny Liu (RAI Coord	• CPR: (Shirley) wishes express DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 11/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Nantais, Shirley (922131005565)		Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025				

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved
	Back-up) Target Date: 02/07/2026			

Diagnosis

Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, unspecified(D51.9), Hyperlipidaemia, unspecified(E78.5), Multiple myeloma(C90.0), Stroke, not specified as haemorrhage or infarction(I64), Degeneration of macula and posterior pole(H35.3), Primary generalized (osteo)arthrosis(M15.0), Osteoporosis, unspecified(M81.9)

Allergies	No Known Allergies	D.O.B.	07/29/1940	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Dysphasia and aphasia(R47.0), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Vitamin B12 deficiency anaemia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Nantais, Shirley (922131005565)	Admission Date	05/29/2024	Location	2 201 A
Last Care Plan Review Completed:		11/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> • Nutrition: Swallowing difficulty as evidence by pocketing her food Revision on: 09/15/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> • To maintain safe swallowing through to next review date Target Date: 01/07/2026 • To obtain or maintain adequate intake to meet estimated nutritional requirements through to next review date Target Date: 01/07/2026 	<ul style="list-style-type: none"> • Provide diet/texture interventions as per Nutrition Risk Level 				
<ul style="list-style-type: none"> • Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, unclear speech, .) related to Dementia Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> • Laura is unable to express self and will be supported to have needs interpreted each day through the next review. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026 	<ul style="list-style-type: none"> • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases). Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Laura needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) 				
<ul style="list-style-type: none"> • Increased risk for FALLS related to Dementia, Alzheimer's and anxiety disorder. history of falls, antidepressant, Antipsychotic medications taken. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> • To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with SDM in decision making in fall prevention Plan of Care. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within Laura's reach, check that it is in working order and remind/encourage to use it. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • BED: place bed in lowest position, use high/low bed, etc.) to lower risk for injury. Revision on: 10/16/2023 Revision by: Teresa Quinto (RPN) • FOOTWEAR: Ensure Laura wears appropriate footwear during transfers 	PCA	D/E/N		
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	01/26/1957	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Passalacqua, Laura (922131005397)	Admission Date	05/05/2021	Location	2 225 B	
Last Care Plan Review Completed:		10/07/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">Increased risk for FALLS related to Dementia, Alzheimer's and anxiety disorder. history of falls, antidepressant, Antipsychotic medications taken. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision on: 01/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">FLOOR MAT: Position floor mat on floor next to the left and right side of bed to lower risk of injury. Revision on: 04/08/2025 Revision by: Teresa Quinto (RPN) <ul style="list-style-type: none">ALARMS: Requires blue pad alarm for BED and WHEELCHAIR. Check placement and working order. Staff to respond promptly to resident when alarm sounding. Revision on: 04/07/2025 Revision by: Kaylee Williams (Registered Practical Nurse)	PCA	D/E/N		
<ul style="list-style-type: none">Potential for Altered VISION related to cognitive loss Revision on: 01/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">Laura will use glasses for vision correction daily through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none">COMMUNICATION: Involve/collaborate with SDM for decision making pertaining to change in visual status as needed. Revision on: 04/23/2024 Revision by: Katie Savo <ul style="list-style-type: none">VISUAL IMPAIRMENT: Laura's vision is in question related to cognitive loss. Monitor for safety. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
<ul style="list-style-type: none">Sleep Patterns Revision on: 10/23/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">To promote adequate rest/sleep for Laura based on identified sleep patterns/preferences each night through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none">REST PATTERN: Resident is up before breakfast in the morning with no preference noted. Resident retires after dinner in the evening with no stated preference. Resident will nap in bed or in her chair throughout the day. Revision on: 01/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">SLEEPWEAR: Laura prefers to sleep in her own pajamas. Revision on: 05/11/2021 Revision by: Teresa Quinto (RPN)	PCA			
<ul style="list-style-type: none">Risk for/Impaired SKIN INTEGRITY related to Dementia, Alzheimer's disease,	<ul style="list-style-type: none">To protect and maintain skin integrity each day through to the	<ul style="list-style-type: none">SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered	PCA			
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	01/26/1957	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)		Admission Date	05/05/2021	Location	2 225 B
Last Care Plan Review Completed:		10/07/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
Incontinence, impaired mobility. Revision on: 10/23/2024 Revision by: Maryola Perion (RN)		next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	Staff as noted. • EQUIPMENT: Laura requires ROHO cushion to offload pressure. Revision on: 09/17/2024 Revision by: Janina Lucero (RN) • POSITIONING: Turn, reposition at least every 2 hours or when in be as per Laura's preference to offload pressure. Revision on: 05/30/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)				PCA	Q2h
• Potential for Expressive Behaviour of history of Refusals of snacks, resist care, verbally expressive related to Alzheimer's disease. Revision on: 10/23/2024 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 1. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY INAPPROPRIATE yelling, screaming, as expression of behaviour include, limitation in self expression Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) • SOCIALLY INAPPROPRIATE: If Laura is heard yelling,; calmly remind to lower her voice. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Laura is refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc., re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 10/23/2024				BSO - Internal Social Worker	
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	01/26/1957		Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Passalacqua, Laura (922131005397)		Admission Date	05/05/2021		Location	2 225 B	
Last Care Plan Review Completed:		10/07/2025						

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Potential for Expressive Behaviour of history of Refusals of snacks, resist care, verbally expressive related to Alzheimer's disease. Revision on: 10/23/2024 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN)			RN	
<ul style="list-style-type: none">• Potential to experience alteration in MOOD as exhibited by sadness, pained, worried facial expressions and tearfulness related to Depression and anxiety. Revision on: 10/23/2024 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• Laura will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Laura for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/02/2022 Revision by: Haley Cadarian (Quality Lead) <ul style="list-style-type: none">• MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/23/2024 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none">• Potential for Acute PAIN and alteration in comfort level related to uterine Fibroids, c/o back pain, head and neck is very stiff and constantly tilted to the left side. Revision on: 10/22/2024 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with SDM about pain management, goals of treatment, plan of care and treatment options. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.			RN Registered Practical Nurse	
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	01/26/1957		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)		Admission Date	05/05/2021		Location	2 225 B
Last Care Plan Review Completed:		10/07/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Target Date: 01/07/2026 • Maintain MDS Pain Score of 0 through to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/22/2024 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• Use of PASD Tilt Wheelchair to assist resident for comfort and support due to having head and neck tilted to left side. Revision on: 06/17/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Laura will be effectively supported with use of Tilt w/c to optimize comfort and support due to having head and neck tilted to left side each day through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use tilt wheelchair. Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • TILTED CHAIR in USE as a PASD to support resident with comfort and support due to having head and neck tilted to left side. Monitor when applied and reposition every 2 hours. Revision on: 09/30/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	D\ E PRN-N
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Missing Family/Friends & disinterest. ISE Score: 2/6 Revision on: 04/16/2024 Revision by: Laura Morris (Restorative Care Aide)		• Team members will support Laura in decreasing social isolation by participating in activities of personal choice 10-20 times per month by the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; 1:1 visits, simple physical games, guided meditation, manicures & hand massages, music programs, patio programs, reading groups, reminiscing groups, sensory programs, special events, etc. Revision on: 04/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as watching/listening to TV, listening to music, etc. Revision on: 11/29/2022 Revision by: Mitchell Atkinson (Recreation Aide) • ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - bring her to programs on the main floor when she is interested in attending. Revision on: 04/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide her with individual visits for music listening and			ACT	
Allergies	Penicillin, Sulfa Antibiotics			D.O.B.	01/26/1957	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)			Admission Date	05/05/2021	Location	2 225 B
Last Care Plan Review Completed:		10/07/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Missing Family/Friends & disinterest.</p> <p>ISE Score: 2/6 Revision on: 04/16/2024 Revision by: Laura Morris (Restorative Care Aide)</p>			<p>manicures/hand massage. Revision on: 04/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>				
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Alzheimer's Disease, Anxiety Disorder, Depression, Parkinsons. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>		<p>• Laura will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026</p> <p>• Laura will have ALL ADL care tasks met each day through the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026</p>	<p>• BATHING: Laura prefers (shower/tub bath) on (Tuesdays and Saturdays on Evening shifts). Two staff (Maximal) assistance for bathing. Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED MOBILITY: Laura requires one to two team members maximal assist for turning and repositioning while in bed. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DRESSING: Laura requires 1-2 team members maximal assist assist to get dressed for her lower body. Laura remains involved by lifting her limbs and guiding them through her clothing therefore 1 team member extensive for upper body. Revision on: 10/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Laura requires one team member to feed her. Eats her meals on fl.2 Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• LOCOMOTION: Laura is using a wheelchair and is dependent of the team with pushing her. Revision on: 10/26/2023 Revision by: Teresa Quinto (RPN)</p>	PCA		PCA	
Allergies	Penicillin, Sulfa Antibiotics			D.O.B.	01/26/1957	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)			Admission Date	05/05/2021	Location	2 225 B
Last Care Plan Review Completed:		10/07/2025					

Care Plan Report

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Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	01/26/1957	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)	Admission Date	05/05/2021	Location	2 225 B
Last Care Plan Review Completed:		10/07/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: PARKINSON'S Disease	• To treat and minimize signs/ symptoms or complications associated with (specify Etiology or diagnosis) through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• COMMUNICATION: Involve/ collaborate with Laura/ SDM in decision making of neurological care management for Parkinson's. Revision on: 02/08/2023 Revision by: Meghan Sears (ADOC)	PCA			
		• MEDICATION: Administer medication for Parkinson's as per MD order. Monitor effectiveness and for side effects. Revision on: 02/08/2023 Revision by: Meghan Sears (ADOC)				
		• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Parkinson's for changes to health status and alteration or complications affecting neurological function. Revision on: 02/08/2023 Revision by: Meghan Sears (ADOC)				
		• Observe SWALLOWING: Inform Registered staff of changes or any signs of difficulty in swallowing (coughing during eating, drooling, etc.). Revision on: 02/08/2023 Revision by: Meghan Sears (ADOC)	PCA			
• Potential for CONSTIPATION related to decreased mobility. Revision on: 04/21/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Laura will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.	Registered Staff			
		• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.	Registered Staff			
		• BOWEL PROTOCOL: In place as per MD order	Registered Staff			
• COGNITIVE LOSS; alteration in thought processes: Short term and long-term memory loss, difficulty concentrating, poor judgement related to Dementia, Alzhiemer's Disease Revision on: 08/17/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• Laura will be supported to make independent choice and safe decisions each day through to the review date. Current CPS is 4/6. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator)	• COMMUNICATION: Involve/collaborate with SDM in decision making of Cognitive Loss for Dementia. Revision on: 04/23/2024 Revision by: Katie Savo				
		• CUE TASKS: Break tasks into manageable subtasks, Laura can comprehend and follow. Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	01/26/1957	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Passalacqua, Laura (922131005397)		Admission Date	05/05/2021	Location	2 225 B
Last Care Plan Review Completed:		10/07/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Target Date: 01/07/2026					
• URINARY Mixed INCONTINENCE related to Alzheimer's disease. Revision on: 08/16/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Laura will have urinary incontinence managed every shift through to the next review period. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Laura for toileting needs, changes to health status and alteration of continence level. Revision on: 02/02/2022 Revision by: Haley Cadarian (Quality Lead) • URINARY Continence level is Totally Incontinent. Report change to level as noted. PCA Revision on: 10/23/2024 Revision by: Maryola Perion (RN) • SCHEDULED TOILETING: Increase check for need to toilet or be changed between 0130-1330 and PRN Revision on: 07/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Laura uses an incontinent product. White prevail brief. Revision on: 01/17/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• SPIRITUAL BELIEFS: Laura is of the Catholic Faith. Revision on: 05/17/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• To provide Laura spiritual support as interested through to the next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including Hymn Sing, Catholic Mass (when available), spiritual programs, etc. Revision on: 05/17/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)				
• Expressed Wishes and Beliefs related to Laura's Medical Treatment and End of Life Care Revision on: 05/05/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To support and honor Laura's expressed wishes and beliefs through to the End of Life. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026	• CPR: Laura wishes express DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details Revision on: 09/30/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Nutrition Risk Level		• Laura will be adequately nourished aeb consuming >75%	• NUTRITION RISK: Laura is moderate risk level. Revision on: 04/10/2025				
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	01/26/1957		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinso...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)		Admission Date	05/05/2021		Location	2 225 B
Last Care Plan Review Completed:		10/07/2025					

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		at meals and snacks through to next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026 • Will weigh within GWR/IBW/Realistic weight range of 55-60 kg/BMI 21-24 through to next review date. Revision on: 01/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/07/2026 • Laura will be adequately hydrated aeb drinking at least 80% of total fluid requirement 1408 ml/day (25 ml/kg using 56.3 kg weight) through to next review date. Revision on: 04/10/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/07/2026	Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Laura will receive regular diet, minced texture Revision on: 03/15/2023 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Laura drinks REGULAR/THIN Level 0 Fluids. Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID TARGET: Encourage Laura to drink a minimum of 1126 ml/day Revision on: 04/10/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 200ml high moisture food or fluid outside of meals and snacks daily. Revision on: 03/21/2023 Revision by: Anna Slack (Registered Dietitian) • ADAPTIVE AIDS: Laura requires a 2 handled sippy cup for her fluids Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) • AM SNACK: jello daily for hydration Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH CALORIE/PROTEIN PM SNACK: Greek yogurt daily Revision on: 09/30/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH FIBRE: 200mL prune juice at breakfast daily Revision on: 06/11/2024 Revision by: Anika Dhalla (Dietitian (RD))				Diet Food Services Aide PCA PCA PCA PCA Diet PCA PCA PCA PCA	


Care Plan Report

Diagnosis

Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinson's disease(G20)

Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	01/26/1957	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Leiomyoma of uterus, unspecified(D25.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Alzheimer's disease, unspecified(G30.9), Parkinson's disease, unspecified(G20) See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Passalacqua, Laura (922131005397)	Admission Date	05/05/2021	Location	2 225 B
Last Care Plan Review Completed:		10/07/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• STRONG PARTICIPATION in Activities</p> <p>ISE: 6/6</p> <p>Revision on: 10/18/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p>		<p>• Carol will be supported to maintain participation in activities 15-20 times per month by the next review date.</p> <p>Revision on: 04/01/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>Target Date: 01/29/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; friendly/1:1 visits, comedy corner, exercise groups, discussion groups, social - happy hour, music groups, reminiscing groups, special events, spiritual programs, etc.</p> <p>Revision on: 06/28/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as walking, visiting with residents/team members, watching/listening to TV, listening to music/radio, etc.</p> <p>Revision on: 04/01/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - Accompany in elevator, Walk with, Guide to, Cue Direction, Reminders, etc.</p> <p>Revision on: 04/01/2025</p> <p>Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music, humor, etc.</p> <p>Revision on: 02/20/2023</p> <p>Revision by: Mitchell Atkinson (Recreation Aide)</p>			ACT	
<p>• Alteration in skin integrity related to RASH to</p> <p># 23- Rash- left groin area onset Sept 26/25</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>• To promote intact skin integrity through healing of RASH by the next review date.</p> <p>Revision on: 09/26/2025</p> <p>Revision by: Teresa Quinto (RPN)</p> <p>Target Date: 01/29/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of Carol with Rashes for changes to health status and alteration or complications affecting skin integrity.</p> <p>Revision on: 09/26/2025</p> <p>Revision by: Teresa Quinto (RPN)</p> <p>• COMMUNICATION: Involve/collaborate with SDM in decision making for treatment of skin issues.</p> <p>Revision on: 09/26/2025</p> <p>Revision by: Teresa Quinto (RPN)</p> <p>• TOPICAL TX: Apply topical treatment to perineum and under both breasts as MD Order.</p> <p>Revision on: 09/26/2025</p> <p>Revision by: Teresa Quinto (RPN)</p> <p>• MEDICATION: Administer medication for RASHES to perineum and left groin area as per MD Order. Monitor effectiveness and for side effects.</p>			Registered Practical Nurse RN	
Allergies	No Known Allergies		D.O.B.	11/28/1940	Physician	Albert Patrick Ng	
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Powell, Carol (922131005489)		Admission Date	11/17/2022	Location	2 225 A	
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		Revision on: 09/26/2025 Revision by: Teresa Quinto (RPN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin and Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 09/26/2025 Revision by: Teresa Quinto (RPN)	Nurse RN	
• Potential for Persistent PAIN and alteration in comfort level related to mid/lower back pain, Arthritis, suspected thrombosis in the right Internal jugular vein, Right hand pain, left hand pain from base of thumb to distal radius (L-Humerus, L-wrist and hand showed some degenerative changes), right and leg pain, pain R-vastus lateralis muscle strain, Right knee pain (likely component of OA) back pain. Most Current LTCF Pain Score is 0/3. Revision on: 07/03/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026 • Promote LTCF Pain Score of 0 through to the next review. Revision on: 07/03/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026	• COMMUNICATION: Involve/collaborate with (Carol)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	RN Registered Practical Nurse Registered Practical Nurse RN	
• Sleep Patterns; Potential for alteration in sleep patterns related Dementia Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Carol based on identified sleep patterns/preferences each night through to the next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• REST PATTERN: Preferred bedtime: Between 2000-22:00, usual wake time: after lunch, will usually sleeps in per POA. Revision on: 05/23/2024 Revision by: Katie Savo • SLEEPWEAR: Carol prefers to wear night gown and house coat. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	PCA PCA	

Allergies	No Known Allergies	D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Powell, Carol (922131005489)	Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of History WANDERING, VERBAL, RESISTANCE to care need related to Dementia</p> <p>Revision on: 04/09/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote safety for Carol and/or others during each episode of Expressive Behaviour through to the next review date.</p> <p>Revision on: 05/23/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>Target Date: 01/29/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Carol)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</p> <p>Revision on: 10/11/2023</p> <p>Revision by: Ranjita Yadav (RPN)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Carol for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 11/17/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to VERBAL (occasionally swears, etc.) as expression of behaviour includes (limitation in self expression, pain, misunderstanding care intention, etc.)</p> <p>Revision on: 11/17/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• VERBAL Behaviour: If Carol is heard swearing ; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</p> <p>Revision on: 11/17/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc. as expressions of behaviour including confusion, misunderstanding care needs, poor judgement, etc.</p> <p>Revision on: 06/23/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Carol is refusing to (showering, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>For showers she likes Elvis music which may be helpful in distraction. Can have daughter help support as well.</p> <p>Revision on: 07/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: If Carol Powell is noted to hoard towels that are dirty. Clean area using appropriate PPE such as gloves. Report episode to Registered Staff.</p>	Social Worker		
Allergies	No Known Allergies	D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Powell, Carol (922131005489)	Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for Expressive Behaviour of History WANDERING, VERBAL, RESISTANCE to care need related to Dementia Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)			Revision on: 01/09/2023 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • WANDERING: Permit Carol to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)				
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of antidepressant medications) Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• COMMUNICATION: Involve/collaborate with (Carol)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
• Risk for Impaired SKIN INTEGRITY related to fragile skin, incontinent Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.			PCA	
Allergies	No Known Allergies			D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Powell, Carol (922131005489)			Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Risk for Impaired SKIN INTEGRITY related to fragile skin, incontinent Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	Target Date: 01/29/2026				
<ul style="list-style-type: none"> • Altered VISION related to Environ. modifications and support the Meibomian Gland, glaucoma, Macular Degeneration Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> • To treat and minimize complications through to next review date. Revision on: 10/18/2024 Revision by: Maryola Perion (RN) Target Date: 01/29/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Carol)/SDM for decision making pertaining to change in visual status as needed. Revision on: 10/18/2024 Revision by: Maryola Perion (RN)	PCA		
		<ul style="list-style-type: none"> • EYEGASSES: Carol has reading glasses but does not wear them. Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • READING: Carol uses (large print material) to aid with reading. Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)			
		<ul style="list-style-type: none"> • Administer treatment as per MD/NP order. Revision on: 10/18/2024 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> • Potential for BOWEL INCONTINENCE related to Episodes of Diarrhea/LBM, Dementia Revision on: 07/15/2024 Revision by: Katie Savo (RAI Coordinator)	<ul style="list-style-type: none"> • Carol will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 07/15/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 01/29/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. Revision on: 07/15/2024 Revision by: Katie Savo (RAI Coordinator)	Registered Staff		
		<ul style="list-style-type: none"> • BOWEL Continence level varies. She at times will toilet herself. She is infrequently incontinent but at times has full control Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 07/15/2024 Revision by: Katie Savo (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • INCONTINENCE PRODUCT: Carol uses a pullup for containment. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> • Increased risk for FALLS related to 	<ul style="list-style-type: none"> • To promote safety, minimize 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Carol)/SDM in decision making in fall 			
Allergies	No Known Allergies	D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Powell, Carol (922131005489)	Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Dementia, History falls, Arthritis, Macular degeneration, Glaucoma. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)	risk for falls and/or fall related injury each day through to the next review period. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	prevention Plan of Care. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment:Walker Revision on: 11/30/2023 Revision by: Chelsea Campbell-Wright (ADOC) • ENVIRONMENT: Secure environment reduce clutter to reduce fall risk for Carol. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	PCA PCA PCA	D/E/N		
• Potential for muscular dysfunction, contractures and bone deformity related to ARTHRITIS Revision on: 08/11/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To treat and minimize signs/symptoms or complications associated with ARTHRITIS through to the next review date. Revision on: 07/26/2023 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/29/2026	• Cold Pack application for 15 mins, 3-5 x a week, check every 1-2 mins, constant monitoring needed. • COMMUNICATION: Involve/ collaborate with (Carol)/SDM in decision making of musculoskeletal care management. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of ARTHRITIS for discomfort/ complications or changes to health status. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for ARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	PT - Physiotherapist PTA			
• Altered COMMUNICATION as exhibited by limitations to (self expression,	• Carol will be supported to maintain current communication	• PRIMARY LANGUAGE: Carol's primary language is English. She is able to speak/understand English.				
Allergies	No Known Allergies		D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Powell, Carol (922131005489)		Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
comprehension, etc.) related to Dementia Revision on: 02/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		abilities to express self, comprehend information, etc. each day through to the review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026 • Carol will be able to make basic needs known each day through to the review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Carol needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 01/09/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Expressed Wishes and Beliefs related to Carol Medical Treatment and End of Life Care Revision on: 02/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To support and honor Carol's expressed wishes and beliefs through to the End of Life. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• CPR: Carol wishes Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• SPIRITUAL BELIEFS: Carol is of the Catholic Faith. Revision on: 11/30/2022 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		• To provide Carol spiritual support as interested through to the next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice ACT including Hymn Sing, Catholic Mass, Church Service, etc. Revision on: 11/30/2022 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
• Nutrition Risk Level		• Carol will be adequately nourished aeb consuming >75%	• Labelled Item Breakfast: assorted sandwich daily to supplement breakfast refusals Revision on: 09/23/2025		PCA Registered Practical	D
Allergies	No Known Allergies		D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Powell, Carol (922131005489)		Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		at meals and snacks through to next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Carol is MODERATE risk level. Revision on: 01/06/2025 Revision by: Debora Choi (Dietitian (RD)) • DIET ORDER: Carol will receive regular diet, regular texture Revision on: 11/29/2022 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Carol drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/29/2022 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Carol to drink a minimum of 1334 ml/day Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • MEDPASS SUPPLEMENTS: 90 ml Resource 2.0 BID Revision on: 09/23/2025 Revision by: Holly Laasanen (Dietitian (RD))			Nurse RN Dietitian (RD)	
		• Will weigh within GWR/IBW/Realistic weight range of 60-70kg/BMI 28-33 through to next review date. Revision on: 11/07/2023 Revision by: Anna Slack (Registered Dietitian) Target Date: 01/29/2026 • Carol will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1668 ml/day (25 ml/kg using 66.7 kg weight) through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026				Diet Food Services Aide PCA Diet PCA PCA Dietary aide PCA	
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• COMMUNICATION: Involve/ collaborate with Carol/SDM in decision making of diabetes care management. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. • RESCUE MEDICATION: Administer GLUCAGON for hypoglycemia as per MD			Registered Staff Registered	
Allergies	No Known Allergies		D.O.B.	11/28/1940	Physician	Albert Patrick Ng	
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Powell, Carol (922131005489)		Admission Date	11/17/2022	Location	2 225 A	
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 01/29/2026	order. • LAB WORK: Monitor lab and diagnostic results for (fasting blood glucose and/or HbA1c) and report results to MD as needed. Follow up as indicated. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	Staff	
• Potential to experience alteration in CARDIAC FUNCTION related to; Hyperlipidaemia , Hypertension, presence of cardiac pacemaker Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Hyperlipidaemia , Hypertension through to the next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• COMMUNICATION: Involve/collaborate with (Carol)/SDM in decision making of Cardiac Care Management for Hyperlipidaemia , Hypertension. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hyperlipidaemia , Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hyperlipidaemia , Hypertension as per MD Order and monitor for side effects. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • PACEMAKER Insitu: Resident has pacemaker and requires follow up appointment Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN	
• Potential for altered hematologic symptoms or complications related to diagnosis of ANEMIA. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	• To treat and/or minimize complications associated with ANEMIA each day through to the next review date. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• COMMUNICATION: Involve/collaborate with (Carol)/SDM in decision making of hematologic care management for Anemia. Revision on: 11/17/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with ANEMIA for complications or changes to health status.	Registered Staff	
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 11/17/2022 Revision by: Maryola Perion (RN)	• Carol will receive support to use toilet and promote urinary continence each shift through to	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 11/17/2022 Revision by: Maryola Perion (RN)		
Allergies	No Known Allergies		D.O.B.	11/28/1940
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses		Physician	Albert Patrick Ng
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Powell, Carol (922131005489)	Admission Date	11/17/2022	Location 2 225 A
Last Care Plan Review Completed:		10/29/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		the next review. Revision on: 05/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/29/2026	• URINARY Continence level is infrequently Incontinent. Report change to level as noted. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Carol uses a pullup for containment. Revision on: 04/09/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA 	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	(RAI Coordinator) Target Date: 01/29/2026	<p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Carol requires cues and supervision assistance to eat. Eats in the unit dining room - Floor 2. Revision on: 04/09/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Carol is Independent with walker. Needs reminders to use walker as she will often forget. Revision on: 04/09/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Carol is able to participate in her hygiene care with cues and up to One staff Limited to extensive assistance at times when fatigued Revision on: 10/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide REMINDER assistance to apply sanitizer, rub hands together, hand wipes, etc. for hand hygiene. Revision on: 11/17/2022</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TOILET USE: Carol is Independent but requires staff to direct her to her bathroom when needed.</p> <p>One staff Limited to extensive assistance at times when fatigued or has been incontinent. Revision on: 10/01/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Carol is independent with transferring. May need 1 person limited assistance with transferring when confused or fatigued. Revision on: 04/09/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• ORAL CARE: Carol has upper denture and all bottom teeth are missing. She is able to do her own oral hygiene with staff cueing and reminders. Revision on: 11/17/2022</p> <p>Revision by: Maryola Perion (RN)</p>	PCA	

Allergies	No Known Allergies	D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Powell, Carol (922131005489)	Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

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Diagnosis

Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9), Degeneration of macula and posterior pole(H35.3), Hyperlipidaemia, unspecified(E78.5), Presence of cardiac pacemaker(Z95.00), Type 2 diabetes mellitus with poor control, so described(E11.64), Glaucoma, unspecified(H40.9), Acute upper respiratory infection, unspecified(J06.9)

Allergies	No Known Allergies	D.O.B.	11/28/1940	Physician	Albert Patrick Ng
Diagnosis	Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Other specified arthritis, other site(M13.88), Dementia in Alzheimer's disease, unspecified(F00.9), Ulcerative colitis, unspecified(K51.9)...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Powell, Carol (922131005489)	Admission Date	11/17/2022	Location	2 225 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Physical Dependency and on isolation now due to his dx, ISE 1/6 Revision on: 11/24/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	<ul style="list-style-type: none"> Team members will support Gordie in decreasing social isolation by participating in activities of personal choice for 5-10 times per month by the next review date. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/13/2026	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite him to programs of personal interest; baking, bingo, concerts, cards, movies, parties, tea social, as soon as he is out of isolation . Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as reading, watching TV in own room, walking, conversing with peers, etc. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none"> ONE to ONE: Provide him with individual visits for conversation, bedside activity, reading, reminiscing, etc. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none"> SOCIAL INTERACTION: Promote opportunity for Gordie to make friendships and sit with friends during activities once he is off isolation, and recreation will continue to provide him with one on one visits for socialization. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		
<ul style="list-style-type: none"> Pringle, George is experiencing episode of INFECTION Dental (gum infection). onset date; 13/11/2025 Revision on: 11/18/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To have infection adequately managed and treated without further complications Revision on: 11/14/2025 Revision by: Rana Maghnieh (RPN) Target Date: 01/13/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of monitoring resident for overall health condition, process of healing, secondary infections, until stable. Revision on: 11/14/2025 Revision by: Rana Maghnieh (RPN) <ul style="list-style-type: none"> VITAL SIGNS: Monitor VITAL SIGNS every shift until ABX therapy concludes Revision on: 11/14/2025 Revision by: Rana Maghnieh (RPN) <ul style="list-style-type: none"> MEDICATIONS: Administer medication/Antibiotic for infection, as per MD/NP order. Revision on: 11/14/2025 Revision by: Rana Maghnieh (RPN)		
<ul style="list-style-type: none"> Strengthening Exs Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	<ul style="list-style-type: none"> Increased strength for B/L LE from 3/5 to 3+/5 in next 3 months. Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/13/2026	<ul style="list-style-type: none"> Strengthening exs for B/L UE and LE, within pain limits, 1lbs to 2lbs, 10 reps, 1-2 sets, 2-3 x a week; Bike/Peddlars for 10-15 mins or as best tolerated; 2-3 x a week; Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	PT - Physiotherapist PTA	

Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Pringle, George (922131005667)	Admission Date	10/15/2025	Location	2 218 A	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Increased risk for FALLS related to Impaired Mobility/balance, Unsteady gait, history of falls, Left leg neuropathy, PVD. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/13/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (George)/SDM in decision making in fall prevention Plan of Care. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 10/15/2025 Revision by: Maryola Perion (RN) ENVIRONMENT: Secure environment: reduce clutter, etc.) to reduce fall risk for George Revision on: 10/15/2025 Revision by: Maryola Perion (RN) FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) 	PCA	D/E/N
<ul style="list-style-type: none"> Potential for Persistent PAIN and alteration in comfort level related to osteoarthritis, Left leg neuropathy, impaired mobility, Chondromalacia patellae. Most Current MDS Pain Score is 0. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 01/13/2026 <ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Target Date: 01/13/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (George)/SDM about pain management, goals of treatment, plan of care and treatment options. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) 	RN Registered Practical Nurse Registered Practical Nurse RN	

Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Pringle, George (922131005667)	Admission Date	10/15/2025	Location	2 218 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
• Altered VISION related to use of eyeglasses Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	• George will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• EYEGLASSES: George wears eyeglasses. Assist to clean eyeglasses as needed and store on night table, etc. when sleeping. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	PCA		
• SPIRITUAL BELIEFS:Gordie is of the Non-Religious Faith. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	• To provide Gordie spiritual support as interested through to the next review date. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/13/2026	• PERSONAL CHOICE: Respect Gordie's right to decline participation in Spiritual Program. does not partake in Christian/Muslim/other faith programs. Revision on: 10/19/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, etc.) Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff		
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of onions, peppers, laundry products that contain perfume/scents. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	• George will be protected from exposure to allergen each day through next review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • ALLERGY ALERT: George has ALLERGY to onions, peppers, laundry products that contain perfume/scents. Prevent contact with and report if noted to experience symptoms (rash, hives, skin irritations, etc.). Revision on: 10/15/2025 Revision by: Maryola Perion (RN)			
Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Pringle, George (922131005667)	Admission Date	10/15/2025	Location	2 218 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Hypertension through to the next review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)				
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS		• To treat and minimize signs/symptoms or complications associated with Osteoarthritis through to the next review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for osteoarthritis prescribed and in place; refer to Pain Care Plan. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)				
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, PVD, history of eczema Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 01/13/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.			PCA	
• Nutrition Risk Level		• George will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/13/2026 • Will weigh within realistic GWR	• Labelled Item Dinner: 200 ml orange juice daily for high potassium diet Revision on: 12/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Lunch: 200 ml tomato juice daily for high potassium diet Revision on: 12/11/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN PCA Registered Practical Nurse RN	E D
Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies		D.O.B.	07/31/1959		Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Pringle, George (922131005667)		Admission Date	10/15/2025		Location	2 218 A

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Focus	Goal	Interventions	Position	Freq/Resolved	
	<p>80-90 kg through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/13/2026</p> <p>• George will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2142 ml/day (25 ml/kg using 85.7 kg weight) through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/13/2026</p>	<p>• NUTRITION RISK: George is moderate risk level. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: George will receive regular diet, regular texture Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• FLUID CONSISTENCY: George drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• FLUID TARGET: Encourage resident to drink at least 1714 ml/day Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 11/25/2025 Revision by: Shereen Khan (Dietitian (RD))</p> <p>• FOOD INTOLERANCE: George avoids onions and peppers (resident self-reports reaction to these foods is swelling to his knuckles) Revision on: 11/27/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• LABELLED SNACK AM: 200 ml orange juice daily for high potassium diet Revision on: 12/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Dietitian (RD)</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA Restorative Care Aide</p> <p>PCA</p>	<p>D/E</p>	
<p>• Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p>	<p>• George will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026</p> <p>• To minimize the potential for episodes/ complications of constipation through to the next review date.</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.</p> <p>• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.</p> <p>• BOWEL PROTOCOL: In place as per MD order</p>	<p>Registered Staff</p> <p>Registered Staff</p> <p>Registered Staff</p>		
Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Pringle, George (922131005667)	Admission Date	10/15/2025	Location	2 218 A

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Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026				
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, vascular dementia. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To promote adequate rest/sleep for George based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/20/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime: Around 9:00pm, usual wake time: no specific time, early riser and naps during the day. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		PCA	
<ul style="list-style-type: none"> Potential for Expressive Behaviour of History of WANDERING, VERBAL (yelling), SOCIALLY Inappropriate (hoarding), RESISTANCE to care need, SEXUAL (taking off clothing in public) nature related to Delirium, Inability to COPE, Vascular Dementia. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To promote safety for George and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of George for indications to change in or for escalating expressive behaviour risk. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)			
		<ul style="list-style-type: none"> George will be supported to adjust to his/her new environment to lower risk of triggering former (WANDERING, PHYSICAL inappropriate, VERBALLY inappropriate, etc.) behaviour episodes through to the next 	<ul style="list-style-type: none"> TRIGGERS leading to VERBAL (yelling, threats to other residents) as expressions of behaviour include (others are making loud noises, loss of control, frustration, misunderstanding care intention, etc.) Revision on: 12/02/2025 Revision by: Danielle Loreto (RAI Coordinator)			
			<ul style="list-style-type: none"> VERBAL Behaviour: If George is heard yelling, etc.; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. 			
			Monitor interactions with other residents as resident as resident lacks insight into others limitations and this can trigger him. Team to separate from other residents if noted to become triggered.			
			Revision on: 12/02/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies		D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Pringle, George (922131005667)		Admission Date	10/15/2025	Location	2 218 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>review. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026</p>	<p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• RESISTANCE to Care Need: If George is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• SOCIALLY Inappropriate Behaviour: If George is noted to be hoarding things or stuff. Monitor his room and remove the items. Inform Registered staff of the behavior. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• WANDERING: Permit George to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p> <p>• SEXUAL Behaviour: If George) is noted to be taking off clothing in public, etc.) calmly assist him back in the privacy of his room. Assist as needed. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p>		
<p>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Vascular Dementia Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p>	<p>• George will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026</p>	<p>• PRIMARY LANGUAGE: George's primary language is English. He is able to speak/understand English. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <p>• INSTRUCTION GUIDANCE: George needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p>		

Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Pringle, George (922131005667)	Admission Date	10/15/2025	Location	2 218 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, altered judgement, etc. related to progression of Vascular Dementia Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	• George will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when George is feeling lost or in confused state. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area (i.e. name plate, photo, etc.) outside of room. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)				
• Potential for BOWEL INCONTINENCE related to Impaired MObility, Vascular Dementia Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	• George will receive support to (use toilet) and promote optimal bowel continence each day through to the next review. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is (USUALLY Continent). Report change to level as noted. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.	Registered Staff PCA PCA			
• Potential for URINARY INCONTINENCE related to altered mobility Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	• George will receive support to (use toilet, urinal) and promote urinary continence each shift through to the next review. Revision on: 10/20/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is occasionally incontinent. Report change to level as noted. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT/AID: Resident uses: urinal Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	PCA PCA			
• Altered ability to complete Activities of Daily Living (ADLs) related to Vascular	• George will be supported to cope with changing functional	• BATHING: George prefers showers on Wednesdays and Sundays on Day shift. One staff (EXTENSIVE) assistance for bathing.	PCA			
Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies		D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Pringle, George (922131005667)		Admission Date	10/15/2025	Location	2 218 A

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Focus		Goal	Interventions			Position	Freq/Resolved
Dementia, Osteoarthritis, Hypertension. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		abilities and have ADL care needs met each day through to the next review date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	<p>One staff for transfer.</p> <p>Nail care to be provided on shower/bath day.</p> <p>Revision on: 11/03/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <ul style="list-style-type: none"> BED MOBILITY: George is Independent and able to turn and reposition self for bed mobility. <p>He may require one staff limited assistance at times.</p> <p>Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> DRESSING: George is able to assist with cueing from staff. One staff to provide EXTENSIVE assistance for dressing his UPPER and LOWER body. <p>Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> EATING: George is able to eat Independently. <p>Eats in the unit dining room. 2nd floor.</p> <p>Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> LOCOMOTION: George requires the use of a walker to assist him when ambulating on the unit. He may require the assistance of one staff due to him being unsteady. For safety, he might need the use of a wheelchair when very unsteady or weak. <p>Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> PERSONAL HYGIENE: George is able to wash/dry his face/hands, peri care with cueing and reminders from staff. <p>He may require the assistance of one staff with peri care needs.</p> <p>Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> HAND HYGIENE: 1 staff to provide REMINDER assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. <p>Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> TOILET USE: George requires one staff to transfer him to the toilet. He is able to clean himself with cueing and reminders from staff. <p>May require one staff extensive assistance as needed for toileting needs.</p> <p>Encourage George to ask for assistance as he will walk to the toilet using a walker</p>				
Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies		D.O.B.	07/31/1959		Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
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Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Vascular Dementia, Osteoarthritis, Hypertension. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		for safety. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRANSFERRING: George requires one staff (pivot) to transfer him to and from bed to wheelchair. PCA Revision on: 10/26/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ORAL CARE: George has some teeth missing. He is able to do his own oral care with set up, cueing and reminders from staff. PCA Revision on: 10/15/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> SHAVING - George prefers (beard, mustache, face) shaved on his shower days and as needed. PCA Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		D
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to George Medical Treatment and End of Life Care Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To support and honor George expressed wishes and beliefs through to the End of Life. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 01/13/2026	<ul style="list-style-type: none"> CPR: George wishes to have CPR and TRANSFER to hospital. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		

Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary general...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Pringle, George (922131005667)	Admission Date	10/15/2025	Location	2 218 A

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Diagnosis


Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Peripheral vascular disease, unspecified(I73.9), Chondromalacia patellae(M22.4), Carrier of other infectious diseases(Z22.8), Insufficient intake of food and water(R63.6), Polyneuropathy, unspecified(G62.9)

Allergies

Onions, Peppers, Laundry products that contain perfume/scents

Allergies	Onions, Peppers, Laundry products that contain perfume/...See last page for a complete listing of the Resident's allergies	D.O.B.	07/31/1959	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Need for assistance due to reduced mobility(Z74.0), Constipation(K59.0), Atopic dermatitis, unspecified(L20.9), Benign hypertension(I10.0), Primary generali...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
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Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to SKIN TEAR to left knee (onset: Nov. 18, 2025) Revision on: 12/09/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To promote optimal healing of SKIN TEAR within the next review date. Revision on: 12/09/2025 Revision by: Janina Lucero (RN) Target Date: 03/09/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to left knee for changes to health status and alteration or complications affecting skin integrity. Revision on: 12/09/2025 Revision by: Janina Lucero (RN) • TREATMENT PLAN: Administer treatment for SKIN TEAR to left knee as per MD Order. Revision on: 12/09/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 12/09/2025 Revision by: Janina Lucero (RN) 				
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to SKIN TEAR to left elbow. Revision on: 11/19/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To promote optimal healing of SKIN TEAR within the next review date. Revision on: 11/19/2025 Revision by: Janina Lucero (RN) Target Date: 03/09/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to left elbow for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/19/2025 Revision by: Janina Lucero (RN) • TREATMENT PLAN: Administer treatment for SKIN TEAR to left elbow as per MD Order. Revision on: 11/19/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 11/19/2025 Revision by: Janina Lucero (RN) 				
<ul style="list-style-type: none"> • Strength Training Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) 	<ul style="list-style-type: none"> • Improved gait in terms of foot clearance and better foot placement in next 3 months; Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 03/09/2026 	<ul style="list-style-type: none"> • Strength training with 1-2 lbs for B/L UE and LE, as best tolerated;assist as needed; 10 reps, 2-3 x a week; Passive stretching for B/L Knees, 20-30sec hold, 3-5 reps, 2-3 x a week; Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) 	PT - Physiotherapist PTA			
Allergies	Codeine, Penicillin	D.O.B.	04/06/1952	Physician	Albert Patrick Ng	
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Ross, Kerry (922131005575)	Admission Date	07/23/2024	Location	2 222 A	
Last Care Plan Review Completed:		10/16/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Strength Training Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)						
• Transfer Training Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Reduce assistance needed for transfers from 2 assist to 1 assist in next 3 months Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 03/09/2026	• 2 person side to side assist with RW; Ensure pushing from armrest when getting up and hands back to armrest when sitting in the chair. 2-3 x a week; Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		PT - Physiotherapist PTA	
• Gait Training Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Improved independence for ambulation from 2 assist to 1 assist with RW in next 6 months Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 03/09/2026	• 2:1 assist gait training with RW with w/c follow up, distance as best tolerated, Cue for better foot placement and foot clearance; 2-3 x a week; Revision on: 11/17/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		PT - Physiotherapist PTA	
• Potential for PAIN and alteration in comfort level related to Osteoporosis, headache, displaced fracture involved the left nasal bone . Most Current MDS Pain Score is 1/3. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Promote MDS Pain Score of 0 through to the next review. Target Date: 03/09/2026	• Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls. Revision on: 11/08/2025 Revision by: Tola Omolade (ADOC) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • NON VERBAL CUES of PAIN for Kerry includes - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 10/16/2025		PCA Registered Practical Nurse RN RN Registered Practical Nurse PCA	
Allergies	Codeine, Penicillin		D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses					
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Resident	Ross, Kerry (922131005575)		Admission Date	07/23/2024	Location	2 222 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level related to Osteoporosis, headache, displaced fracture involved the left nasal bone . Most Current MDS Pain Score is 1/3. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)	Registered Practical Nurse RN			
<ul style="list-style-type: none"> Potential to experience discomfort/complications, pain, impaired mobility, embolism related to Probable significant minimal displaced fracture involved the left nasal bone Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To promote optimal healing of FRACTURE of displaced fracture involved the left nasal bone without complications. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with Kerry/SDM in decision making of fracture care management. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> HEALTH EDUCATION: Engage with Kerry/SDM to enhance her comprehension of (treatment, possible complications, etc.) associated with fracture. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of displaced fracture involved the left nasal bone for discomfort/ complications or changes to health status. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> PAIN MANAGEMENT for fracture prescribed and in place; refer to Pain Care Plan. 	Registered Staff			
<ul style="list-style-type: none"> Individualized Fall Prevention and Injury Reduction Plan Revision on: 11/08/2025 Revision by: Tammy Reaume (Registered Nurse)		<ul style="list-style-type: none"> Use alternative approaches to daily physical restraint for the resident: (specify: redirect with simple commands/encourage participation in activities of daily living (as appropriate)/assess for basic needs (e.g., hunger, pain)/establish individualized routines/pet therapy/music therapy) 				
Allergies	Codeine, Penicillin		D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)		Admission Date	07/23/2024	Location	2 222 A
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Potential to experience (Specify; rash, hives, anaphylaxis, etc.) related to ALLERGY to Codeine, Penicillin Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>		<div>• Kerry will be protected from exposure to allergen each day through next review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Kerry)/SDM in decision making and health teaching about ALLERGY to Codeine, Penicillin. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div> <div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div> <div>• ALLERGY ALERT: Kerry has ALLERGY to Codeine, Penicillin. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div> <div>• MD/PHARMACY ALERT: Notify the MD and Pharmacy of Kerry's Allergy to Codeine, Penicillin and minimize risk for exposure to allergen. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>				
<div>• Increased risk for FALLS related to wandering, exit seeking expression, history of falls, unsteady gait. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>		<div>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 03/09/2026</div>	<div>• PURPOSEFUL ROUNDING: Conduct purposeful rounding to assess residents needs; for pain, positioning, peri-needs or possessions for safety (self-transferring and ambulating without walker). Revision on: 11/13/2025 Revision by: Tola Omolade (ADOC)</div> <div>• COMMUNICATION: Involve/collaborate with (Kerry)/SDM in decision making in fall prevention Plan of Care. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div> <div>• CALL BELL: Place call bell within Kerry's reach, check that it is in working order and remind/encourage to use it. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</div> <div>• ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Kerry. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>			PCA	Q1H
						PCA	D/E/N
Allergies	Codeine, Penicillin		D.O.B.	04/06/1952		Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)		Admission Date	07/23/2024		Location	2 222 A
Last Care Plan Review Completed:		10/16/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none">Increased risk for FALLS related to wandering, exit seeking expression, history of falls, unsteady gait. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none">FOOTWEAR: Ensure Kerry is wearing appropriate footwear at all times Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)		PCA		
			<ul style="list-style-type: none">HIP PROTECTORS: Kerry wears hip protectors (when worn at all times,to safeguard against injury. Report to Registered Staff if not wearing.		PCA	D/E/N	
			<ul style="list-style-type: none">SPECIAL CONSIDERATION to PREVENT FALLS: Need supervision and reminder while resident sitting/laying in bed.		PCA		
			<ul style="list-style-type: none">ALARMS: Requires small clip alarm when in Chair and requires a bed pad alarm. Check placement and working order every shift. Kerry will often remove alarm. Staff respond when alarm is heard.		PCA	Q1H	
			Revision on: 05/23/2025 Revision by: Ravinder Kaur (Registered Nurse)				
			<ul style="list-style-type: none">ALARMS: Requires small clip alarm when in Chair and requires a bed pad alarm. Check placement and working order every shift. Kerry will often remove alarm. Staff respond when alarm is heard.		PCA	Q1H	
			Revision on: 11/13/2025 Revision by: Tola Omolade (ADOC)				
<ul style="list-style-type: none">SPIRITUAL BELIEFS: Kerry is of the Jewish Faith. Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		<ul style="list-style-type: none">To provide Kerry with spiritual support as interested through to the next review date. Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/09/2026	<ul style="list-style-type: none">SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including Hymn Sing, Church Service, etc. Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
			<ul style="list-style-type: none">PERSONAL CHOICE: Respect Kerry's right to decline participation in Spiritual Program due to disinterest. Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
<ul style="list-style-type: none">At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Altered Mood. ISE Score: 3/6 Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		<ul style="list-style-type: none">Team members will support Kerry in decreasing social isolation by participating in activities of personal choice for 10-20 times per month by the next review date. Revision on: 04/15/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 03/09/2026	<ul style="list-style-type: none">STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1: 1 visits, music programs, physical games, special events, etc.		Recreation Aide		
			Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
			<ul style="list-style-type: none">SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as; Watching/listening to TV, listening to music/radio, visiting with residents/team members, etc. Revision on: 04/15/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
			<ul style="list-style-type: none">ONE to ONE: Provide her with individual visits for; Conversation, reading,				
Allergies	Codeine, Penicillin			D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)			Admission Date	07/23/2024	Location	2 222 A
Last Care Plan Review Completed:		10/16/2025					

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Focus	Goal	Interventions	Position	Freq/Resolved		
		reminiscing, music, manicures and hand massage, humor, etc. Revision on: 10/08/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SOCIAL INTERACTION: Promote the opportunity for Kerry to make friendships and sit with friends during activities. Revision on: 08/12/2024 Revision by: Mitchell Atkinson (Recreation Aide)				
• Alteration in skin integrity with risk for infection or complications related to #10 Skin Tear - RIGHT OUTER FOREARM Revision on: 10/06/2025 Revision by: Janina Lucero (RN)	• To promote optimal healing of #10 Skin Tear - RIGHT OUTER FOREARM within the next review date. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) Target Date: 03/09/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with #10 Skin Tear - RIGHT OUTER FOREARM for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) • TREATMENT PLAN: Administer treatment for #10 Skin Tear - RIGHT OUTER FOREARM as per MD Order. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/06/2025 Revision by: Janina Lucero (RN)				
• Altered VISION related to history of cataracts. Surgery in 2021, . Subconjunctival hemorrhage to RT eye. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Kerry will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with Kerry/SDM for decision making pertaining to change in visual status as needed. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)				
• Potential to experience complications and side effects impacting quality of life related to use of (anti-psychotic medications) Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 02/04/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	Codeine, Penicillin		D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Ross, Kerry (922131005575)		Admission Date	07/23/2024	Location	2 222 A
Last Care Plan Review Completed:		10/16/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff		
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Kerry will have bowel incontinence managed every shift through to the next review period. Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	• BOWEL Continence level is (Total Incontinent). Report change to level as noted. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: Resident uses White brief throughout all shifts Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA PCA		
• Potential for Expressive Behaviour of WANDERING, VERBAL, Physical, RESISTANCE to care need related to Dementia, Sexual expressions, History of ETOH. Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be maintained to 0. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026 • Kerry will be supported to adjust to her new environment to lower risk of triggering former WANDERING, PHYSICAL inappropriate, VERBALLY inappropriate behaviour episodes through to the next review. Revision on: 08/03/2024 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	• TRIGGERS leading to PHYSICAL expressions such as Hitting or raising fist, kicking staff, scratching as expression of behaviour include anger, frustration, confusion, wanting to have alcohol: History of ETOH use, wanting to leave, wanting chocolate milk repetitively, wanting to be severed first in the dining room, other residents in her personal space. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • PHYSICAL Behaviour: If Kerry is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • PHYSICAL Behaviour: Increase monitoring and redirection with resident's physical expressions. She will start to ask for chocolate milk repeating this is a sign that she is triggered and may start to strike out at the team Revision on: 04/11/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL expression such as yelling, screaming, calling names, she will start to ask for chocolate milk repeating. as expression of behaviour include loss of control, frustration, misunderstanding care intention. Revision on: 04/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
Allergies	Codeine, Penicillin	D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses				
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Resident	Ross, Kerry (922131005575)	Admission Date	07/23/2024	Location	2 222 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, VERBAL, Physical, RESISTANCE to care need related to Dementia, Sexual expressions, History of ETOH.</p> <p>Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>• VERBAL Behaviour: If Kerry is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to bathe, refusing meals and fluids, bi-weekly injections as expression of behaviour include confusion, misunderstanding care needs, poor judgement. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Kerry is declining to bathe, washing hair, change clothes, having her brief changed or be receptive to receiving hygiene care. Offer re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit Kerry to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Monitor for exit seeking. Resident may get agitated and try to leave the home areas especially when wanting to go outside. Revision on: 10/30/2024 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SEXUAL Behaviour: If sexual verbalizations is noted calmly assist him/her back to the privacy of his/her room. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</p> <p>• SEXUAL Behaviour: Kerry demonstrates habit of unwanted kissing, touching, etc of PCA others breasts, groin, buttocks, etc. Limit unsupervised time with opposite sex, sit arms length away from others in activity, etc. Report episode to Registered Staff. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</p> <p>• SPECIAL CONSIDERATIONS: The resident is high intensity for preferred accommodation. Revision on: 03/15/2025 Revision by: Ranjita Yadav (RPN)</p>			
Allergies	Codeine, Penicillin	D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses				
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Resident	Ross, Kerry (922131005575)	Admission Date	07/23/2024	Location	2 222 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• Potential for Expressive Behaviour of WANDERING, VERBAL, Physical, RESISTANCE to care need related to Dementia, Sexual expressions, History of ETOH.</p> <p>Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>• BSO RECOMMENDATIONS: The resident is being followed by internal BSO.</p> <p>Physical: Hitting, spitting, scratching Verbal: Yelling , swearing, calling names Refuse care, exit seeking Triggers: New environment, confusion, loss of control, pain Recommendations: If resident is striking out, move away from her reach and use stop and go approach. Reapproach when she is calm/ready. Utilize a calm and gentle approach when communicating with this resident. Establish trust and build rapport by getting to know this resident. Have small talk. When encouraging resident for care, do not ask questions that can be answered "yes" or "no". Provide resident with options with positive outcomes. Ex. "Would you like to change into a red or blue shirt?" Leaving her clothing and food out may encourage her to eat and change. Use clear and simple instructions when providing care. Allow resident to process what was said. When resident refuses care, use a stop and go approach. Do not argue with her as this may escalate the situation. Provide validation and reassurance. The resident loves disco/folk music and may be played prior to care to improve her mood. Always introduce yourself and obtain consent prior to care. If resident is refusing to change soiled clothes, try saying "You sat in something and need to change your pants". When resident is verbalizing her wishes to go home, validate her thoughts. Redirect by saying that we are waiting to hear from the doctor. Watch out for early signs of exit seeking: Pacing, putting on coat, getting purse. Consider pain for possible trigger for expressions. Monitor for pain: facial grimacing, moaning, restlessness. Ensure all needs are met and comfort is maintained. Encourage rest periods through the day. Provide resident with engagement opportunities such as coloring, watching cat videos and crime shows. Continue using non pharmacological strategies outlined on the BSA and previous follow up to support the resident.</p> <p>Revision on: 10/13/2025 Revision by: Leslie Meloche (Recreation Aide)</p>				
<p>• Potential for altered bone density related to diagnosis of OSTEOPOROSIS.</p> <p>Revision on: 11/12/2024 Revision by: Shina Wadhwa (Physical Therapist)</p>	<p>• To treat and minimize complications associated with OSTEOPOROSIS through to the next review date.</p>	<p>• COMMUNICATION: Involve/ collaborate with Kerry/SDM in decision making of osteoporosis care management.</p> <p>Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</p>				
Allergies	Codeine, Penicillin		D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Ross, Kerry (922131005575)	Admission Date	07/23/2024	Location	2 222 A	
Last Care Plan Review Completed:		10/16/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Target Date: 03/09/2026	<ul style="list-style-type: none">• MEDICATION: Administer medication for osteoporosis management. Monitor effectiveness and for side effects.• MONITORING: Utilize holistic perspective of continuous monitoring of Kerry for management of osteoporosis for discomfort/ complications or changes to health status. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)	Registered Staff			
<ul style="list-style-type: none">• Potential to experience alteration in fluid intake related to refusal to intake fluids, Revision on: 10/30/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• To promote fluid consumption and minimize risk for dehydration each day through to the next review date Revision on: 10/30/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration.• PROMOTE FLUIDS: Promote (Kerry) to consume fluids; amount as per Nutrition Care Plan. Revision on: 10/30/2024 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff			
<ul style="list-style-type: none">• Potential for CONSTIPATION related to Dementia etc. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Kerry will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 10/29/2024 Revision by: Maryola Perion (RN) Target Date: 03/09/2026• To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 10/29/2024 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Kerry/SDM) for decision making regarding constipation management. Revision on: 10/29/2024 Revision by: Maryola Perion (RN)• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.• BOWEL PROTOCOL: In place as per MD order	Registered Staff Registered Staff			
<ul style="list-style-type: none">• Sleep Patterns; Potential for alteration in sleep patterns related to new environment.	<ul style="list-style-type: none">• To promote adequate rest/sleep for Kerry based on	<ul style="list-style-type: none">• REST PATTERN: Kerry wakes up at approximately 7:00am and resides at 10:00pm. Naps periodically throughout the day.	PCA			
Allergies	Codeine, Penicillin		D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)		Admission Date	07/23/2024	Location	2 222 A
Last Care Plan Review Completed:		10/16/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
Revision on: 08/12/2024 Revision by: Mitchell Atkinson (Recreation Aide)		identified sleep patterns/preferences each night through to the next review date. Revision on: 08/14/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 03/09/2026	Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)					
• Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM		• To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 08/09/2024 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	• COMMUNICATION: Involve/ collaborate with (Kerry)/SDM in decision making of thyroid care management. Revision on: 08/09/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with PCA HYPOTHYROIDISM for changes to health status and alteration or complications affecting endocrine function. Revision on: 08/09/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 08/09/2024 Revision by: Maryola Perion (RN)					
• Nutrition Risk Level		• Kerry will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 07/29/2024 Revision by: Helen Bradley (Dietitian (RD)) Target Date: 03/09/2026 • Will weigh within GWR of 60-70kg/BMI 26-30 through to next review date. Revision on: 07/23/2024 Revision by: Alexandra Breau	• Honor religious rituals related to diet/eating: No pork or beef Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Dinner: pudding (71 ml fluid) Mon, Wed, Fri, Sat Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Lunch: Magic Cup (118 ml fluid) Tues, Thurs, Sun Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Kerry is at moderate nutrition risk level. Revision on: 04/14/2025				PCA Registered Practical Nurse RN PCA Registered Practical Nurse RN Dietitian (RD)	E <

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		(Dietitian (RD)) Target Date: 03/09/2026 • Kerry will be adequately hydrated aeb drinking at least 80% of total fluid requirement: using 25 ml/kg through to next review date. Revision on: 10/08/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 03/09/2026	Revision by: Brittany Hyde (Registered Dietitian)				
			• DIET ORDER: Kerry will receive Regular diet, Minced texture with Pureed bread/bread products Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• THICKENED FLUIDS: Kerry drinks thickened fluids at mildly thick level 2 (nectar) consistency. Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• FLUID TARGET: Encourage Kerry to drink a minimum of 1200 ml per day Revision on: 10/08/2025 Revision by: Brittany Hyde (Registered Dietitian)			PCA	
			• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• DINING INSTRUCTIONS: - Pureed bread/bread products - No pork or beef - Allow double portions at meals for increased appetite - Provide feeding assistance to drink small, slow sips of fluids Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))			Registered Practical Nurse	
			• LABELLED SNACK AM: cottage cheese and apple sauce (99 ml fluid) Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	D/E
• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension related to Dementia. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)		• Kerry will be supported to make basic needs known each day through to the review date. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with Kerry/SDM for decision making about strategies needed to support effective communication. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • PRIMARY LANGUAGE: Kerry's primary language is English. Secondary is French. She is able to read and right in her primary language. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask				
Allergies	Codeine, Penicillin			D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)			Admission Date	07/23/2024	Location	2 222 A
Last Care Plan Review Completed:		10/16/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			yes/no questions, uses simple words/phrases). Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Kerry needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• URINARY (Mixed) INCONTINENCE related to Dementia Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)		• Kerry will have urinary incontinence managed every shift through to the next review period. Revision on: 12/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 03/09/2026	• INCONTINENCE PRODUCT: Resident uses White brief throughout all shifts • MONITORING: Utilize holistic perspective of continuous monitoring of Kerry for toileting needs, changes to health status and alteration of continence level. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • URINARY Continence level is (Total Incontinent). Report change to level as noted. PCA Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<div>• COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, altered judgement, etc. related to progression of Dementia. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</div>	<div>• Kerry will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 08/02/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 03/09/2026</div>	<div>• COMMUNICATION: Involve/collaborate with Kerry/SDM in decision making of Cognitive Loss for Dementia. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • ORIENTATION: Gently reorient to time as needed when Kerry is feeling lost or in confused state. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, (Kerry) can comprehend and follow. Revision on: 10/30/2024 Revision by: Danielle Loreto (RAI Coordinator)</div>		
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Fibroadenoma Stromal Calcification, Osteoporosis, Dementia, Hx of ETOH. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)</div>	<div>• Kerry will have ALL ADL care needs met each day through the next review date. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 03/09/2026</div>	<div>• BATHING: Kerry prefers shower/tub bath) on (Mondays and Thursdays on Evening shifts). Kerry participates by (providing a wash cloth to wash her face with cueing and encouragement). One staff (EXTENSIVE) assistance for bathing.(Nizoral shampoo apply on bath days.) When resistive 2 person maximal assistance. Revision on: 09/02/2025 Revision by: Teresa Quinto (RPN) • BED MOBILITY: Kerry is able to turn and reposition herself in bed. Due to cognition and strength she may require 1 team member extensive assistance. Revision on: 02/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Kerry requires 1 staff member extensive assistance for dressing both upper and lower body. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Kerry requires one staff to feed her during meals. She eats up on Orchid Lanes dining area.</div>	PCA <	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Fibroadenoma Stromal Calcification, Osteoporosis, Dementia, Hx of ETOH. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)		Due to her cognition she may get up from meals and need to redirected of given something to eat on the go. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Kerry will use a wheelchair for transfers and mobility until further reassessment.. Supervision needed when leaving the home area related to potential for elopement. Revision on: 11/18/2025 Revision by: Nada El-Kaafarani (Registered Practical Nurse) • PERSONAL HYGIENE: Kerry requires 1 staff extensive assist with washing her face and face and brush her teeth. One team member required to assist with providing pericare. Revision on: 04/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: 1 staff to provide LIMITED assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) • TOILET USE: Kerry requires 1 staff extensive assistance to take her to the toilet. Kerry may toilet herself at times.	PCA	
		Care level varies when she is expressive. May require 2 team maximal assistance. Revision on: 07/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFERRING: Kerry is able to transfer to and from bed with 2 PERSON EXTENSIVE assist. Revision on: 11/14/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) • ORAL CARE: Kerry has her own teeth with some missing.She requires 1 staff to brush her teeth.	PCA	
		Monitor for bleeding gums. Revision on: 01/02/2025 Revision by: Teresa Quinto (RPN)		

Allergies	Codeine, Penicillin	D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)	Admission Date	07/23/2024	Location	2 222 A

Last Care Plan Review Completed:	10/16/2025
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Kerry's Medical Treatment and End of Life Care Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor Kerry's expressed wishes and beliefs through to the End of Life. Revision on: 07/23/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none"> CPR: Kerry wishes to have CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 07/21/2025 Revision by: Danielle Loreto (RAI Coordinator)		

Diagnosis

Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified (E03.9), Urinary tract infection, site not specified(N39.0)

Allergies	Codeine, Penicillin	D.O.B.	04/06/1952	Physician	Albert Patrick Ng
Diagnosis	Fibroadenosis of breast(N60.2), Osteoporosis, unspecified(M81.9), Cataract, unspecified(H26.9), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9), Urinary tract infection, site not sp...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Ross, Kerry (922131005575)	Admission Date	07/23/2024	Location	2 222 A
Last Care Plan Review Completed:		10/16/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, refuse care, hoarding, verbal related to impaired cognition, Paranoia.</p> <p>Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p>	<p>• To promote safety for Nellie and/or others during each episode of Expressive Behaviour through to the next review date.</p> <p>Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026</p> <p>• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 2.</p> <p>Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/22/2026</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Nellie for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (frustration with room mate in 201, finding roommate in her bed. Roommates cognitive loss and does not have the ability to understand what Nellie may be asking)</p> <p>Revision on: 05/20/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Nellie is heard yelling, making cultural or racial comments, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</p> <p>Revision on: 06/16/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing medication, showering, ADL support, to allow the team to assess for lice and nats etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process)</p> <p>Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Nellie is declining to (refusing medication, showering, ADL support, to allow the team to assess for lice and nats etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate (hoarding of plastic spoons and plastic med cups and drinking cups, sugar packages and straws and leftover food in her drawers, eating food of resident P.D. plate at meals)</p> <p>Team to monitor for hoarding. Remove items when resident is not in her room. She will get angry with redirection and is not able to be redirected. Team to assess room when she is not present.</p>			
Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)	Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, refuse care, hoarding, verbal related to impaired cognition, Paranoia.</p> <p>Revision on: 10/22/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>Reminder Nellie that if she is hungry still after eating that she can ask the team for more food and not to eat off other residents plates.</p> <p>Revision on: 08/19/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PACES: Permit Nellie to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 04/29/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BSO RECOMMENDATIONS:</p> <p>The resident has expressed that she never wants to live in a long term care setting. Suggest utilizing terms and statements other then "long term care home" to help resident understand and accept that new environment will be her new surroundings.</p> <p>Consider calling her room "her new apartment", "we are here to keep you safe", "this is a safe place for people that need a place to live and we also provide free meals".</p> <p>Berkshire may be a familiar environment for the resident. Continue to evaluate risk for safety but do not deny residents need for being outside and freedom. Suggest team members accompany resident outside for cigarettes to ensure safety.</p> <p>Validate her feelings (sadness, frustration) and allow her to express her thoughts before attempting to distract.</p> <p>TRIGGERS for responsive expressions: Statements such as "You can't do that" or "you are not allowed" are upsetting for resident. The resident responds best to a kind, respectful and pleasant approach.</p> <p>Allow resident to be independent with choices and personal care (as she is able). If the resident becomes upset or is repetitive with statements, validate her feelings and provide reassurance. Offering compliments can help to change her mood.</p> <p>It is important to remember that Nellie has a cognitive impairment and may not realize the harshness of her words (racial slurs, name calling) Staff can respond: Nellie I understand you are frustrated but please don't call staff names as they are</p>			
Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)	Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Potential for Expressive Behaviour of WANDERING, refuse care, hoarding, verbal related to impaired cognition, Paranoia. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			<p>hurtful and you have always been kind.</p> <p>Recommend to keep lighters and cigarettes with registered team members. If resident cannot be accompanied to go outside provide explanation why the team is unable to assist her and give an honest time when they are available to take her.</p> <p>Reducing boredom/distraction from wanting to go outside-Nellie has responded well to tasks or work. Nellie enjoys being social, coffee, playing bingo, attending karaoke, TV and hanging her pictures on her wall</p> Revision on: 10/13/2025 Revision by: Leslie Meloche (Recreation Aide)				
<ul style="list-style-type: none">• Potential to experience alteration in RESPIRATORY FUNCTION related to Chronic Obstructive Pulmonary Disorder (COPD). Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To treat and minimize signs/symptoms or complications associated with Chronic Obstructive Pulmonary Disorder (COPD) each day through to next review date. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/22/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Nellie)/SDM in decision making of Respiratory Management for Chronic Obstructive Pulmonary Disorder (COPD). Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Chronic Obstructive Pulmonary Disorder (COPD) for changes to health status and alteration or complications affecting respiratory function. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MEDICATION: Administer medication (inhalers, etc.) for Chronic Obstructive Pulmonary Disorder (COPD) as per MD order and monitor for side effects. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none">• Sleep Patterns Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To promote adequate rest/sleep for Nellie based on identified sleep patterns/preferences each night through to the next review date.	<ul style="list-style-type: none">• REST PATTERN: Preferred bedtime 10PM, usual wake time 8AM. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
Allergies	Codeine			D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)			Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Sleep Patterns Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026					
• STRONG PARTICIPATION in Activities her ISE score is 6/6 Revision on: 10/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	• Nellie will be supported to maintain participation in activities 20-25 times per month by the next review date. Revision on: 10/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/22/2026	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; baking, bingo, concerts, cards, movies, parties, tea social, etc. Revision on: 10/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading paper, telephone conversations, watching TV in own room, walking, conversing with peers, etc. Revision on: 10/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - Accompany in elevator, Walk with, Guide to, Porter, Cue Direction, Reminders, etc. Revision on: 10/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) • ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, etc. Revision on: 10/18/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)				
• Potential for Persistent PAIN and alteration in comfort level related to ongoing oral pain, Arthritis and Sciatica, history of dental pain. Most Current LTCF Pain Score is 0 Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 01/22/2026	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)	RN Registered Practical Nurse Registered Practical Nurse RN			
• Potential to experience alteration in	• Nellie will be supported to	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Nellie				
Allergies	Codeine		D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Smedley, Nellie (922131005627)		Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
MOOD as exhibited by (agitation, frustration, complaints, withdrawal, isolation) related to impaired cognition, Paranoia Revision on: 06/22/2025 Revision by: Maryola Perion (RN)		maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026 • To support Nellie their identified coping strategies for mood/emotional stability each day through to the review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) • RESIDENT STRENGTHS: Build on Nellie effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)			
• SPIRITUAL BELIEFS: Nellie is of the Non-Religious Faith. but is spiritual in her aboriginal heritage Revision on: 05/26/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)		• To provide Nellie with spiritual support as interested through to the next review date. Revision on: 05/26/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) Target Date: 01/22/2026	• PERSONAL CHOICE: Respect Nellie's right to decline participation in Spiritual Program. Revision on: 05/26/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)			
• Nellie has the potential to experience a safety hazard/burn injury related to personal SMOKING habits. Smoking in her room (5/18/25) Revision on: 05/19/2025 Revision by: Maryola Perion (RN)		• Nellie will be safe when choosing to smoke through to the next review Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	• COMMUNICATION: Involve (Nellie/SDM) in review of smoking legislation (No smoking inside the home or within 9 meters from any doorway) and identify the designated area/s where smoking is permitted. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) • STORAGE: Smoking materials holds onto her own smoking materials. She wishes to have them on her due to not trusting others with them. Team to monitor for unsafe practices and if noted to report to the charge nurse immediately for follow up. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)		Social Worker	Clerk
Allergies	Codeine		D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)		Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Nellie has the potential to experience a safety hazard/burn injury related to personal SMOKING habits. Smoking in her room (5/18/25) Revision on: 05/19/2025 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none">SMOKING SUPERVISION: Nellie will be smoking ONLY in the presence of team- team will monitor from afar as she resides on a secured home area. Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)			Social Worker	
<ul style="list-style-type: none">Potential for muscular dysfunction, contractures and bone deformity related to right arm is shorter than her left at birth-clubbed Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">To treat and minimize signs/symptoms or complications associated with right arm shorter than her left through to the next review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none">MONITORING: Utilize holistic perspective of continuous monitoring of resident for management for discomfort/ complications or changes to health status. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)				
<ul style="list-style-type: none">Altered ability to complete Activities of Daily Living (ADLs) related to impaired cognition, Arthritis, Sciatica, clubbed right arm, GERD, Epilepsy. Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">Nellie will have ALL ADL care needs met each day through the next review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none">BATHING: Nellie has shower days scheduled for Monday and Friday days but she will often decline them. She is able to shower herself independently, may require set up. She prefers most often to wash herself at the sink in her room, hair and body on her own without assistance from the team. Offer to complete nail care on her shower days. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">BED MOBILITY: Nellie is able to turn and reposition in bed without any assistance. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">DRESSING: Nellie is able to dress herself up from head to toe without assistance. Revision on: 04/18/2025			PCA	
Allergies	Codeine			D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)			Admission Date	04/18/2025	Location	2 202 B
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Focus	Goal	Interventions	Position	Freq/Resolved		
		<p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>• EATING: Nellie is able to eat by herself independently and she eats in the floor dining room. She may require set up from staff at times. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: Supervision: Nellie is able to ambulate on the home area independently and /off the home area with supervision due to be on a secured floor. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Set up/Supervision: Nellie is able to wash his face, hands and provide peri-care. Nellie refuses assistance with hygiene care and would benefit from it. Team to encourage. Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• TOILET USE: Independent: Nellie is able to transfer herself on/off the toilet, able to cleanse and adjust her clothes after. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• TRANSFERRING: Independent: Nellie is able to transfer herself from a sit to stand position without any assistance. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• ORAL CARE: Nellie has her own teeth, she is able to provide her own oral care Teeth in ill repair. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	PCA			
<p>• Altered COMMUNICATION as exhibited by limitations to (comprehension) related to impaired cognition. Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• Nellie will continue to freely express self and adequately comprehend information each day through to the next review</p>	<p>• PRIMARY LANGUAGE: Nellie primary language is English. she is (specify able or unable to speak/understand) English.</p> <p>May miss intent of what is being communicated to her and need additional</p>				
Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng	
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Smedley, Nellie (922131005627)		Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved		
	<p>period.</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>Target Date: 01/22/2026</p> <p>• Nellie will be supported to make basic needs known each day through to the review date.</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>Target Date: 01/22/2026</p>	<p>information to aid in her understanding.</p> <p>Revision on: 04/29/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>				
<p>• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: Epilepsy</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• To treat and minimize signs/symptoms or complications associated with Epilepsy through to the next review date.</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>Target Date: 01/22/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Epilepsy for changes to health status and alteration or complications affecting neurological function.</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>• SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway.</p>	PCA Registered Staff All			
<p>• BOWEL Continence - Nellie is continent and has self recognition of urge to defecate.</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• Nellie to remain continent of bowels through next review date</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>Target Date: 01/22/2026</p>	<p>• BOWEL Continence level is CONTINENT. Report change to level as noted.</p> <p>• SELF TOILETING: Nellie toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted.</p> <p>Revision on: 04/18/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p>	PCA			
<p>• URINARY Continence - Nellie is continent and has self recognition of urge to void.</p> <p>Revision on: 04/18/2025</p>	<p>• Nellie will maintain continence level through next review date</p> <p>Revision on: 04/18/2025</p>	<p>• URINARY Continence Level is: CONTINENT</p> <p>• SELF TOILETING: Nellie toilets self. Each shift ask if she has voided and document</p>	PCA			
Allergies	Codeine		D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)		Admission Date	04/18/2025	Location	2 202 B
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Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Jenny Liu (RAI Coordinator)	Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Risk for Impaired SKIN INTEGRITY related to Impaired cognition, Epilepsy. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)	• To protect and maintain skin integrity each day through to the next review. Target Date: 01/22/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.	PCA		
• Altered VISION related to wearing glasses. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)	• Nellie to use eyeglasses for vision correction daily through to the next review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	• EYEGLASSES: Nellie has glasses but choose to not to use them often. She keeps them in her room. Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• Nellie potential for recurrence of SUBSTANCE ABUSE, withdrawal symptoms, mood/behaviour disturbances related to history of Crack cocaine and ETOH Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)	• Nellie will remain free of non-prescribed (alcohol/narcotics) through next review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	• SET BOUNDARIES: Discuss behavioural limits and expectations with Nellie. Be very clear with limits to establish behaviour boundaries. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)	Social Worker Director of Care Executive Director		
• Expressed Wishes and Beliefs related to Nellie Medical Treatment and End of Life Care Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)	• To support and honor Nellie expressed wishes and beliefs through to the End of Life. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	• CPR: Nellie wishes express DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details Revision on: 07/23/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)	Admission Date	04/18/2025	Location	2 202 B
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD). Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) 	<ul style="list-style-type: none"> • To treat and/or minimize complications associated with GERD each day through to the next review date. Target Date: 01/22/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. • POSITIONING: Encourage resident to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals. • MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects. 	Registered Staff PCA Registered Staff Registered Staff		
<ul style="list-style-type: none"> • COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of impaired cognition. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) 	<ul style="list-style-type: none"> • Nellie will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 2 Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/22/2026 	<ul style="list-style-type: none"> • ORIENTATION: Gently reorient to (person, place, time) as needed when Nellie is feeling lost or in confused state. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) 			
<ul style="list-style-type: none"> • Increased risk for FALLS related to impaired cognition, arthritis, Sciatica and Epilepsy. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) 	<ul style="list-style-type: none"> • To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/22/2026 	<ul style="list-style-type: none"> • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) • ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Nellie. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear at all times. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density 	PCA PCA PCA	D/E/N	
Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)	Admission Date	04/18/2025	Location	2 202 B
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Increased risk for FALLS related to impaired cognition, arthritis, Sciatica and Epilepsy. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)			to prevent injuries. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			
• Nellie is at high risk for ELOPEMENT related to exit seeking. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator)		• To promote Nellie safety and minimize risk for episode of elopement each day through next review date. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	• ALARM: Resident wears safety alarm on to left wrist to alert of attempted elopement. Respond immediately to alarm and inform Registered Staff. Revision on: 08/23/2025 Revision by: Teresa Quinto (RPN) • ALERT:Nellie has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. If brought out to smoke, team member must watch Nellie at all times Revision on: 06/20/2025 Revision by: Chelsea Campbell-Wright (ADOC) • DIVERSION ACTIVITY: Resident responds well to (playing music, doing puzzles, knitting, reading, conversing, singing, watching TV, etc.) to divert attention when exit seeking. Revision on: 04/18/2025 Revision by: Jenny Liu (RAI Coordinator) • ELOPEMENT ALERT: Redirect Nellie away from elevator or exit doors as needed. If Nellie wants to go outside for cigarettes she must be closely monitored Revision on: 06/16/2025 Revision by: Chelsea Campbell-Wright (ADOC)		PCA	
• Nutrition Risk Level		• Nellie will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 04/29/2025 Revision by: Danielle Loreto (RAI	• NUTRITION RISK: Nellie is moderate risk level. Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Nellie will will receive regular diet, regular texture Revision on: 04/18/2025 Revision by: Ronnie Fung (FSM - Food Services Manager)		Dietitian (RD)	
Allergies	Codeine		D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)		Admission Date	04/18/2025	Location	2 202 B
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Focus	Goal	Interventions	Position	Freq/Resolved
	<p>Coordinator) Target Date: 01/22/2026</p> <p>• Will weigh within realistic GWR 65-75 kg through to next review date. Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/22/2026</p> <p>• Nellie will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2001 ml/day (30 ml/kg using 66.7 kg weight) through to next review date. Revision on: 07/17/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/22/2026</p>	<p>• FLUID CONSISTENCY: Nellie drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/18/2025 Revision by: Ronnie Fung (FSM - Food Services Manager)</p> <p>• FLUID TARGET: Encourage Nellie to drink a minimum of 1601 ml per day. Revision on: 07/17/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• LABELLED SNACK AM: Cheese and crackers Mon/Wed/Fri Assorted fruit Tues/Thurs/Sat/Sun (For increased appetite) Revision on: 12/09/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>PCA</p> <p>PCA</p> <p>PCA</p>	<p></p> <p></p> <p>D/E</p>

Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Smedley, Nellie (922131005627)	Admission Date	04/18/2025	Location	2 202 B
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Diagnosis

Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), Sciatica(M54.3), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Paranoid personality disorder(F60.0), Chronic obstructive pulmonary disease, unspecified(J44.9)

Allergies	Codeine	D.O.B.	05/14/1961	Physician	Albert Patrick Ng
Diagnosis	Other epilepsy, not stated as intractable(G40.80), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Arthritis, unspecified, unspecified site(M13.99), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
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Focus	Goal	Interventions	Position	Freq/Resolved	
throwing all the items off the nursing desk and was threatening to strike other residents in the area related to Inability to COPE, Cognitive Impairment, exit seeking. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	Target Date: 02/28/2026 • Xiu will be supported to adjust to her new environment to lower risk of triggering former WANDERING, PHYSICAL, VERBALLY inappropriate, etc. behaviour episodes through to the next review. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	Revision on: 12/24/2023 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Xiu is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready, seek an interpreter. Seek Registered Staff assistance. Call Candy (Rec Aide) or Jenny (RAI) for translation. Revision on: 01/28/2023 Revision by: Elsie Calumpang (RN) • TRIGGERS leading to VERBAL (yelling, screaming, etc.) as expression of behaviour include (frustration, limitation in self expression, language barrier etc.) Other's going into the room, yellow band placed across door. Revision on: 01/18/2023 Revision by: Teresa Quinto (RPN) • VERBAL Behaviour: If Xiu is heard yelling, screaming calmly remind to lower her voice and that chosen words are not appropriate, seek an interpreter. Attempt to resolve her concern. Report episode to Registered Staff. Call Candy from recreation dept or Jenny from RAI dept. to help with translation. Revision on: 01/28/2023 Revision by: Elsie Calumpang (RN) • WANDERING: Permit Xiu to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 12/30/2023 Revision by: Jenny Liu (RAI Coord Back-up) • SPECIAL CONSIDERATIONS: The resident will be high intensity for accomodation. Revision on: 09/14/2024 Revision by: Ranjita Yadav (RPN) • BSO RECOMMENDATIONS: Xiu will be placed on HIN (effective Feb 7/23) Dresser drawer to be removed from the room due to safety concerns. Xiu can become Verbal: Yelling, screaming, Physical: Striking out, Triggers are confusion, other residents entering her room and language barrier	Registered Practical Nurse RN		
Allergies	Penicillins	D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Zhang, Xiu (922131005496)	Admission Date	12/29/2022	Location	2 205 A
Last Care Plan Review Completed:		11/28/2025			

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<p>• Potential for Expressive Behaviour of Hx of WANDERING, VERBAL, PHYSICAL, FRUSTRATION (threw drink at another resident), like to hoard her personal belongings and layer clothes. Hides her hearing aid and glasses in her jacket pocket, blocking door with chair and dresser, yelling, kicking and hitting, throwing all the items off the nursing desk and was threatening to strike other residents in the area related to Inability to COPE, Cognitive Impairment, exit seeking.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<p>not being served dinner first, does not like to be seated with male residents and absence of a loved one</p> <p>Interventions: Allow Ziu to sleep in and wake up on her own, monitor residents to keep them from entering her room, serve first for dinner, and seat with a female resident. Offer snacks and drinks if the resident is angry as her behaviors can be food related (believing she has missed a meal). Don't tell her that she has already eaten, instead offer her something to eat. Only female caregivers for showers/bath. Provide comfort and reassurance and assist with finding a staff member to translate when she is angry or agitated. Ziu enjoys watching chinese programs such as traditional dances on iPad and likes to socialize with other residents even with language barriers. Xiu now has the new behaviour that she wants to go to the main floor and go out to the bank to check she has any money left.</p> <p>Revision on: 10/13/2025 Revision by: Leslie Meloche (Recreation Aide)</p>			
<p>• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, antidepressant use etc.)</p> <p>Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To monitor effectiveness and for side effects of medication used each day through to the next review date.</p> <p>Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Xiu)/SDM in decision making and health teaching about medicinal regime and appropriate medication use.</p> <p>Revision on: 12/29/2022 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life.</p> <p>Revision on: 12/29/2022 Revision by: Maryola Perion (RN)</p> <p>• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and Registered</p>			
Allergies	Penicillins	D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses				
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Resident	Zhang, Xiu (922131005496)	Admission Date	12/29/2022	Location	2 205 A
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Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, antidepressant use etc.) Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		as needed.	Staff		
<ul style="list-style-type: none"> Risk for Impaired SKIN INTEGRITY related to Thin fragile Skin, Peripheral Arterial Disease, redness to left leg. Revision on: 05/22/2024 Revision by: Katie Savo	<ul style="list-style-type: none"> To protect and maintain skin integrity each day through to the next review. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none"> SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. 	PCA		
<ul style="list-style-type: none"> Potential to experience alteration in fluid volume or episode of DEHYDRATION related to diuretic use secondary to heart failure. Revision on: 03/18/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 12/26/2023 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Xiu)/SDM in decision making for plan of Hydration/Fluid consumption and risks of dehydration. Revision on: 12/26/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. Revision on: 12/26/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PROMOTE FLUIDS: Promote Xiu to consume fluids; amount as per Nutrition Care Plan. Revision on: 12/26/2023 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Increased risk for FALLS related to CVA, wandering, history of falls. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 07/04/2023	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Xiu)/SDM in decision making in fall prevention Plan of Care. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> CALL BELL: Place call bell within resident's reach, check that it is in working order 	PCA	D/E/N	
Allergies	Penicillins	D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses				
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Resident	Zhang, Xiu (922131005496)	Admission Date	12/29/2022	Location	2 205 A
Last Care Plan Review Completed:		11/28/2025			

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	Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	and remind/encourage to use it. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) • ADAPTIVE AIDS: Place adaptive aid/needed objects (walker) within easy reach of resident. Needs reminders to use walker as will forget to use it. Revision on: 12/13/2024 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Xiu. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)	PCA PCA PCA			
• Potential for Acute PAIN and alteration in comfort level related to CVA, back pain, 5th digit toe (pinky toe) is painful. MDS Pain Score is 0/3. Revision on: 12/26/2023 Revision by: Maryola Perion (RN)	• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026 • Promote MDS Pain Score of 0 through to the next review. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Xiu)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse Registered Practical Nurse RN			
• URINARY (Mixed) INCONTINENCE related occasionally incontinent Revision on: 07/28/2023	• Xiu will have urinary incontinence managed every shift through to the next review	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level Revision on: 08/26/2025				
Allergies	Penicillins		D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Zhang, Xiu (922131005496)		Admission Date	12/29/2022	Location	2 205 A
Last Care Plan Review Completed:		11/28/2025				

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Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Katie Wolters-Savo (RAI Coordinator)		period. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	Revision by: Danielle Loreto (RAI Coordinator) • URINARY Continence level is occasionally incontinent. Report change to level as noted. Revision on: 08/26/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Xiu wears a pullup size large Revision on: 11/12/2024 Revision by: Idylle Labrado (RPN)			PCA	
• Potential for BOWEL INCONTINENCE related to decreased mobility. Revision on: 06/30/2023 Revision by: Mitchell Atkinson (Recreation Aide)		• Xiu will have bowel incontinence managed every shift through to the next review period. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	• BOWEL Continence level is continent. Report change to level as noted. Revision on: 07/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: Xiu wears a pullup Revision on: 06/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			PCA	
• Potential to experience alteration in CARDIAC FUNCTION related to: Hyperlipidaemia, Hypertension, NSTEMI (June 2023), EF 30%- Heart failure. Revision on: 06/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with Hyperlipidaemia, Hypertension through to the next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Xiu)/SDM in decision making of Cardiac Care Management for Hyperlipidaemia, Hypertension. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hyperlipidaemia, Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hyperlipidaemia, Hypertension as per MD Order and monitor for side effects. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• Expressed Wishes and Beliefs related to Xiu Medical Treatment and End of Life Care Revision on: 04/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To support and honor Xiu's expressed wishes and beliefs through to the End of Life. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo	• Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 12/13/2024 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	Penicillins		D.O.B.	05/30/1938	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses						
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Resident	Zhang, Xiu (922131005496)		Admission Date	12/29/2022	Location	2 205 A	
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Focus	Goal	Interventions	Position	Freq/Resolved	
Coordinator)	(RAI Coordinator) Target Date: 02/28/2026				
• SPIRITUAL BELIEFS: Xiu is Non-Religious. Revision on: 02/06/2023 Revision by: Mitchell Atkinson (Recreation Aide)	• To provide Xiu spiritual support as interested through to the next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	• PERSONAL CHOICE: Respect Xiu's right to decline participation in Spiritual Program. Revision on: 02/06/2023 Revision by: Mitchell Atkinson (Recreation Aide)	ACT		
• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, etc. related to Language barrier, CVA, refuses hearing aids (Keeps them on herself-Will not give to team). Revision on: 01/16/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Xiu will be supported to maintain current communication abilities to express self, comprehend information, etc. each day through to the review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026 • Xiu will be able to make basic needs known each day through to the review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Xiu)/SDM for decision making about strategies needed to support effective communication. Cue cards used for communication. Revision on: 09/27/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • PRIMARY LANGUAGE: Xiu's primary language is MANDARIN. She can make herself known. May requires some support with demonstration and non-verbals to aid best. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • INTERPRETER Required as needed: Staff that speaks MANDARIN. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). INSTRUCTION GUIDANCE: Xiu needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 02/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Nutrition Risk Level	• Xiu will be adequately nourished aeb consuming 51-100% at meals and snacks	• LABELLED SNACK PM: Instead of high sugar snack, provide: Greek yogurt Mon/Wed/Fri/Sun Revision on: 10/14/2025	PCA Registered Practical	D	
Allergies	Penicillins	D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Zhang, Xiu (922131005496)	Admission Date	12/29/2022	Location	2 205 A
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Focus	Goal	Interventions	Position	Freq/Resolved		
	<p>through to next review date. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/28/2026</p> <p>• Will weigh within GWR/IBW/Realistic weight range of 61-68kg/BMI 25-30 through to next review date. Revision on: 06/10/2024 Revision by: Laura Seibel (Dietitian (RD)) Target Date: 02/28/2026</p> <p>• Xiu will be adequately hydrated aeb drinking 1500-2000 ml/day (23-30 ml/kg using 66.3 kg weight) as per fluid restriction for heart failure. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/28/2026</p>	<p>Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Xiu is moderate risk level. Revision on: 11/30/2023 Revision by: Anna Slack (Registered Dietitian)</p> <p>• DIET ORDER: Xiu will receive regular diet, minced texture. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID CONSISTENCY: Xiu drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/02/2023 Revision by: Anna Slack (Registered Dietitian)</p> <p>• FLUID TARGET: Encourage Xiu to drink 1500-2000 ml/day as per fluid restriction for heart failure. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIABETIC CARE: No juice or snacks that are high in sugar per POA request. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Nurse RN Dietitian (RD)</p> <p>PCA</p> <p>Diet PCA</p> <p>PCA</p> <p>PCA</p>			
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA)	• To treat and minimize signs/symptoms or complications associated with CEREBROVASCULAR ACCIDENT (CVA) through to the next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	• COMMUNICATION: Involve/ collaborate with (Xiu)/ SDM in decision making of neurological care management for CEREBROVASCULAR ACCIDENT (CVA). Revision on: 12/29/2022 Revision by: Maryola Perion (RN)	PCA			
Allergies	Penicillins		D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses					
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Resident	Zhang, Xiu (922131005496)		Admission Date	12/29/2022	Location	2 205 A
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Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of PENICILLIN per POA. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> Xiu will be protected from exposure to allergen each day through next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Xiu)/SDM in decision making and health teaching about ALLERGY to Penicillin. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications mortality. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ALLERGY ALERT: Xiu has ALLERGY to Penicilrash, hives, swelling, difficulty breathing, etc.). Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MD/PHARMACY ALERT: Notify the MD and Pharmacy of Xiu's Allergy to Penicillin and minimize risk for exposure to allergen. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Xiu is at high risk for ELOPEMENT related to History of exit seeking, wandering. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To promote Xiu's safety and minimize risk for episode of elopement each day through next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none"> ALERT: Xiu has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ELOPEMENT ALERT: Redirect Xiu away from elevator or exit doors as needed. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)		PCA	
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (difficulty concentrating, poor judgement, etc.) related to Cardiovascular Accident (CVA) Revision on: 12/29/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> Xiu will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 09/27/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to person, place, time as needed when Xiu is feeling lost or in confused state. Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PERSONAL ROUTINE: Provide consistency in care routine and activities Revision on: 12/29/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> CUE TASKS: Break tasks into manageable subtasks, Xiu can comprehend and follow. Revision on: 11/28/2025		PCA	
Allergies	Penicillins		D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses					
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Resident	Zhang, Xiu (922131005496)		Admission Date	12/29/2022	Location	2 205 A
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			Revision by: Danielle Loreto (RAI Coordinator)					
<ul style="list-style-type: none">• Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Impaired Cognition. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• Xiu will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none">• BATHING: Xiu prefers (shower/tub bath) on (Tuesdays and Saturdays on Day shifts). Xiu participates by (holding a wash cloth and being cued, she is encouraged to do as much for herself as to avoid triggering her). One staff (EXTENSIVE) assistance for bathing.			PCA		
			ONLY Female caregivers.					
			Revision on: 07/04/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			<ul style="list-style-type: none">• BED MOBILITY: Xiu is capable of turning and repositioning herself independently without assistance or oversight from the team. Revision on: 07/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			PCA		
		<ul style="list-style-type: none">• Xiu will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care tasks are met each day through to the next review date. Revision on: 07/04/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none">• DRESSING: Xiu requires limited TO extensive assist from one team member to dress from head to toe.			PCA		
			She will dress herself at times as well.					
			Revision on: 11/28/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			<ul style="list-style-type: none">• EATING: Xiu eats independently with staff supervision and set-up. She eats in the unit dining room - 2nd floor. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA		
		<ul style="list-style-type: none">• LOCOMOTION: Xiu requires the use of a walker with ambulation and is independent. Reminders needed to use walker. Revision on: 08/26/2025 Revision by: Danielle Loreto (RAI Coordinator)				PCA		
			<ul style="list-style-type: none">• PERSONAL HYGIENE: Xiu requires set up from staff with limited to extensive assistance. She is able to comb her hair, wash/dry her hands and face.				PCA	
			She may need more support when fatigued.					
			Revision on: 11/28/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			<ul style="list-style-type: none">• HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water,			PCA		
Allergies	Penicillins		D.O.B.	05/30/1938		Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Zhang, Xiu (922131005496)		Admission Date	12/29/2022		Location	2 205 A	
Last Care Plan Review Completed:		11/28/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Impaired Cognition. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)		<p>apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> TOILET USE: Xiu will transfer onto and off of her toilet independently though requires the team to assist with adjusting her clothes, providing pericare re-applying incontinence products as needed. <p>She will complete all of the toileting tasks on her own at times as well. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> TRANSFERRING: Xiu is able to transfer from a sit to stand position independently. Revision on: 09/27/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> ORAL CARE: Xiu has one tooth missing. She is Independent with her oral hygiene with staff to reminder her. Revision on: 12/29/2022 Revision by: Maryola Perion (RN)	PCA	

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
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Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperlipidaemia, unspecified(E78.5), Vitamin B12 deficiency anaemia, unspecified(D51.9), Acute subendocardial myocardial infarction(I21.4), Heart failure, unspecified(I50.9), Peripheral vascular disease, unspecified(I73.9)

Allergies	Penicillins	D.O.B.	05/30/1938	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Unspecified diabetes mellitus with poor control, so described(E14.64), Benign hypertension(I10.0), Mild cognitive disorder(F06.7), Hyperli...See last page for a complete listing of the Resident's diagnoses				
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